Two unvaccinated Pennsylvanians dead as measles epidemic accelerates

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Two people are dead in Pennsylvania of a disease the United States eliminated a quarter of a century ago. They are the first measles deaths in the commonwealth in 35 years and the first anywhere in the country this year. The Pennsylvania Department of Health confirmed the deaths on Tuesday, August 25. Both people lived in Lancaster County, and neither was vaccinated.

Health Secretary Debra Bogen told reporters that because measles has been largely eliminated in the commonwealth for more than three decades, people "don't fully understand the potential severity" of it. She would not say whether either person was a child or an adult, or whether either death involved a pregnant woman or an infant. The department held the briefing at Penn Medicine Lancaster General Health's Women & Babies Hospital.

The state has now confirmed 393 cases across 28 counties, 86 of them in the past week. Seventy people have been hospitalized, nearly one in five of everyone infected. Two doses of the measles, mumps and rubella (MMR) vaccine are 97 percent effective, and state health officials say the outbreak has spread almost entirely among the unvaccinated.

The outbreak is not slowing. Pennsylvania recorded 212 cases between August 1 and August 24, more than half the year's cases in 24 days, while schools have not even fully reopened.

Governor Josh Shapiro spoke to reporters the same morning. Trump's anti-vaccine Health Secretary Robert F. Kennedy Jr. had telephoned to offer federal staff but was turned down. Shapiro claimed his state could handle it and told Kennedy that his statements about vaccines are frightening parents.

Nearly every account of this outbreak describes it as Amish and Mennonite families refusing to vaccinate their children. The state's own case data says otherwise. Adults between 18 and 49 account for 249 of the 393 cases, 63 percent of the total. Children under 18 account for 123. Nationally, about 69 percent of measles cases last year were in children and teenagers. Pennsylvania has inverted the pattern. And the Lancaster outbreak accounts for 185 of the state's cases, under half. The rest of Pennsylvania's measles is elsewhere.

The Plain communities are also smaller than the coverage implies. Lancaster County has some 560,000 residents. Amish and Old Order Mennonite households number perhaps 50,000 of them. And the county has no health department of its own. It relies on the state, which has run 91 pop-up clinics and given more than 4,100 MMR doses.

The low coverage is real, but chronic. Kindergarten MMR coverage in Lancaster County sits at about 88 percent, and the Association of Immunization Managers puts Amish coverage at about a quarter. None of that is new. What is new is everything around it. These communities have had low vaccination rates for decades and were protected by high rates in the population surrounding them, but that protection is now gone.

The same communities faced a rubella outbreak in 1991, the year Pennsylvania last recorded a measles death. Physicians at Lancaster General vaccinated hundreds of people to stop it, and out of that effort they built the Child Protect Clinic, which still gives free vaccines to uninsured children and still does the slow work of earning the trust of families who avoid doctors.

The clinic is still open, but the high vaccination rates in the surrounding population that once kept these outbreaks small are gone. A child who enters kindergarten unvaccinated does not become vaccinated when the next class arrives. She stays susceptible, and she grows up. Robert Bednarczyk and Saad Omer showed a decade ago that so long as coverage sits below 100 percent, the pool of unprotected people rises every year even when the annual percentage holds steady. Four decades of unvaccinated children in these communities are now four decades of unvaccinated adults, and the virus is finding them.

The clearest evidence sits at the other end of the age curve. Pennsylvania has recorded no cases at all in anyone 65 or older. Those people were born before 1961, when the country reported half a million measles cases a year and actual infections ran to three or four million. They are immune because they were infected, not because anyone protected them.

The Centers for Disease Control and Prevention (CDC) has confirmed 2,777 cases nationally as of August 20, of which 2,761 were reported by 47 jurisdictions. Last year there were 2,289. More measles has been reported in the United States since Kennedy was sworn in on February 13, 2025, than in the 25 years from 2000 through 2024 combined.

This is familiar territory for Kennedy. He went to a Lancaster County farm in 2021 and told Amish families that health authorities want them vaccinated "because they cannot stand the fact that you are healthy." In April 2025 he appeared outside a Mennonite church in Seminole, Texas, after a second unvaccinated child died there. Five people have died of measles in two years under Kennedy's watch, more than in the previous three decades combined.

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On August 17, eight days before Pennsylvania announced the deaths, the CDC released kindergarten immunization data for the 2025-26 school year. Two-dose MMR coverage has now fallen to 92.4 percent from 95.2 percent in 2019-20, leaving about 280,000 kindergartners unprotected. Exemptions reached 4.2 percent, the highest ever recorded. Thirty-nine states now sit below the 95 percent threshold and 18 below 90 percent, against 28 and three before the pandemic. In 24 states the exemption rate has passed 5 percent, which puts the threshold out of reach even if every remaining child is vaccinated.

On August 10, 15 days before the deaths, President Donald Trump signed an executive order cutting the number of diseases every child is advised to be protected against to 11, down from the 17 the CDC recommended in 2024. Kennedy stood beside him, as did Jay Bhattacharya. The order directs the attorney general to sue states that refuse religious exemptions to school immunization requirements.

The lawsuits are aimed at school vaccination requirements. Those requirements are what force coverage back up, compelling the doses that were missed in infancy. In Pennsylvania, 93 percent of kindergartners had both MMR doses this school year, against 97 percent of 12th-graders. Strip out the requirement and the catch-up stops.

The order also tells parents to give MMR as three separate shots once single-antigen vaccines are available. They are not available. Merck stopped making them in 2009 and now says restoring them could take a decade. Until then, a parent who follows the advice protects a child against none of the three diseases. Jan Carney, president of the American College of Physicians, notes that three visits mean three copays, and those fall on working-class families.

Measles cost the United States $244.2 million in 2025, or $104,629 per case, according to Chad Wells, Alison Galvani and colleagues at Yale. Almost none of it was medical care. Outbreak response took 65 percent and lost work and school 32 percent, against 3 percent for treating the sick.

The bill lands hardest where protection is thinnest, because cost per case runs inversely to local immunity. Set against that is what the country is giving up. The same researchers estimate that measles vaccination prevented 104 million cases and 85,000 deaths in the United States between 1994 and 2023.

The conditions that define elimination no longer hold, as an analysis published in *The Lancet* in April documented in detail. When the Pan American Health Organization's Regional Verification Commission reviews the United States and Mexico in November, it will record what the surveillance data already show. Canada lost its status last November and took the measles-free designation of the entire Americas with it. Ralph Abraham, then the CDC's principal deputy director, called the coming loss the "cost of doing business" in January.

The Republicans have carried out the demolition openly. Trump signed the order. Kennedy fired all 17 members of the vaccine advisory committee and cut the childhood schedule. Bhattacharya demanded mass infection in 2020 and now runs the National Institutes of Health. In 18 months, they have squandered an epidemiological position that took 50 years to build.

But the ground was prepared for them. Coverage began falling in 2020 and kept falling through the Biden administration, which shut down the emergency programs, ended free testing and vaccination, dismantled the last mitigation measures in schools and declared the pandemic over while COVID-19 was killing hundreds of Americans a day. It presided over the collapse of trust that Kennedy has since harvested. Shapiro, a Democrat, now denounces federal rhetoric from a state whose kindergarten coverage fell on his watch.

That is the shared premise of both parties: that public health is a matter of what people are told rather than what they are given. Neither proposes to build a health department in Lancaster County. Neither proposes to pay the contact tracers whose labor is two thirds of the cost of an outbreak. The Republicans dismantle public health provision and the Democrats accept its collapse, while working people are forced to bury their dead.

What has been done to measles is being done to cyclosporiasis, to Ebola in the Democratic Republic of Congo, to H5N1 all flowing from the criminal response to the COVID-19 pandemic. This is a class policy aimed at lowering the life expectancy of the working class. Vaccination is cheap and profits nobody. The infrastructure that delivers it employs public workers and returns no dividend, while extended life expectancy carries with it the costs for social programs like Medicare and Social Security. That is why public health is being destroyed, and it will not be rebuilt by appeals to the officials destroying it.

Two people in Lancaster County are dead of a disease that a vaccine developed in 1963 prevents in 97 percent of those who receive two doses, in a county where an institution built in 1991 to vaccinate exactly these families is still open.

Health workers, scientists, educators and parents must build rank-and-file committees independent of the trade unions and of both capitalist parties, and take up the fight to defend public health. These committees must place public health under the democratic control of the working class, expropriating the pharmaceutical monopolies and running them as public utilities.

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