4 measles-associated deaths in Pennsylvania; zero in the federal count

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Pennsylvania has confirmed four measles-associated deaths in four weeks, the first in the commonwealth in 35 years: an unvaccinated 18-year-old in Mifflin County, an unvaccinated 40-year-old woman in Jefferson County and two unvaccinated infants in Lancaster County.

The federal government has counted none of these deaths. The Centers for Disease Control and Prevention (CDC) lists zero measles-associated deaths for 2026 on its public website.

Pennsylvania leads the country with 693 confirmed cases, 17 of them added in the past week, and 295 in Lancaster County alone. The rest are spread across the state. The outbreak is no longer confined to one county or one community.

Nationally the CDC recorded 3,294 cases as of September, 10 across 47 jurisdictions, arising from 38 outbreaks that account for 95 percent of infections. That already exceeds the 2,289 cases recorded in all of 2025 and dwarfs the 285 of 2024. At the average pace of 13 cases a day, the 2026 total would reach roughly 4,750 by December 31, more than double last year. At the pace of the past fortnight, 391 cases in 14 days, it would reach roughly 6,400. Both figures are conservative. Measles peaks in late winter and spring, and Paul Offit of the Children's Hospital of Philadelphia expects the coming months to be worse. Amesh Adalja of the Johns Hopkins Center for Health Security says many of the sick are never tested, so the true count is higher still.

Between 2000 and 2024, the entire quarter century after domestic elimination of the disease, the United States recorded about 4,485 measles cases. The 2026 total alone is already 73 percent of that. Taken together, 2025 and 2026 exceed the preceding 25 years by about 1,100 infections. Before the vaccine was licensed in 1963, 3-4 million Americans caught measles every year, 48,000 were hospitalized and 400 to 500 died. The Pan American Health Organization reviews the country's elimination status in November and is widely expected to revoke it.

The most recent death was an unvaccinated 18-year-old in Mifflin County who developed acute disseminated encephalomyelitis, an inflammatory complication occurring in roughly one of every 1,000 measles cases, in which the immune system attacks the myelin surrounding nerve fibers in the brain and spinal cord.

On September 12 an unvaccinated 40-year-old woman in Jefferson County died. She had asthma and chronic obstructive pulmonary disease and had been exposed to a laboratory-confirmed case. Jefferson County Coroner Greg Furlong called it a heartbreaking loss and a reminder that measles can be life-threatening. The county, three and a half hours northwest of Lancaster, has 26 confirmed cases.

The two Lancaster County infants died in August and the deaths were announced together on August 25. One had been born with Amish lethal microcephaly, a rare genetic disorder. The Lancaster County coroner investigated and confirmed that measles caused the death. County and state officials agree on that case entirely.

The other was a newborn. His mother, pregnant and unvaccinated, was taken to a clinic on August 13 while acutely ill with measles. She went into labor the next day and the boy died about half an hour after birth. The coroner's pathologist attributed the death to a lacerated spleen, found the organ neither enlarged nor inflamed, and concluded that measles played no part. Measles was nevertheless entered in Part II of the death certificate, as a contributing condition. The coroner has separately described the baby as stillborn, which conflicts with the account published in the *Atlantic* that the child had a pulse but never drew breath.

The Department of Health and Human Services has justified excluding Pennsylvania's deaths from federal tables by citing conflicting characterizations between state and local authorities. Three of the four carry no such conflict.

Twists and turns at the CDC

Between August 25 and September 15 the federal record of these deaths changed four times.

On Tuesday, August 25, Pennsylvania announced the two Lancaster County deaths. At 4 p.m. the CDC posted condolences on X to the families affected by "two measles-associated deaths." A Pennsylvania official later told Reuters that CDC staff had already accepted the state's classification.

At 5:17 p.m. on Wednesday, August 26, Health and Human Services Secretary Robert F. Kennedy Jr. posted that the deaths "may even have been altogether fabricated by one of the Governor's hopeful staffers."

At 9:38 p.m. on Friday, August 28, 52 hours later, the CDC published its weekly update with the deaths removed. Friday is the agency's routine slot for data gathered through Thursday noon. The archived capture shows the public database listing zero measles-associated deaths for 2026.

On Sunday, August 30, the table briefly showed two deaths before the figure was replaced with an asterisk. Katelyn Jetelina recorded the change at 5:54 p.m. The department later said staff had published multiple versions of the text inadvertently.

On Monday, August 31, the *Washington Post* and the *New York Times* reported that three officials, speaking anonymously for fear of retaliation, said CDC Director Erica Schwartz had personally ordered the exclusion. Deb Houry, the agency's chief medical officer when it counted two dead Texas children without hesitation in 2025, who resigned a year ago over the politicization of the agency, called Schwartz's action a major deviation from protocol.

On Thursday, September 3, Reuters reported, citing three sources, that Kennedy had instructed Schwartz to remove the reference and that she obeyed without objection. Spokeswoman Grace Davis Jamison said the agency had requested details to determine cause of death. Schwartz did not respond. The same day Jeremy Faust published screenshots in Inside Medicine showing the CDC's internal One CDC Data Platform still

recording both deaths as confirmed, verified by active CDC staff. Every other figure on the internal dashboard matched the public page. Only the deaths differed.

On Friday, September 4, the explanatory text was deleted and replaced. Until that day the page read:

> This week's measles outbreaks update will not include the two measles-associated deaths reported by the Pennsylvania Department of Health on August 25 while CDC reviews additional information regarding the circumstances and causes of death. At this time, available information does not establish whether measles caused or contributed to the deaths or whether the individuals died from other causes while infected with measles. CDC will update the national count as additional information becomes available.

In its place:

> The National Center for Health Statistics (NCHS) does not currently have any death records from 2026 that indicate measles is the underlying cause. CDC is also working with the Council of State and Territorial Epidemiologists (CSTE) to develop a standardized case definition for deaths due to measles.

Four things disappeared: Pennsylvania, August 25, the two deaths, and the admission that anything was being withheld. The September 4 text is what remains on the page today.

What the new rule does

Under the established arrangement, state health departments lead measles investigations and notify CDC, which aggregates what they report. The agency still describes that division of labor on the same page. Nirav Shah, its principal deputy director until February 2025, has explained that infection-associated death counts have always covered anyone who tested positive and died within roughly 10 days, without adjudicating whether they died with the disease or because of it.

There has never been a separate case definition for a measles-associated death. Deaths were an outcome field on a confirmed case report. The announcement that a definition is now being developed with the Council of State and Territorial Epidemiologists concedes that the Pennsylvania deaths were excluded before any standard existed to exclude them.

The new requirement cannot be met. A death certificate divides cause into two parts. Part I records the causal sequence ending in the underlying cause; Part II lists contributing conditions. The National Center for Health Statistics codes one underlying cause per death. Measles was entered in Part II for the Lancaster newborn, so no NCHS record will ever name it as the underlying cause. If the case was registered as a fetal death, it enters a separate system that never reaches national mortality files. NCHS coding lags outbreaks by months. Under this standard the three measles-associated deaths in Texas and New Mexico in 2025 would not have been counted while transmission was underway.

On September 15 Kennedy denied that any data had been altered while restating the NCHS requirement. The definition review has no deadline.

Who manufactured the mistrust?

A Reuters/Ipsos poll completed on September 14 found 76 percent of adults consider the MMR vaccine safe for children, down from 84 percent in May 2020, with the sharpest fall among Republicans. Only 19 percent approve of Trump's handling of the measles outbreak.

Both capitalist parties are responsible for the crisis in public health. The Democratic Party ended free COVID testing and vaccination, drove children back into unventilated classrooms and declared the COVID pandemic over while hundreds of Americans were dying each day. Kennedy built a career in this wreckage, insisting that vaccines are more dangerous than the diseases they prevent. And CDC reports zero measles-associated deaths while its own internal system records them. Every American who concludes that federal health data cannot be believed has been taught that by the federal health agencies.

None of this justifies refusing vaccination. The measles vaccine is safe and effective, and mass immunization is an elementary requirement of public health and the self-defense of the working class. The campaign against it is a reactionary movement of the fascist right, and its agitation dovetails with the assault on public health carried out by the oligarchy that funds both parties. The collapse of confidence is the work of the ruling class, not of the workers who have been lied to and abandoned.

Schwartz told the Senate on July 15 that she would follow the evidence and maintain radical transparency. She was confirmed 51 to 44 on August 5. Within weeks she accepted Kennedy's directive without protest, and she has said nothing publicly since. An agency that behaves this way teaches the public that federal health data is a political product, and every parent who refuses a vaccine next year will have been given the reason by the people running the health system.

Neither party offers any resources against the resurgence of a long-conquered disease. Lancaster County, the center of the outbreak, has no health department of its own. No government, local, state or federal, is funding the contact tracers whose labor is two-thirds of the cost of containing an outbreak. Democratic Governor Josh Shapiro announced the deaths and then withheld the epidemiological details that would have settled the dispute. Kennedy says they may not have happened at all.

A disease the United States eliminated a quarter of a century ago is killing people again, and the answer of the federal government has been to remove the dead from the record. That is not public health. It is the negation of it, carried out by the institutions built to practice it.

Measles is one measure. The same state has stopped counting the COVID-19 dead, abandoned the Ebola epidemic in the Congo, closed hospitals across working-class communities and cut Medicaid, while health care costs drastically outstrip wages. These are not separate failures of administration. They are one crisis, and it is working people who are paying the price.