

THE CHANGING LANDSCAPE OF VACCINE PREVENTABLE DISEASES IN WASHINGTON STATE

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Benton-Franklin
Health District



Objectives

1

Identify emerging and vaccine-preventable diseases that may affect our community and describe their current epidemiology, including affected populations and risk factors.

2

Analyze how changes in vaccination rates may influence the future prevalence of vaccine-preventable diseases, including the role of herd immunity thresholds and the impact of declining coverage.

3

Describe strategies for collaborating with local public health departments to monitor, prevent, and respond to communicable disease in the community.

Outline

- About the Health Officer
- Epidemiology of measles and pertussis
- Status of other emerging and vaccine preventable diseases
- How will changing vaccination rates among the population affect risk of outbreaks
- When and how to work with local public health

About the Health Officer



- Every county has a local health department or district (public health)
- Notifiable conditions are reported to local public health, who then investigate
- Every public health department has a health officer, a physician with public health experience who acts as the medical director of the department
 - Lead outbreak response efforts
 - Provide guidance on testing
 - Monitor epidemiologic data for concerning trends
 - Act as a trusted source of public health information for local physicians and the general public

Measles in the United States, 2025 and 2026

2,289

US cases in 2025, the most in decades. 12% hospitalized, three deaths.

3,294

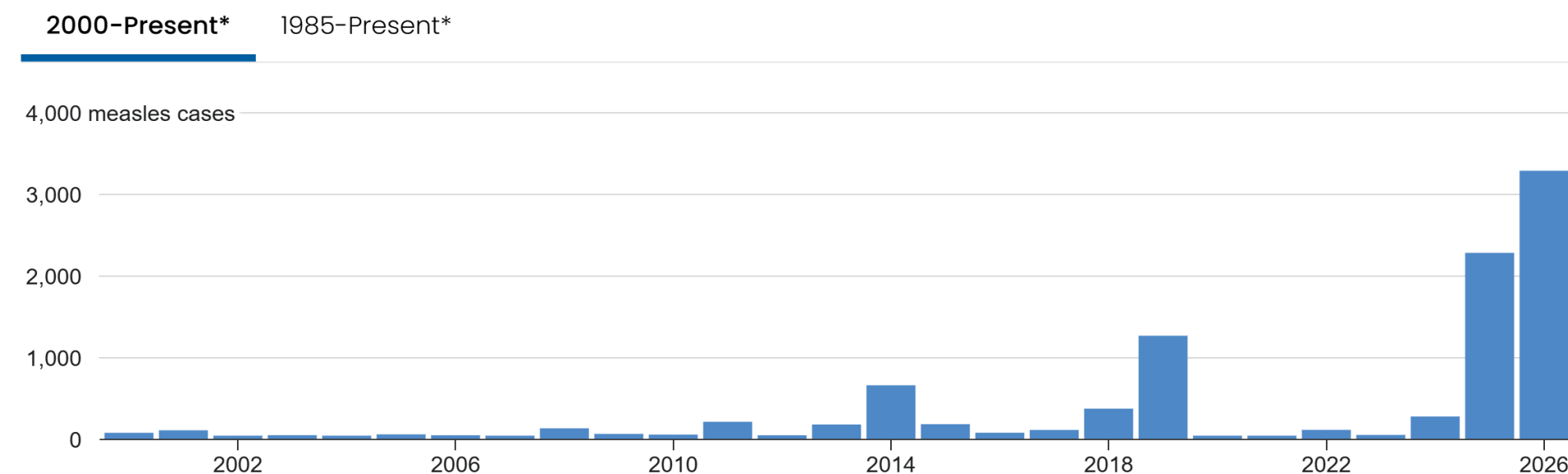
US cases 2026. 4 likely deaths

56

Washington cases in 2026 through August 26. There were **12** in all of 2025, all travel-related.

Yearly measles cases

as of September 10, 2026



Washington Measles Cases, 2026

2026 Measles Cases by County of Residence

County of Residence	Number of Cases	Percent of Total Cases
Clark	19	34%
Snohomish	14	25%
Kittitas	7	13%
Walla Walla	7	13%
King	3	5%
Stevens	3	5%
Grant	2	4%
Spokane	1	2%
Total Measles Cases	56	100%

2026 Measles Cases by Age

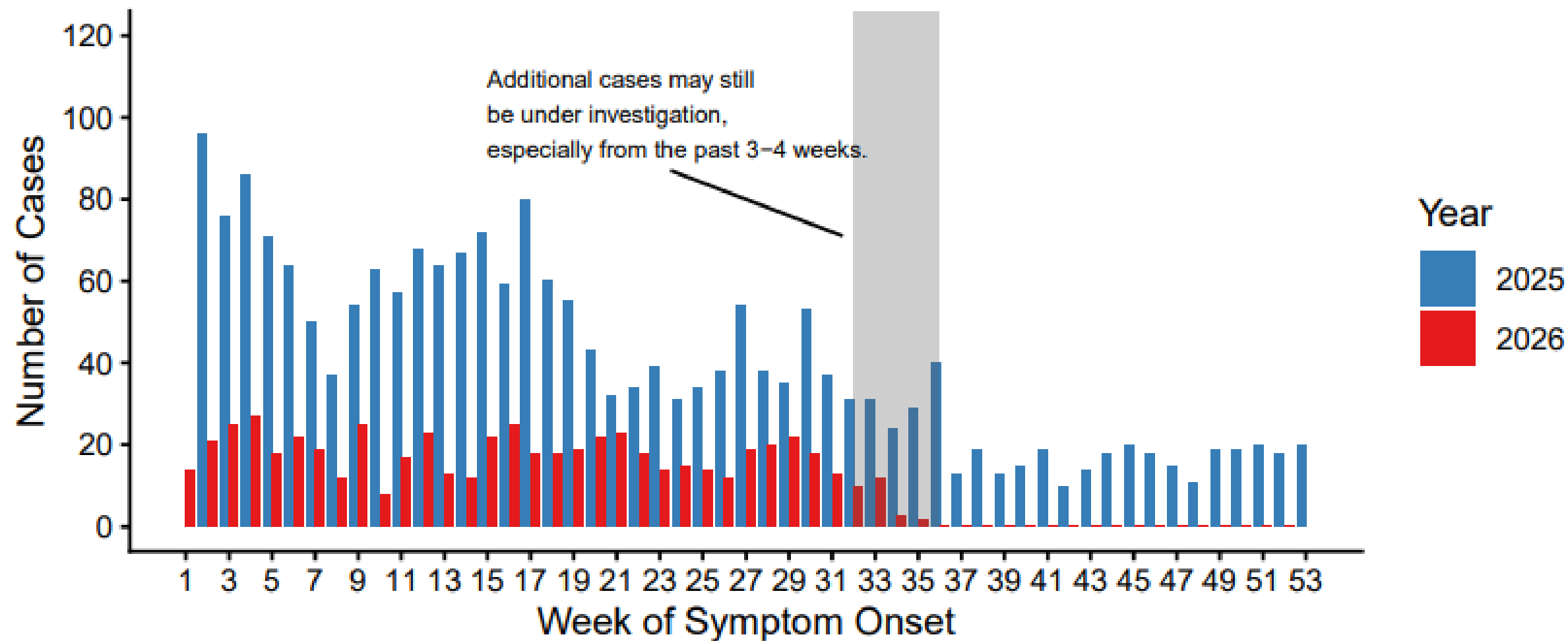
Age Range	Number of Cases	Percent of Total Cases
Under 5 years	13	23%
5-17 years	28	50%
18+ years	15	27%
Total Measles Cases	56	100%

2026 Measles Cases by Vaccination Status

Vaccine Status	Number of Cases	Percent of Total Cases
Unvaccinated	50	89%
1 dose of measles-containing vaccine*	0	0%
≥2 doses of measles-containing vaccine	1	2%
Unknown	5	9%
Total Measles Cases	56	100%

*Measles-containing vaccines include MMR (Measles, Mumps, Rubella), MMRV (Measles, Mumps, Rubella, Varicella), and others.

Pertussis



2025: 1,822 cases

2026: 558 cases

Washington cases by week 33 of 2025 vs 2026. 2025 was a big year; pertussis cycles every few years. US 2025: about 29,000 cases, the most since 2012, 16 deaths.

Benton-Franklin Counties

2025: 34 cases

2026 (to date): 12 cases

<https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs/348-254-PertussisUpdate.pdf>

Vaccine Preventable and Other Emerging Infectious Disease

Varicella

- 89.6% of Washington kindergartners up to date on vaccination

Haemophilus influenzae type b (Hib)

- Washington: Outbreak occurring in middle-aged adults, homeless, unvaccinated or unknown vaccination status
- 58 cases in last 2 years, 5 deaths

Polio

- 89.0% of Washington kindergartners up to date
- 2022 case in New York

H5N1 avian flu

- October 2024: 14 workers were infected while culling an infected egg farm in Franklin County (about 800,000 birds). Mild illness, mostly conjunctivitis

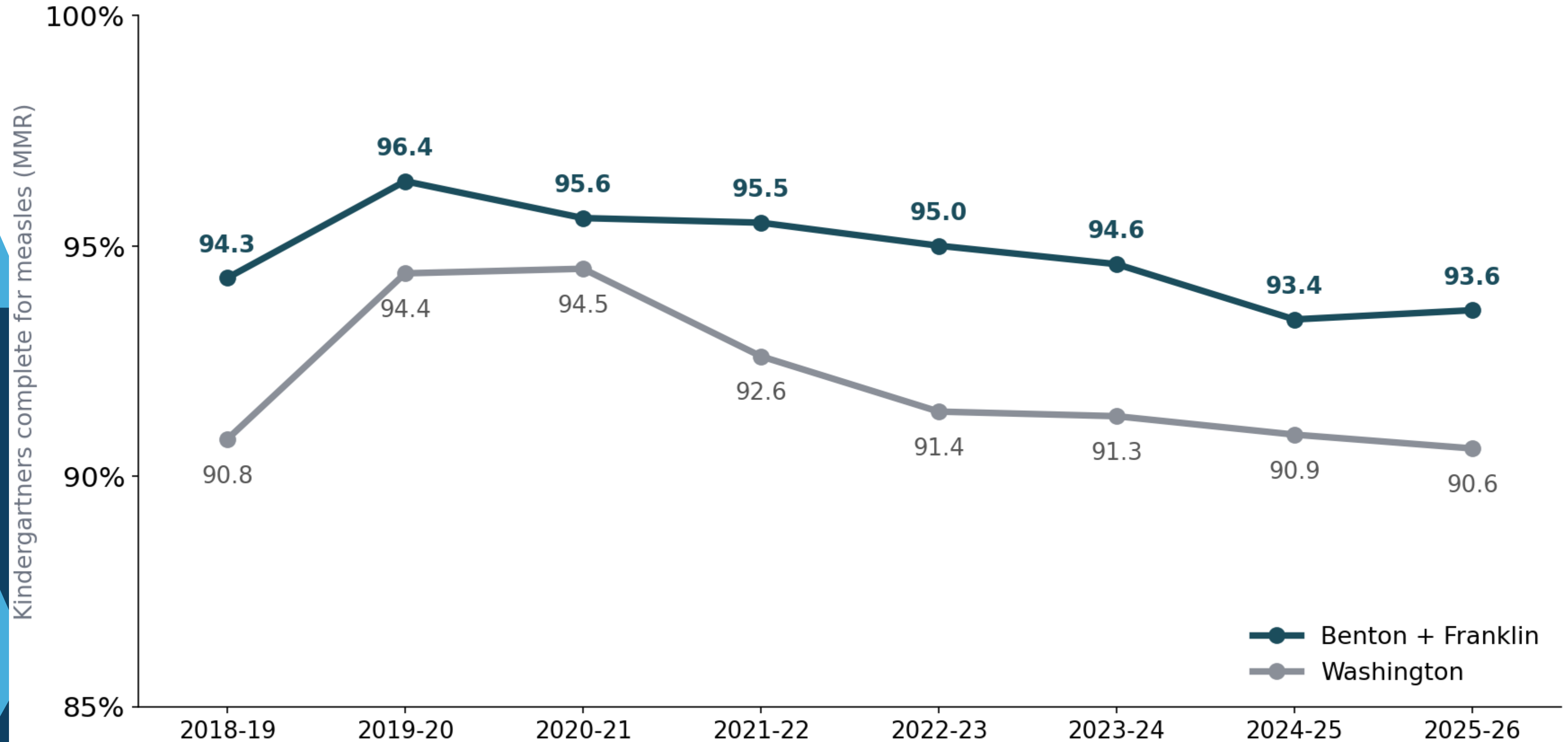
Mumps

- Last outbreak in Washington state in 2016–2017
 - 889 cases

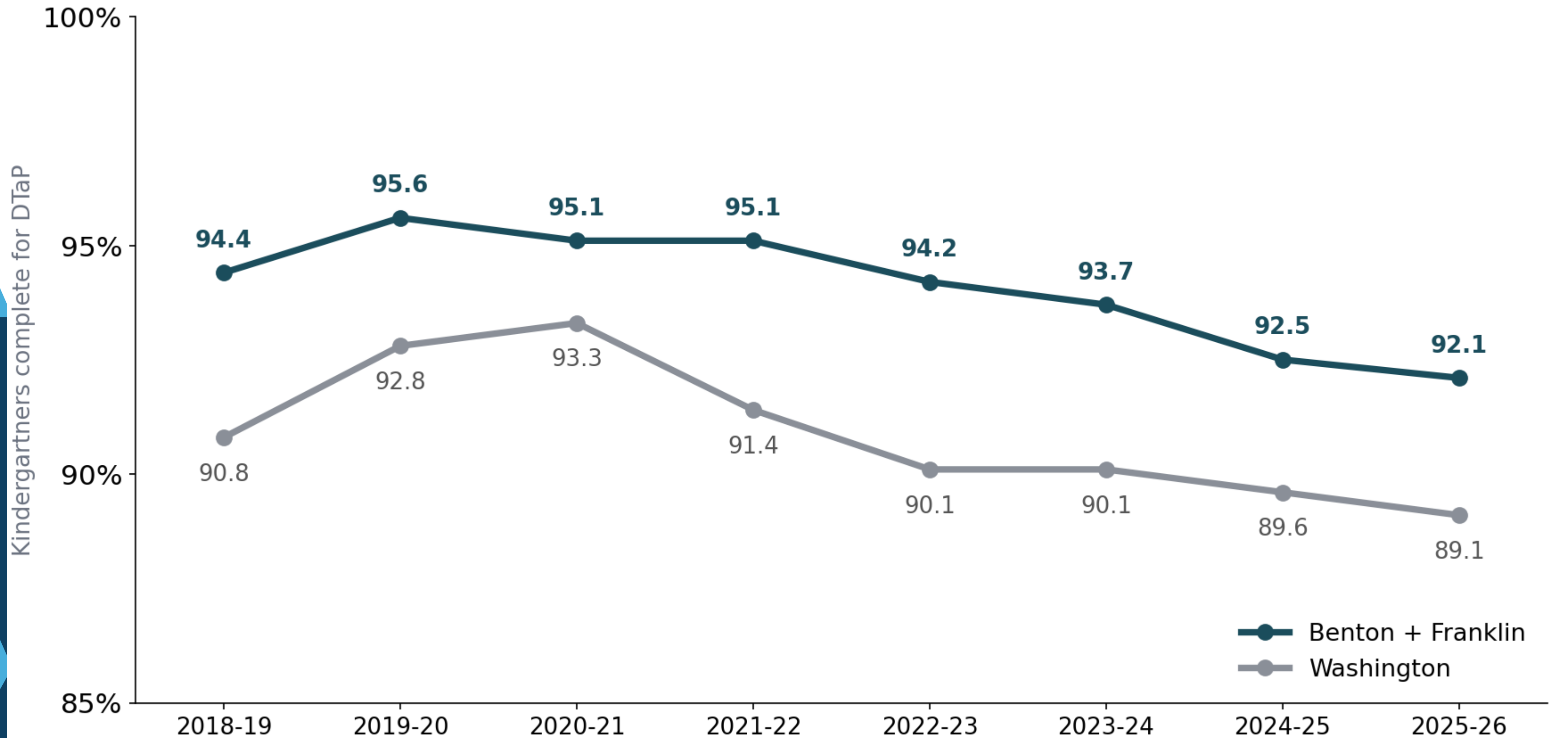
Data Notes

- Limitations on vaccination data
 - School immunization data
 - Kids enrolled in school only
 - State Immunization Registry (WAIIS)
 - Undercounts
- Future population estimates

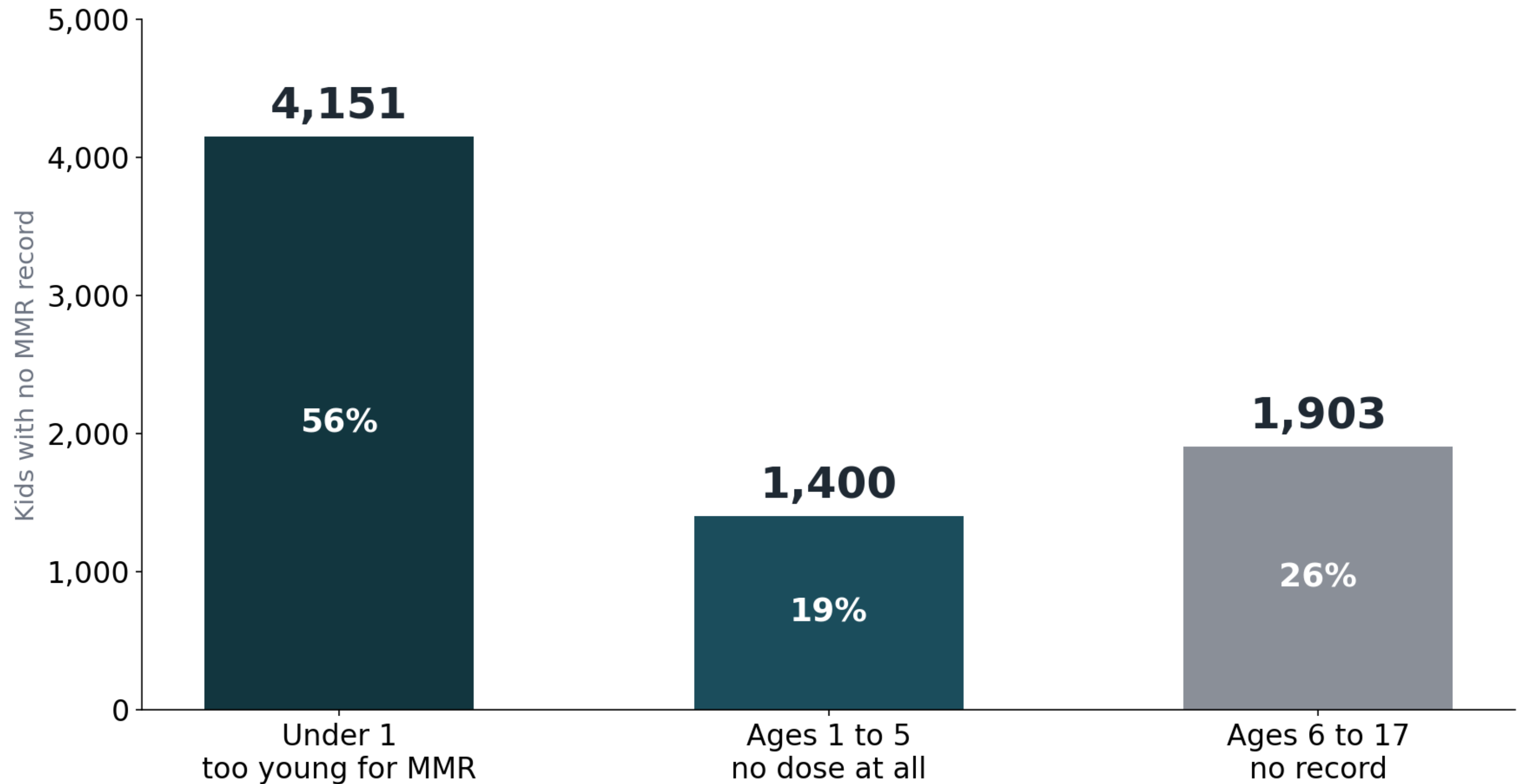
Kindergarten MMR coverage, Benton + Franklin vs Washington



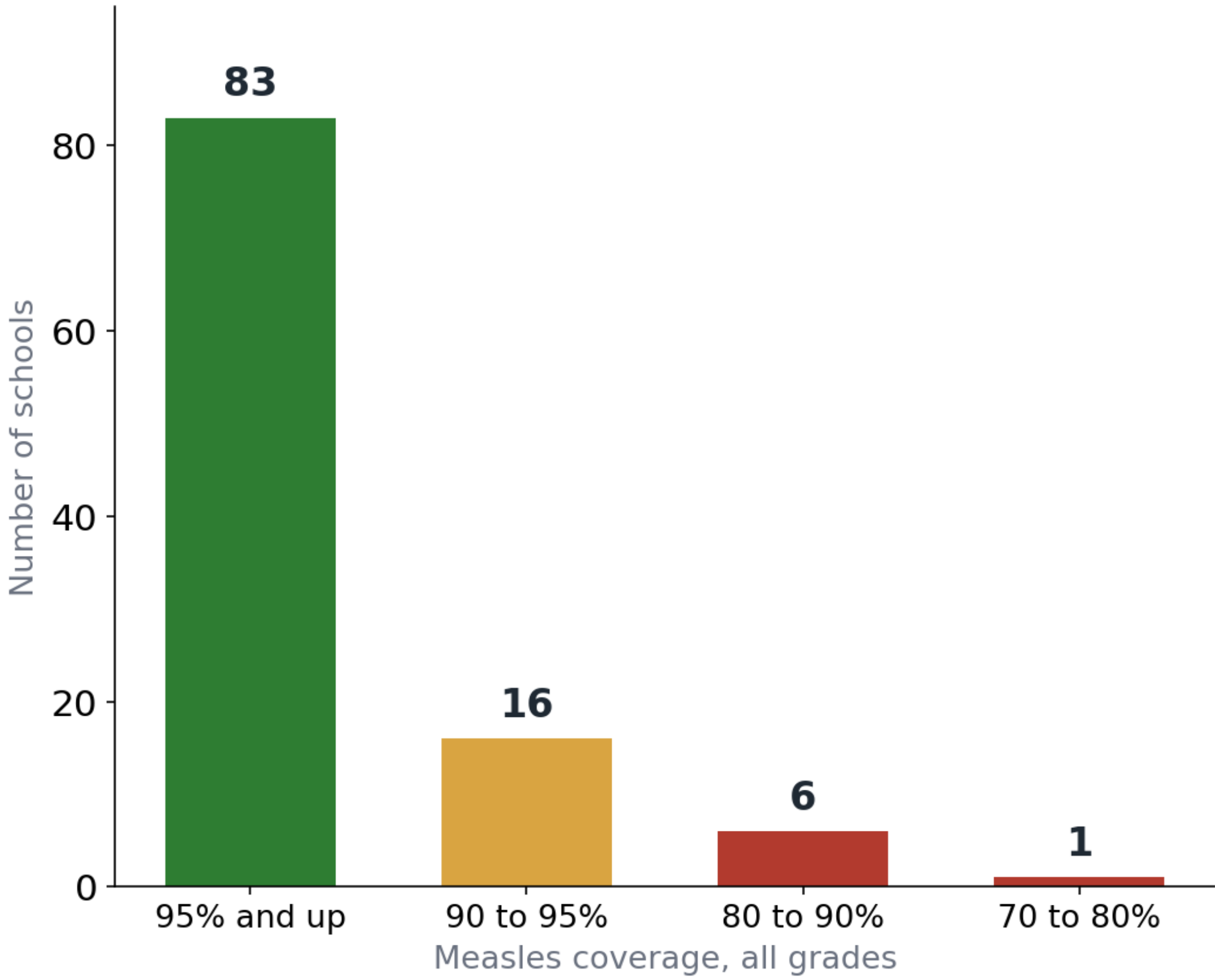
Kindergarten DTaP coverage, Benton + Franklin vs Washington



Unvaccinated kids by age, Benton + Franklin, 2026: about 7,500



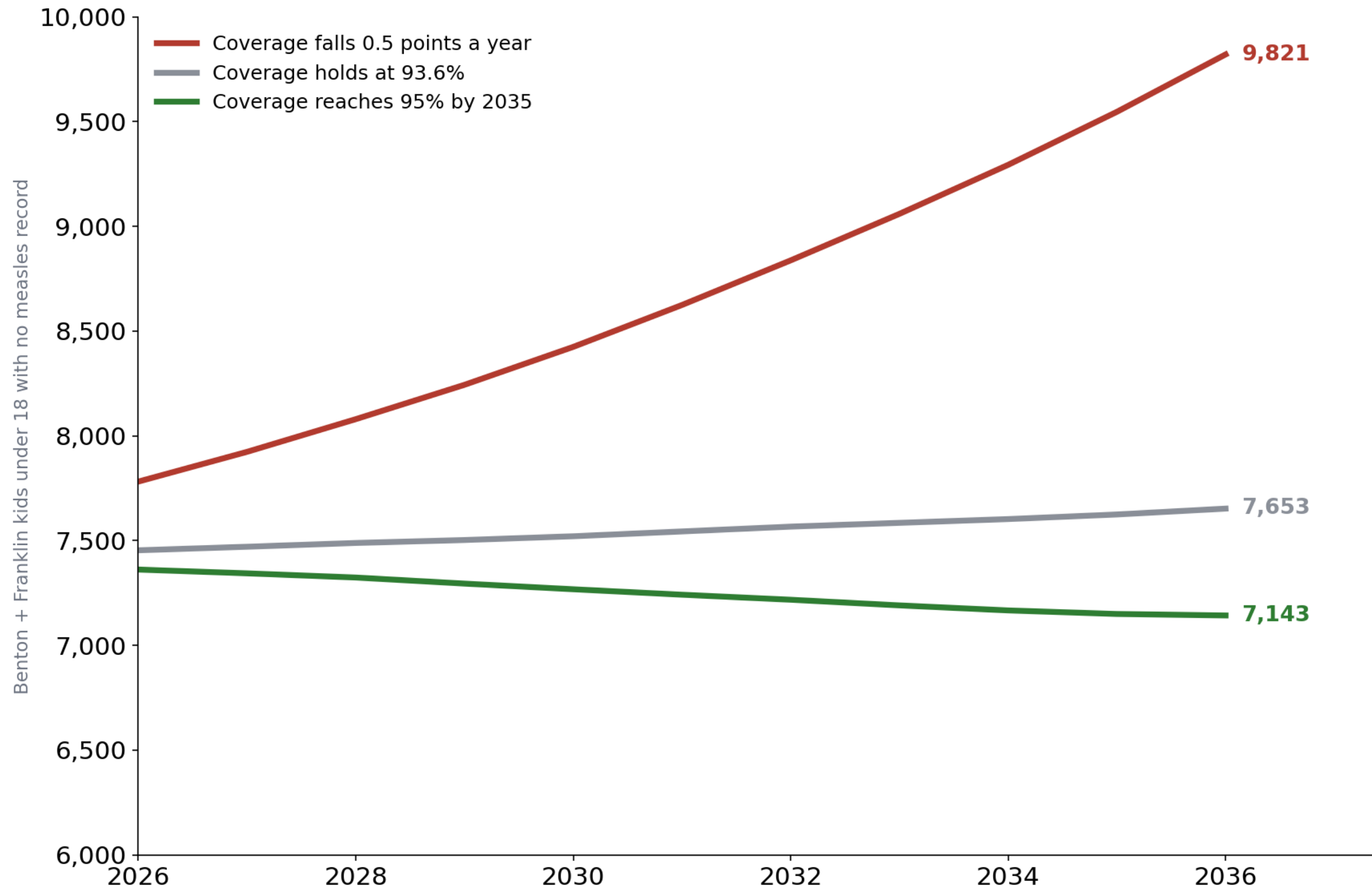
Pockets of low coverage: 106 Benton + Franklin schools, 2025-26



Students in each band

Coverage band	Schools	Students	No MMR record
95% and up	83	49,552	1,094
90 to 95%	16	7,217	454
80 to 90%	6	1,322	184
70 to 80%	1	529	134

Benton-Franklin MMR Vaccination Rates: Future Estimates



Practical Implications

- Measles is circulating in the US again and could become endemic if coverage keeps falling
 - Travel associated hot spots
- Thousands of susceptible children in Benton and Franklin counties
 - Overall rates above the state, but pockets present a risk
- MMR provides great protection, both from infection and severe disease
- Herd immunity is based on models, even if a community has 95% coverage, there will still be pockets at risk

Working with Public Health

- BFHD: Notifiable conditions reporting line (M-F 8am-5pm): 509.539.0416
 - After Hours emergency reporting line: 509.460.4213
- Find your own county public health
- Able to answer questions about infection control, testing, treatment
 - STIs, Measles, Tuberculosis, Pertussis, foodborne illness

Suspect Measles

- Elevated Concern: Fever+Rash+Unvaccinated

Measles red flags

Unvaccinated

No MMR, or a single dose only

Recent travel

International or outbreak area, past 21 days

Exposure to a confirmed case

Within the 21-day incubation period

Fever with maculopapular rash

Cough, coryza, conjunctivitis; Koplik spots

- Consider infection control measures
- Call Public Health
- Testing: NP swab for PCR, urine for PCR highest yield

Takeaways

- Measles rates are increasing in the United States
- Significant populations remain at risk locally
- Stay connected with local public health



PUBLIC HEALTH GRAND ROUNDS

Exploring Challenges.
Sharing Solutions.

UPCOMING TOPICS:

- Oral Systemic Connection
- Healthy Aging & Alzheimer's



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