

## Measles Has Returned—A Crucial Alert That Bangladesh Must Acknowledge

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This is Buddhism and Bangla, together with the letter that demonstrated how properly applied science may preserve millions of young lives, yet was ultimately utilized to justify various heinous acts against humanity. Since 1979, with the initiation of the Expanded Programme on Immunization (EPI) by the Directorate General of Health Services, a protective barrier for children has been established through vaccination, which has evolved from the administration of the Measles vaccine to the current protocol of administering measles vaccines at 9 months and again at 15 months, with the second dose introduced in 2012. This success story has demonstrated for many years that even highly contagious viruses, such as measles, can be managed with rigorous public health policies and scientific dedication (WHO, 2023).

However, such armor has recently been demonstrated to be inadequate. Bangladesh has experienced a significant rise in measles outbreaks recently, which transcends a mere health concern and serves as a warning flag. The minor losses in 2026, accompanied by thousands of infections and over a hundred children who tragically lost their lives at such a young age, reveal a harsh truth: it may be rescinded. It is not science that has abandoned us, but our steadfastness in its application. Measles, requiring approximately 95% vaccine coverage to maintain herd immunity, is currently exploiting deficiencies in the immunization system (WHO, 2023; UNICEF, 2026).

These discrepancies are not coincidental. They signify neglected follow-ups between the initial and subsequent vaccine doses, an inequitable allocation of healthcare in urban slums and isolated regions, as well as an increasing percentage of "zero-dose" children who have not received any vaccines. The nationwide study indicated that full immunization coverage declined to approximately 80–82%, rendering communities vulnerable (DGHS, 2023) Due to inadequate awareness, social obstacles, and sporadic interruptions in health service provision, herd immunity has diminished, leaving our youngest and most impoverished children vulnerable.

The government's emergency campaigns for measles-rubella vaccination in children aged 6 months to 5 years constitute a timely and essential intervention (UNICEF, 2026). However, they signify a more substantial challenge: transitioning from prevention to response. Bangladesh has historically achieved measles control through persistent, vigorous immunization measures. This reappearance underscores that vaccination is an ongoing endeavor necessitating sustained coverage, a robust health system, and public trust.

The situation in Bangladesh has now reached a critical juncture. The principles of contemporary medicine remain relevant, and the scientific consensus is established. Recommitment is necessary, together with the renewal of short-term contracts (enhanced routine immunization), equal access, and trust in vaccines. Measles has reemerged, not merely as a public health issue but also as an indicator of the degree to which the hard-earned advancements in public health protection can be preserved.

## References

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