

11 February 2010

Measles Alert for General Practitioners

The Communicable Disease Prevention and Control Unit has been notified of **2** confirmed cases of measles in Melbourne. Both cases occurred in overseas travellers. Their infectious period commenced on 29th January and 01st of February 2010. Secondary cases could start to occur now.

Children or adults born during or since 1966 who do not have documented evidence of receiving 2 doses of a measles containing vaccine or documented evidence of laboratory confirmed measles are considered to be highly susceptible to measles.

MEASLES CASE DEFINITION

The public health definition for suspected measles is an illness characterised by:

- morbilliform rash; and
- cough; and
- fever present at the time of rash onset

RECOMMENDATIONS

- 1. THINK MEASLES in patients who present with a febrile rash illness**
- 2. Notify** any patient that you suspect could have measles immediately to the Communicable Disease Prevention and Control Unit on telephone **1300 651 160**
- 3. Take blood** for serological confirmation and a **nose and throat swab** for PCR diagnosis.
- 4. Minimise transmission:**
 - See suspected measles patients at home if possible
 - If not possible, make their appointment the last of the day to minimise contact with other patients in the waiting room
 - If other patients are in the waiting room when they arrive, give the suspected case a mask and take the suspected measles case directly to a consulting room. (That room should not be used for another patient for at least two hours after the consultation)
 - If a patient needs to be sent to hospital, telephone ahead and let the Emergency Department staff know that you are referring a case of suspected measles
- 5. Seek advice from the Department of Health regarding the management of susceptible contacts:**
 - On DH advice, follow up all persons who have been in the waiting room at the same time as a case and for two hours after the visit. These people are considered to be exposed to the measles virus.

To prevent measles in susceptible contacts give:

- ❖ MMR if within 72 hours of first contact with the patient or
- ❖ Immunoglobulin if longer than 72 hours but within 6 days from contact.

5. Check vaccination records for:

- Your staff - All staff born during or since 1966 should have documentation of two doses of measles containing vaccine.
- Your patients - Ideally all patients born during or since 1966 should have received two doses of a measles-containing vaccine. Currently MMR vaccine is recommended on the National Immunisation Program at 12 months and 4 years of age. The vaccine is free as a catch up for children and adolescents of school age only.

For further advice call the Communicable Disease Prevention and Control Unit on 1300 651 160