

# **LAC DPH Health Advisory**

#### **Increase in Domestic Measles Cases**



March 3, 2025

This message is intended for all healthcare providers.

Please distribute as appropriate.

# **Key Messages**

- Measles cases are increasing in the U.S., with ongoing outbreaks in Texas, New Mexico and New Jersey, along with continued increased international activity.
- The first US measles death in a decade was reported in an unvaccinated schoolage child in Texas.
- Healthcare providers in LA County are reminded to 1) assure that their patients
  are up to date with measles-containing vaccines (MMR or MMRV) or have
  presumptive evidence of immunity, 2) immunize all travelers aged 6 months or
  older for whom there is no documentation of immunity, and 3) immediately report
  suspect measles to Public Health. All healthcare personnel should have
  documentation of immunity to measles.
- All LAC providers should be alert for measles, especially in recent travelers, and contact LAC DPH immediately for evaluation and testing guidance.

#### Situation

The Centers for Disease Control and Prevention (CDC) and local health departments are reporting a recent rise in domestic measles cases including 146 cases in the South Plains region of <a href="Texas">Texas</a>, 9 cases in bordering Lea County, <a href="New Mexico">New Mexico</a>, and 3 cases in Bergen County in <a href="New Jersey">New Jersey</a>. Most of these cases are among children and adolescents who were not vaccinated against measles or had unknown vaccination status. In the current Texas outbreak, there have been 20 children hospitalized for measles-related complications. In addition, one unvaccinated school-aged <a href="child has died">child has died</a> from measles-related complications. This marks the first time in a decade that a US resident has died from this vaccine preventable disease.

These measles outbreaks are occurring in areas of the country where MMR vaccination rates among kindergartners are low due to personal or religious exemptions. The Texas outbreak started spreading in a region where 82% of kindergarteners were vaccinated against measles. A Mennonite community has been particularly affected. To prevent measles outbreaks, a vaccination rate of 95% or higher is needed.

So far this year, <u>three measles cases have been confirmed</u> among California residents living outside of Los Angeles County, including <u>1 case</u> that traveled through LAX.

The last confirmed measles case in a Los Angeles County resident was reported in February 2024. Since then, at least 13 non-residents with measles have traveled through Los Angeles County, potentially exposing thousands of County residents.

With spring break approaching, LAC DPH urges clinicians to take proactive steps to prevent measles.

## **Actions Requested of Providers**

- Vaccinate: Make sure that all patients and healthcare staff are up to date on their measles vaccinations, especially those <u>traveling</u> to areas with ongoing domestic or international outbreaks. All persons who do not have <u>presumptive</u> <u>evidence of immunity</u> should be vaccinated.
  - All <u>healthcare personnel</u> should have 2 documented doses of MMR or laboratory demonstration of immunity.
  - Everyone 6 months of age and older should be <u>protected against measles</u> before traveling internationally or to areas of ongoing outbreaks.
  - o If you do not offer measles vaccines in your practice:
    - For uninsured patients and patients whose insurance does not cover the full cost of vaccines, please reference the LA County Department of Public Health's (DPH) vaccine clinic locations website to identify nearby free and low-cost immunization clinics.
    - For insured patients, please refer the patient to a provider or pharmacy who can provide MMR vaccine as these patients will be ineligible to receive vaccine at the above immunization clinics.
- **Isolate**: Any patients with a febrile rash illness should be immediately requested to don a well-fitting medical mask or respirator, removed from waiting rooms and other common areas, and placed in a private room with a closed door.
- Notify: Public Health should be contacted immediately while the patient
  with suspected measles is still at the facility. See "Reporting" below. DPH will
  guide you through collection of specimens for testing (throat swab and urine
  samples for PCR and blood sample for serology) and management of the patient
  under investigation as well as asymptomatic contacts of a suspected or
  confirmed case. See the LA County <u>specimen collection instructions</u> for more
  details on quantities, storage, labeling, and shipping.

#### **Measles Background**

Measles is a highly contagious, vaccine-preventable disease that requires high population immunity (95%) for transmission to be interrupted. Domestic measles cases often originate from unvaccinated or under-vaccinated U.S. residents who travel internationally and then transmit the disease to people who are not vaccinated against measles. One person infected by measles can infect up to 9 out of 10 susceptible close contacts.

There is no antiviral treatment for measles. Treatment is supportive, which may include Vitamin A administration. Once infected, complications can include acute otitis media (10%), diarrhea (10%), hospitalizations (20-25%), pneumonia (5%), encephalitis (0.1%), and death (0.1-0.3%).

Long term complications include subacute sclerosing panencephalitis, which is a rare neurodegenerative disease that affects a person 7-10 years after infection and is universally fatal. It is not reportable, however, among measles cases <u>reported</u> to California Department of Public Health during 1988-1991, the incidence of SSPE was1:600 for children <12 months at time of measles disease. Additionally, measles can cause transient immunosuppression and can lead to longer lasting deficits in immune memory for 2-3 years after infection, increasing susceptibility to opportunistic infections after resolution of their acute measles infection.

All County residents who lack measles immunity are at elevated risk of infection, including adults, adolescents, and children. See the <u>School Immunization Dashboard</u> for more information about vaccine uptake in the schools in your community.

## Reporting

Report suspected measles cases to Public Health by phone IMMEDIATELY.

- Los Angeles County Department of Public Health
  - Weekdays 8:30 am-5:00 pm: call 213-351-7800.
  - After-hours: call 213-974-1234 and ask for the physician on call.
- Long Beach Health and Human Services:
  - Weekdays 8:00 am-5:00 pm: call 562-570-4302.
  - After hours: call the duty officer at 562-500-5537.
- Pasadena Public Health Department:
  - Weekdays 8:00 am-5:00 pm: call 626-744-6089.
  - After hours: call 626-744-6043.

#### **Additional Resources**

- CDC Measles for Healthcare Providers
- CDC patient measles resource: Plan for Travel
- CDPH Measles investigation Quick Sheet

• CDPH <u>Immunization and Immunity Testing Recommendations for Healthcare</u> Personnel

This communication was sent by Nava Yeganeh, MD, Medical Director, Vaccine Preventable Disease Control Program, Los Angeles County Department of Public Health.

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