This message is intended for primary care, urgent care, emergency medicine, internal medicine, and infectious disease providers, as well as infection control staff. Please distribute as appropriate.

Key Messages

- Participants in the Hajj, the annual pilgrimage to Mecca, Saudi Arabia, are at elevated risk of communicable diseases including invasive meningococcal disease (IMD), measles, and Middle East Respiratory Syndrome (MERS). The Hajj will take place this year August 9-14.

- Health care providers are asked to help curb the spread of vaccine preventable diseases by immunizing Hajj participants prior to travel. Meningococcal vaccine is required; measles and other immunizations are recommended (see Hajj Vaccine Travel Recommendations).

- Health care providers should inquire about recent international travel in patients presenting with febrile illness and maintain a high suspicion for IMD, measles, and MERS in travelers returning from Hajj (see Clinical Presentations).

- Report suspect cases of IMD, measles, and MERS immediately by phone to Public Health (see Reporting).

Situation

As one of the world’s largest mass gatherings, the Hajj, or pilgrimage to Mecca, Saudi Arabia, poses an elevated risk for the transmission of a wide variety of communicable diseases. This year the Hajj will take place August 9–14. This advisory focuses primarily on the prevention and recognition of IMD, measles, and MERS. Clinicians are encouraged to review the CDC Yellow Book’s overview of the Hajj pilgrimage and associated health issues.

Because several outbreaks of IMD have occurred following the Hajj, the Kingdom of Saudi Arabia (KSA) will not issue visas without documentation of meningococcal vaccination.

Outbreaks of measles are currently occurring in Saudi Arabia and in many other countries around the world. Measles is extremely contagious, and the crowded conditions during Hajj provide an ideal opportunity for measles transmission. Immunity to measles is critical.
While the numbers of MERS cases worldwide currently are low and there have been no reports of Hajj-associated cases of MERS yet to date, crowded conditions during Hajj increase the probability of this severe respiratory infectious disease.

**Actions Requested of Providers**

- Recommend meningococcal and measles immunizations for travelers making Hajj for whom there is no documentation of immunity
- Review patient risk and immune status and recommend typhoid and hepatitis A immunization, as appropriate, in addition to other routine immunizations.
- Obtain a detailed recent travel history in patients presenting with febrile illness and maintain a high suspicion for IMD, measles, and MERS in travelers returning from Hajj.
- Report all suspect cases of IMD, measles, and MERS to Public Health immediately by telephone.

**Hajj Vaccine Travel Recommendations**

**Meningococcal Disease**

KSA requires that participants in the Hajj pilgrimage provide documentation of a single dose of the meningococcal quadrivalent ACWY vaccine. Visas will not be issued without proof of quadrivalent vaccine at least 10 days and no more than 3 years before arrival for polysaccharide vaccine and no more than 5 years before arrival for conjugate vaccine. See KSA Ministry of Health Hajj Health Regulations website for more details.

**Measles**

Participants in the Hajj age 6 months and older who do not have evidence of immunity or who lack written documentation of measles vaccination should be immunized prior to travel.

See the CDC’s Health Information for Travelers to Saudi Arabia Clinician View for all specific immunization recommendations.

**Clinical Presentations**

**Invasive Meningococcal Disease**

Suspect cases of IMD are patients with signs/symptoms of high fever, severe headache, stiff neck, nausea and vomiting, confusion, low blood pressure, rash, and muscle pain AND/OR preliminary laboratory evidence of gram-negative diplococci in a normally sterile site. Early presentations of IMD can be less specific, therefore a low threshold for diagnostic testing is encouraged in returning Hajj travelers.

**Measles**

See Measles Clinical Presentation section in the LAC DPH Health Update: Measles Situation Update and Revised Clinical Guidance

**Middle East Respiratory Syndrome**

Suspect cases of MERS are patients who meet one of the three following definitions:
A) A person with fever (≥38°C, 100.4°F) AND pneumonia or acute respiratory distress syndrome (based on clinical or radiological evidence); AND EITHER

- History of travel from countries in or near the Arabian Peninsula* within 14 days before symptom onset; OR
- Close contact** with a symptomatic traveler who developed fever and acute respiratory illness (not necessarily pneumonia) within 14 days after traveling from countries in or near the Arabian Peninsula*; OR
- A member of a cluster of patients with severe acute respiratory illness (e.g., fever and pneumonia requiring hospitalization) of unknown etiology in which MERS infection is being evaluated.

OR

B) A person with fever AND symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND being in a healthcare facility (as a patient, worker, or visitor) within 14 days before symptom onset in a country or territory in or near the Arabian Peninsula in which recent healthcare associated cases of MERS have been identified.

OR

C) A person with fever OR symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND close contact** with a confirmed MERS case while the case was ill.

* Includes Bahrain, Iraq, Iran, Israel, the West Bank and Gaza, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Syria, Palestinian territories, the United Arab Emirates (UAE), and Yemen. Refer to map at: [https://wwwnc.cdc.gov/travel/notices/alert/coronavirus-saudi-arabia-qatar](https://wwwnc.cdc.gov/travel/notices/alert/coronavirus-saudi-arabia-qatar)

**Definition of close contact: a) being within approximately 6 feet (2 meters), or within the room or care area, of a confirmed MERS case for a prolonged period of time (such as caring for, living with, visiting, or sharing a healthcare waiting area or room with, a confirmed MERS case) while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection); or b) having direct contact with infectious secretions of a confirmed MERS case (e.g., being coughed on) while not wearing recommended personal protective equipment. [https://www.cdc.gov/coronavirus/mers/case-def.html](https://www.cdc.gov/coronavirus/mers/case-def.html)

**Reporting**

All suspected cases of IMD, measles, and MERS are immediately reportable by health care providers and laboratories to Public Health by telephone. Laboratory confirmation is not required to report.

**Los Angeles County DPH Morbidity Central Reporting Unit:**

- Weekdays 8:30 AM – 5 PM: call 888-397-3993.
- After-hours: call 213-974-1234 and ask for the physician on call.

**Long Beach Health Department:**
- Weekdays 8 AM-5 PM: call 562-570-4302
- After hours: call the Duty Officer at 562-500-5537.

**Pasadena Health Department:**
- Weekdays 8 AM-5 PM (closed every other Friday): call 626-744-6089
- After hours: call 626-744-6043.

**Additional Resources:**

**LAC DPH Consultation/Technical Assistance**
- Acute Communicable Disease Control Program 213-240-7941
- Vaccine Preventable Disease Control Program 213-351-7800

**Hajj Related**
- Hajj in Saudi Arabia for travelers (CDC)  
- Saudi Embassy Haj requirements [https://saudiembassy.net/hajj-requirements](https://saudiembassy.net/hajj-requirements)

**Meningococcal Disease**
- LAC DPH Meningitis and Meningococcal Disease webpage [http://publichealth.lacounty.gov/acd/Mening.htm](http://publichealth.lacounty.gov/acd/Mening.htm)
- Meningococcal Vaccine Recommendations for Health Professionals (CDC) [https://www.cdc.gov/vaccines/vpd/mening/hcp/index.html](https://www.cdc.gov/vaccines/vpd/mening/hcp/index.html)
- Meningitis for Health Professionals (CDC) [http://www.cdc.gov/meningitis/clinical-resources.html](http://www.cdc.gov/meningitis/clinical-resources.html)

**Middle East Respiratory Syndrome:**
- LAC DPH MERS webpage [http://publichealth.lacounty.gov/acd/MERS.htm](http://publichealth.lacounty.gov/acd/MERS.htm)
- MERS-CoV webpage (CA DPH) [https://www.cdph.ca.gov/Programs/ID/DCDC/Pages/Immunization/MERS-CoV.aspx](https://www.cdph.ca.gov/Programs/ID/DCDC/Pages/Immunization/MERS-CoV.aspx)

**Measles**
- LAC DPH Measles Homepage (posters, FAQs, and other resources) [http://publichealth.lacounty.gov/media/measles/](http://publichealth.lacounty.gov/media/measles/)
- Disease Management Toolkits for Providers: [http://publichealth.lacounty.gov/ip/providers_resources.htm](http://publichealth.lacounty.gov/ip/providers_resources.htm)

This Health Advisory was sent by Dr. Sharon Balter, Director, Division of Communicable
Disease Control and Prevention, Los Angeles County Department of Public Health

To view this and other communications or to sign-up to receive LAHANs, please visit http://publichealth.lacounty.gov/lahan