LAC DPH Health Alert
Prompt Reporting of Suspect Measles Cases is Critical to Prevent New Infections and Serious Complications

January 30, 2014

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

Key communication
• A significant number of LAC residents were exposed to measles this month due to delayed reporting of two separate measles cases.
• Health care providers must report all suspect measles cases by phone immediately to the local health department. Do not wait for lab confirmation before reporting. This is required by the California Code of Regulations (Title 17, California Code of Regulations, § 2500).
• Measles is highly infectious. Exposed persons are at high risk of acquiring measles if not already immune.
• Severe measles complications can be prevented in infants and immunocompromised persons if immunoglobulin is provided within 6 days of measles exposure.

Situation
An unimmunized Los Angeles County (LAC) resident developed measles one week after returning from a trip to Asia. He had been symptomatic for four days before being reported to the Los Angeles County Department of Public Health. A second unimmunized LAC resident developed measles after exposure to a foreign traveler. This second measles case was not reported to the LAC Department of Public Health until the 9th day of his illness. Both of these measles cases exposed a number of individuals in various settings, prior to notification of the Health Department. An exposed infant nearly missed the window for immune globulin prophylaxis due to delayed reporting.

Actions requested of providers
✓ Consider measles when evaluating any patient who has an acute rash illness with fever, especially in someone returning from international travel or who has had contact with international visitors.
✓ Institute respiratory and airborne precautions immediately for all patients with febrile rash/suspect measles cases.
✓ Obtain specimens for confirmation of the diagnosis.
✓ IMMEDIATELY report any suspect cases in Los Angeles County to the Morbidity Central Reporting Unit by phoning (888) 397-3993. (For persons residing in the Cities of Long Beach or Pasadena, see the phone numbers listed under section “To file a report...” below.) Do NOT wait for laboratory confirmation before reporting a suspect case.

Clinical presentation
Measles symptoms usually begin 10-12 days (up to 21 days) after exposure with a prodrome of fever as high as 105°F (40.5°C), malaise, cough, runny nose, and conjunctivitis. Two to four days following the onset
of the prodrome, a maculopapular rash develops. The rash usually begins around the ears and hairline and then spreads down to cover the face, trunk, arms, and legs.

Transmission and infection control
Measles is transmitted by airborne spread, as well as contact with nasal and throat secretions of infected persons. Typically, persons with measles are contagious from 4 days before to 4 days after rash onset. Suspect measles cases needing medical attention should not be allowed in patient waiting areas. They should be masked and placed immediately in an examination room, with the door closed. The examination room in which a patient with suspected or confirmed measles was examined should not be used again for two hours. With hospitalized patients, respiratory isolation is recommended for 4 days after the onset of rash. Listings of all exposed patients and staff will be required by the public health department from any medical facility treating a case of measles. The public health department will work to ensure that all high-risk contacts are offered immune globulin within 6 days of first exposure to the measles case.

Specimen collection
Blood specimens should be obtained at the time of clinical presentation and be tested for both measles IgM and IgG antibodies. If within 4 days of rash onset, collect both a nasopharyngeal swab and a urine specimen for culture/PCR. If within 10 days of rash onset, collect a urine specimen only. Only use viral transport media to collect and transport specimens for measles virus culture and PCR.

Prevention through vaccination
Measles vaccination is routinely recommended for all children, even when home-schooled, and is required for children attending any public or private school in California. Adolescents, adults, and especially persons such as health care workers who are at risk of exposing high-risk persons to measles, and persons traveling to other parts of the world, are urged to be vaccinated against measles if they don’t have proof of measles immunity (record of previous vaccination or positive measles serological test results). Unvaccinated, non-immune immunocompromised persons and others at high risk of complications from measles can be protected from measles, if exposed to a measles case, by post-exposure prophylaxis with immune globulin if it can be given within 6 days of exposure.

To file a report of a suspect measles case
Measles cases are one of the conditions that must be reported by telephone immediately to the local health department (Title 17, California Code of Regulations, § 2500).

- Reporting suspect cases in Los Angeles County:
  - Weekdays 7:30 am-5:00 pm call (888) 397-3993
  - Non-business hours (before 7:30 am, after 5:00 pm, or weekends) call (213) 974-1234.
- Reporting suspect cases in the cities of Long Beach or Pasadena, contact the local health department:
  - Long Beach HD: (562) 570-4302
  - Pasadena HD: (626) 744-6000

Additional resources
- For technical assistance about measles, please call the Los Angeles County Department of Public Health Immunization Program’s Surveillance Unit at (213) 351-7800.
- Additional information about measles is also available at: http://publichealth.lacounty.gov/ip/DiseaseSpecific/Measles.htm

This Health Alert was sent by Dr. A. Nelson El Amin, Medical Director, Los Angeles County Department of Public Health Immunization Program.