

## MEASLES ALERT

Three measles cases have been confirmed in the fast four days in Canterbury. The three cases come from Rangiora and Christchurch and include a teenage male, and one male and one female – both in their 40s. None are thought to be immunised against measles. The index case has not been identified.

Community and Public Health are working to identify all close contacts and determine their immunisation status. They will be offered MMR prophylaxis if they do not have 2 documented MMR vaccinations.

General Practice Teams are encouraged to have a heightened clinical suspicion for potential measles cases.

Symptoms usually take about 10 days to develop but may take as long as 21 days.

Doctors are requested to:

1. **consider the diagnosis** (and look for Koplik spots) in suspected cases, especially children, with symptoms (fever, maculopapular rash, cough, coryza and conjunctivitis),
2. **request serology and a nasopharyngeal swab for PCR** to confirm the diagnosis
3. **notify Community and Public Health on suspicion** of a measles case

### Clinical description

An illness characterised by **all** of the following:

1. generalised maculopapular rash, starting on the head and neck
2. fever (at least 38°C if measured) present at the time of rash onset
3. cough or coryza or conjunctivitis or Koplik's spots present at the time of rash onset.

**Prodrome:** 2-4 days with fever, conjunctivitis, coryza and Koplik spots.

**Incubation:** **About** 10 days, but may be 7–18 days from exposure to onset of fever. The incubation period may be longer in the immune suppressed or those given immunoglobulin after exposure.

**Infectivity:** From 5 days before to 5 days after onset of rash.

**Prevention:** Disease in contacts can be prevented by vaccination of susceptible contacts with MMR within 72 hours of exposure or passive immunisation with immunoglobulin if 3-6 days after exposure.

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