HEALTH ADVISORY: BE ALERT FOR MEASLES CASES
JANUARY 22, 2015

SITUATIONAL UPDATE

California is currently experiencing a measles outbreak, with at least 59 confirmed cases of this airborne, highly contagious disease. San Francisco has had no reported measles cases since 2013. Several other Bay Area counties, however, have reported cases in this outbreak.

The outbreak originated with exposures at Disneyland in mid-December and early January, but additional secondary cases have occurred. The vast majority of case-patients for whom vaccination status is documented were unvaccinated. Although measles is no longer endemic in the United States, measles epidemics overseas have resulted in imported cases and resulting secondary cases. In addition, undetected community transmission may occur.

Measles should be considered in patients presenting with fever and morbilliform or maculopapular rash.

The purpose of this update is to provide guidance for clinicians who may be responding to inquiries from concerned patients, and to review proper infection control and testing procedures for patients presenting with potential measles symptoms. Suspected measles cases should be reported immediately to the SFDPH Communicable Disease Control 24-hour line: 415-554-2830. If calling after hours, listen to the instructions on the voicemail to page the on-call physician.

CLINICAL GUIDANCE

Please see attached “Quick Guide for Clinicians: Measles” for detailed and updated information concerning measles reporting and diagnostic testing. The document is also available at: http://sfcdcp.org/measles.html.

Patients presenting to a medical facility with fever and a maculopapular or morbilliform rash should immediately be masked and placed in isolation or a private exam room. Patients with rash who request advice over the telephone and who are advised to present for evaluation should travel to the medical facility in a private vehicle if possible and don a surgical mask upon arrival.

Treatment of measles is supportive.

Immunization is the most important preventive strategy for measles. Patients who have been vaccinated against measles or who have a history of measles disease are considered immune. Medical providers should work with all their patients to ensure up-to-date measles immunization status. In addition, measles immunity should be routinely documented for health care workers in order to prevent loss of work time if exposed.

Individuals planning travel outside the USA should be up to date with measles immunization. Early immunization with MMR is recommended for infants aged 6-11 months before travel outside the USA. For detailed recommendations concerning measles vaccination for travelers, please see: wwwnc.cdc.gov/travel/yellowbook/2014/chapter-3-infectious-diseases-related-to-travel/measles-rubeola.

For the California Department of Public Health’s updates on the current measles outbreak, as well as measles alert flyers to post in clinical settings, see http://www.cdph.ca.gov/HealthInfo/discond/Pages/Measles.aspx