

# MEASLES ALERT

Information for NSW General Practitioners  
Please distribute this information to all staff

1. There is a Measles crisis in Samoa, Tonga, New Zealand and Fiji.
2. Samoa has declared a state of emergency. The outbreak is progressing rapidly. Over 20 children have already died and hundreds of people have been infected.
3. Cases of measles have been reported in people returning or travelling from travel these countries.
4. Consider measles in returning travellers with fever, and in anyone with fever and a maculopapular rash.
5. Isolate suspected measles cases and call your local public health unit immediately

## Measles outbreaks in the region

- As of 25 November, there have been **55** measles cases notified in NSW in 2019, compared to just 19 cases last year.
- Most cases are in adults aged 20-44 years, including some who were previously vaccinated.
- Recent cases have been diagnosed following travel to the Pacific Islands, where large outbreaks are occurring.
- Maintain a high index of suspicion for measles in returning travellers with fever, and in anyone with fever and maculopapular rash.
- New Zealand, Samoa, Tonga and Fiji should be considered high risk countries for measles when assessing travel risk and need for pre-travel vaccination of infants.

## How does measles present?

- Two to four days of prodromal illness with fever, cough, coryza, and conjunctivitis.
- A maculo-papular rash then typically begins on the face and neck and becomes generalised.
- Measles in previously vaccinated people may present atypically, with milder symptoms and a slower progression to the rash, which may also be atypical.
- Cases are infectious from the day before the prodrome onset to 4 days after the rash onset.

## How to manage suspected cases

- **Isolate** - arrange to see suspected cases in their homes or at the end of the day.
- **Notify** - inform your public health unit (PHU) **immediately** – don't wait for test results before calling. The earlier a PHU knows about a suspected case the more effective containment interventions can be.
- **Test** - collect a nose and throat specimen, and a first pass urine sample for nucleic acid testing and blood for measles serology. Mark all specimens as URGENT. Your PHU can assist in expediting testing, if indicated.
- **Display resources:** posters and brochures alerting people to these outbreaks are available in English, Tongan and Samoan  
<https://www.health.nsw.gov.au/Infectious/measles/Pages/resources.aspx>
- **Remain alert** - be on the look-out for new imports following holiday travel, and potentially locally acquired cases <https://www.health.nsw.gov.au/Infectious/measles/Pages/default.aspx>

## Advocate for immunisation

- The best way for people to protect themselves and others is to get vaccinated
- Remember to vaccinate children at 12 and 18 months of age. Children aged between 6 and 18 months can have their schedule adjusted if travelling to high risk areas.
- Discuss vaccination with your patients – overseas travel is an opportunity to encourage vaccination for any patients with uncertain vaccination histories.
- Health care workers are at increased risk – ensure that you and your staff are vaccinated.
- Measles containing vaccines (MMR) are safe and available free in NSW for those born during or after 1966 who have not previously had two documented doses

## Further Information:

- Contact your local public health unit on **1300 066 055**