

Philadelphia Department of Public Health

Division of Disease Control

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Health Notification

Measles: Travel Recommendations and Prevention Reminders April 21, 2008

Recently, a number of domestic measles cases have been linked to international outbreak situations. The Philadelphia Department of Public Health urges providers to follow current immunization recommendations for the prevention of measles. Although we have not received any recent reports of measles cases in our area, it is important to ensure that patients are up to date for measles immunizations, particularly if they plan to travel outside of the US.

Although measles has not been endemic to the US in many years, Israel and Switzerland are currently experiencing major measles outbreaks. Recent measles resurgence has also occurred in the United Kingdom, Belgium, other European countries, Japan, and India.

So far, 24 measles cases have been diagnosed in the US this year. All were linked to international travel, either directly or indirectly. Most cases were unvaccinated individuals who had not traveled, but who had come in contact with an infected traveler. Exposures occurred in a variety of settings, including community, airport, or health care settings. A few of the cases occurred in infants, too young to have been vaccinated, following exposure to an infected person.

Recommendations for Routine Measles Vaccination

MMR (measles, mumps, and rubella) vaccine is <u>routinely</u> recommended for:

- All children at 12-15 months of age, with a second dose given at age 4-6 years.
- Two doses of MMR vaccine are required for all children attending a Philadelphia school. A minimum of 28 days between doses is needed.
- Adults born in 1957 or later who do not have a medical contraindication should receive one dose of MMR vaccine, unless there is acceptable evidence of immunity or they have previously received a dose.

Recommendations for Measles Vaccination for Travelers

Children 6-11 months of age who will travel overseas should receive single-antigen measles vaccine prior to departure if it is available, or MMR vaccine if single-antigen measles vaccine is not available.

NOTE: Measles or MMR vaccines given before 12 months of age should NOT be counted as part of the series. Children who receive measles or MMR vaccines before age 12 months will need 2 more doses of MMR vaccine. The first should be administered at 12-15 months of age, and the second at least 28 days later.

Children 12 months of age or older, adolescents, and adults who cannot be considered immune based on the criteria listed below should receive 2 doses of MMR vaccine, separated by at least 28 days, prior to travel overseas. Criteria for evidence of immunity to measles includes:

- Receipt of 2 prior doses of MMR or measles vaccine at least 28 days apart;
- Documented measles diagnosis confirmed by a physician;

- Acceptable laboratory evidence of immunity;
- Born before 1957.

Measles risk for individual travel destinations can be checked on the CDC website (wwwn.cdc.gov/travel). Travelers should keep a copy of their immunization records with them as they travel.

Measles and Healthcare Facilities

- Be aware that measles may transmit readily in healthcare facilities, as happened with some of the recent cases in the US. Ensure that all health care personnel have evidence of measles immunity and follow appropriate infection control practices for suspect cases.
- Ask patients exhibiting symptoms of measles about their vaccination history and any recent international travel or exposure to a person with international travel. The incubation period for measles ranges from 7 to 18 days. Measles is a highly contagious respiratory illness spread by contact with an infected person (through breathing, coughing, or sneezing), and typically presents with a high fever, cough, runny nose, and red, watery eyes. The illness typically lasts five to six days, with a generalized maculopapular rash that starts on the face and then moves down the body to the arms and legs, including the palms of the hands and soles of the feet. Immunocompromised patients may not exhibit rash or may exhibit an atypical rash. Measles can result in severe complications, including pneumonia and encephalitis.
- Report any suspected measles cases within 24 hours to the Division of Disease Control at 215-685-6748, or 215-686-1776 after hours.

April 19-26, 2008 is National Infant Immunization Week!

The week of April 19th is National Infant Immunization Week, which observes the importance of protecting infants from vaccine-preventable diseases and acknowledges the achievements of immunization programs and partners in promoting community health. Please take this opportunity to spread the word about the importance of timely immunizations in young patients, and make the most of your opportunities to vaccinate!