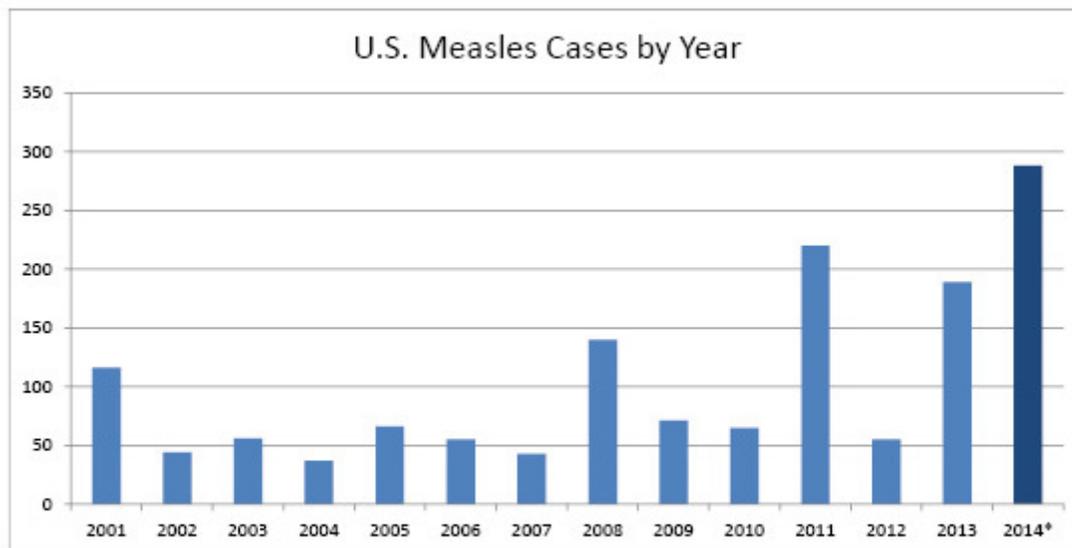


Increase in Reported Measles in the U.S.

To: Vermont Healthcare Providers, Hospitals and Clinics
From: Patsy Tassler Kelso, PhD, State Epidemiologist for Infectious Disease

Measles was declared eliminated in the United States in 2000. However, imported cases from endemic areas of the world continue to occur, leading to secondary cases and outbreaks in the U.S. As of May 23, 2014, 288 measles cases and 15 outbreaks have been reported in 18 states. In the last decade there has been only one (2011) reported case of measles in Vermont. The last measles outbreak in the state was in 1993. A total of 31 cases were reported that year; 23 of them were associated with the outbreak.



*Provisional data reported to CDC's National Center for Immunization and Respiratory Diseases



Measles Symptoms and Communicability

Measles begins with fever, cough, coryza and conjunctivitis. Two or three days later Koplik's spots may appear inside the mouth. A red rash appears three to five days after the prodrome. The rash usually begins on the face and spreads downward to the neck, trunk, arms, legs and feet.

Measles is one of the most contagious of all infectious diseases; approximately nine out of 10 susceptible people with close contact to a measles patient will develop measles. The virus is transmitted by direct contact with infectious droplets or by airborne spread when an infected person breathes, coughs or sneezes. Measles virus can remain infectious on surfaces and in the air for up to two hours after an infected person leaves an area.

Immunization

MMR is a combination vaccine that provides protection against measles, mumps and rubella. The MMR vaccine has been licensed since 1971 and has a 95% efficacy rate.

- CDC recommends two doses of MMR vaccine at ages 12-15 months and 4-6 years. Children who receive MMR prior to 12 months of age still require two doses of MMR after their first birthday.
- Infants 6-11 months being taken for international travel should have one dose of MMR before departure.
- Adults at higher risk of exposure, e.g., students, international travelers and healthcare workers should receive two doses of MMR or demonstrate immunity through IgG antibody testing.
- Adults not at higher risk and born before 1957 can generally be considered immune.
- Adults not at higher risk and born after 1957 should have at least one dose of MMR vaccine after their first birthday.

Requested Actions

- Consider measles when encountering a febrile patient with rash. Measles cases have been initially misdiagnosed as Kawasaki disease and scarlet fever, among other diseases.
- Promptly isolate people with suspected measles and notify the Health Department 24/7 at 802-863-7240. Testing can be arranged through the Health Department Laboratory.
- Be certain you, your staff and your patients are immune.

Additional guidance can be found at: <http://www.cdc.gov/measles/hcp/index.html>.