

From the Chief Medical Officer
Dr Michael McBride



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

HSS(MD)14 /2008

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin
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To: Chief Executives, HSC Trusts
Directors of Public Health, HSS Boards
Directors of Nursing, HSS Boards
Directors of Nursing HSC Trusts (*for onward
distribution to all Community Nurses*)
Directors of Pharmaceutical Services, Trusts and
Boards
Directors of Primary Care, HSS Boards
GP Medical Advisers, HSS Boards
Consultants in Communicable Disease Control, HSS
Boards
All Community Pharmacists
Medical Directors, HSS Trusts (*for onward
distribution to Consultants, Occupational Health
Physicians*)
All General Practitioners, (*for onward distribution to
practice staff*)
Regional Epidemiologists
Infectious Disease Physicians

Your Ref:
Our Ref: HSS(MD)14/2008
Date: 24 April 2008

URGENT COMMUNICATION

Dear Colleague

MEASLES INFECTION

The purpose of this letter is to alert you to the fact that we have seen 3 cases of Measles infection in children in Northern Ireland since the beginning of this year. This is an unusual occurrence as Measles has become an extremely rare infection in Northern Ireland due to the success of our immunisation programme. Two of these 3 cases acquired their infection outside of Northern Ireland and the third case was a contact of one of these first 2 cases.

Measles occurs worldwide, but has become much less common in European countries now due to the availability of Measles Mumps and Rubella (MMR) Vaccine. Immunisation coverage for MMR in Northern Ireland is currently running at 91.5% coverage for first dose of MMR at 24 months and 87% coverage for 2nd dose of MMR at school entry. Two doses of MMR Vaccine are required for all children to fully protect them against Measles Mumps and Rubella Infection.

Several European countries including the UK have seen a recent increase in the number of Measles cases. Across 31 European countries nearly 4,000 cases of measles were reported in 2007 with large outbreaks occurring in Switzerland, Germany and Spain. With regard to annual incidence, Switzerland, the UK, Romania and Ireland were the countries with the highest number of Measles cases per 100,000 population in 2007. Outbreaks are currently occurring in Switzerland and Austria, the 2 countries due to host the European Football Championship (Euro 2008) this summer. In the first quarter of 2008, 1,300 cases of Measles were reported in Europe compared to less than 800 in the same period last year. In this context, the European Centre for Disease Control (ECDC) is stressing the importance for European citizens and visitors to Europe to be vaccinated against Measles if they have not already been vaccinated or previously suffered from Measles.

Risk for Overseas Travellers

All previously unvaccinated and non-immune travellers are at risk from Measles if visiting countries where Measles is continuing to occur. Those travelling to areas where Measles is endemic or where there has been an increased incidence including localised outbreaks should be offered vaccination as part of their pre travel health consultation.

MMR Immunisation

Detailed guidance on MMR Immunisation is given in the Green Book http://www.dh.gov.uk/en/Publichealth/Healthprotection/Immunisation/Greenbook/DH_4097254.

- **Children under 10 years of age** – MMR Vaccine should be offered to infants after their first birthday, usually at around 15 months of age. A second dose is given before school entry.
- **Children 10 years and over and adults** – MMR Vaccine can be given at any age and a travel health consultation is an opportunity to ensure that individuals have received 2 doses of MMR Vaccine given at least one month apart. Adults born in the UK before 1970 are likely to have developed immunity following natural infection. Vaccination would not normally be given unless they are considered to be non immune and at risk of infection.
- **Overseas travellers** – All travellers should ensure that they are fully immunised according to the UK schedule. MMR Vaccine can be considered for infants from 6 months of age if they are visiting a Measles endemic area. However as a suboptimum response may occur in infants less than 12 months of age, 2 further doses, one at 15 months of age and another before school entry should be given.

Action for healthcare professionals

- Healthcare professionals should familiarise themselves with the signs and symptoms of Measles which is so rarely seen now in Northern Ireland (details at Annex A).

- GPs should offer MMR Vaccination to all previously unvaccinated individuals who are travelling abroad provided there are no contraindications to the vaccine. Persons born before 1970 are likely to have acquired natural immunity, but there is no upper age limit and MMR vaccine can be offered if they are not immune and at risk of exposure. Measles is a notifiable disease in Northern Ireland and cases should be reported to the CCDC at the local Health and Social Services Board. Appropriate public health action including contact tracing and vaccination can then be undertaken by public health professionals at the Board.
- Healthcare workers and MMR Immunisation - Protection of healthcare workers is especially important in the context of their ability to transmit measles, mumps or rubella infections to vulnerable groups. While they may need MMR vaccination for their own benefit, on the grounds outlined above, they also should be immune to measles, mumps and rubella for the protection of their patients. Satisfactory evidence of protection would include documentation of:
 - having received two doses of MMR, or
 - positive antibody tests for measles and rubella.

MMR

MMR is a safe and effective vaccine and the most effective way of preventing Measles infection. Health professionals are reminded of the need to ensure that all children have 2 doses of MMR Vaccine to achieve immunity. In addition, all health professionals are reminded of the need for 95% coverage for MMR immunisation.

Detailed information on MMR vaccine is available in the 'Green Book'

<http://www.dh.gov.uk/en/Publichealth/Healthprotection/Immunisation/Greenbook/DH4097254>

Yours sincerely



Dr M McBride
Chief Medical Officer

MEASLES

Transmission

Measles is one of the most contagious infectious diseases; it is transmitted via respiratory droplets. Individuals are infectious from when the first symptoms appear until four days after the appearance of rash.

Signs and symptoms

Following an incubation period ranging from eight to 12 days, measles begins with a two to four day prodrome characterised by fever, malaise, coryza (runny nose), conjunctivitis and cough. Koplik's spots, small papular white lesions, usually appear one day before the onset of rash on the buccal mucosa in line with the molars.

The hallmark of measles is a rash

A red maculopapular rash first appears on the face and spreads down to the trunk and extremities. The rash begins to fade after three to four days. In uncomplicated cases clinical recovery begins soon after the appearance of the rash.

The rate of complications of measles varies by age, and is increased by malnutrition, vitamin A deficiency, and immune deficiency. The risk of mortality as a result of measles complications is highest among infants aged less than 12 months, and in adulthood. The most common complications are otitis media (7-9%), diarrhoea (8%), pneumonia (1-6%), and convulsions (one in 200).

Recovery from measles results in life-long immunity. However, those who have recovered from measles should still receive MMR vaccine if protection against mumps or rubella is required. There are no known safety concerns about giving MMR vaccine to immune persons [9].

Treatment

Uncomplicated measles in immune competent persons is usually a self limiting illness. Secondary infections may require treatment with antibiotics.

Further information on measles and MMR immunisation available at

<http://www.hpa.org.uk>

http://www.dhsspsni.gov.uk/index/phealth/php/infectious_diseases/public_health_mmr.htm

http://www.dh.gov.uk/en/PublicHealth/Healthprotection/Immunisation/Greenbook/DH_409725

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