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- **Measles Update**

**FROM:**

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In follow-up to the Health Professional's Update issued on April 7<sup>th</sup>, an additional 4 cases of measles have now been confirmed.

The total case count is 5 for Toronto, 2 in the Guelph area and one in Halton for an overall confirmed number of 8 measles cases.

This number considerably exceeds the average of three cases per year over the last decade.

To date, there have been no measles cases identified in Peel. However, Peel Public Health is investigating residents of Peel that may have been exposed to the GTA cases.

**What can Peel physicians do?**

1. We are asking Peel physicians to maintain a high index of suspicion for measles in patients who present with symptoms consistent with measles, including:
  - Fever
  - Cough, coryza, conjunctivitis
  - Koplik's spots (small spots with white or bluish white centres on an erythematous base on the buccal mucosa)
  - Rash 2 - 4 days after prodrome, 14 days after exposure, persists 5 - 6 days. The rash usually begins in the hairline and then spreads to the face and upper neck, gradually proceeding downward and towards hands and feet.<sup>1</sup>
  - Incubation period 8 - 14 days, but may be as long as 21 days

**Measles is a Reportable Disease. If you suspect measles in a patient, please initiate**

**laboratory testing and report to Peel Public Health immediately at (905) 799-7700.**

**After business hours or on statutory holidays, please ask to be connected to the CD Supervisor on call through our main line. (905-799-7700, dial zero)**

**Laboratory Diagnosis of Measles**

Laboratory confirmation of measles is necessary.

To confirm a diagnosis of measles, all of the following tests should be performed:

- A. **Acute serology for measles IgM collected 4 to 28 days after rash onset.**
- B. Nasopharyngeal or throat swab within 4 days after onset of rash, and/or
- C. Urine sample (50 mL of clean catch) within 7 days onset of rash

Laboratory requisitions should be clearly marked "**stat**" and "**suspect case of measles**" and sent to the Central Public Health Laboratory.

**Infection Control Precautions**

It is imperative that patients presenting to emergency departments, walk-in clinics and physician offices be triaged immediately. Any patients complaining of fever accompanied by a rash should be masked and isolated without delay. These patients should be placed in a separate room when attending an emergency department, walk-in clinic, doctor's office or other health care setting. Ideally, such patients should be assessed at the end of the day. The room in which a suspect measles case has been seen should not be used until at least two hours have elapsed.

<sup>1</sup> For your reference, clinical images of measles are available at:  
<http://www.lib.uiowa.edu/hardin/md/measlespictures.html>  
[http://www.clinical-virology.org/gallery/cvn\\_rash\\_bacteria\\_01.html](http://www.clinical-virology.org/gallery/cvn_rash_bacteria_01.html)

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2. Peel residents who were exposed to the GTA measles cases may visit your emergency department, clinic or office to be assessed for immunity to measles. Please mark the laboratory requisition for these patients **“stat”** and **“serology to test for immunity to measles”** and send to the Central Public Health Laboratory.
3. Peel residents who were exposed to the GTA measles cases, may visit your office to request proof of immunization. Please note that in order to return to the school setting, students are asked to provide proof of receipt of 2 doses of vaccine against measles: one dose administered on or after the first birthday and a second dose at least 4 weeks after receipt of the first dose.
4. You may be asked to provide immunization to patients who were exposed to the GTA cases and have been identified as requiring measles vaccine. Please provide your patient with a record of the vaccine administered, and the date and site of vaccine administration. Please also advise your patients to provide this information to **Peel Public Health at (905) 799-7700.**