

Imperial County Public Health Department

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PUBLIC HEALTH ADVISORY

Measles Outbreak Update

Cases Linked to Disneyland Exposure Reported Statewide and Out of State

January 20, 2015

The recent cases of measles in Southern California highlight the need for the public and health-care providers to be vigilant about measles.

More than three dozen confirmed cases of measles in California have been linked to exposure at Disneyland during December 17-20, 2014. The California Department of Public Health (CDPH) also reported five cases who reside in other states and one lab-confirmed case in an unvaccinated toddler from Mexico, all of whom were exposed at the amusement park.

Although most of the recent cases were linked to Disneyland, five other cases reported during the same period in California are not associated with travel to the park. No new cases have been identified in any park visitors after that time period.

It's important to remember that this type of outbreak could happen anywhere there are large numbers of international travelers, including airports, restaurants, and shops. Measles is a highly contagious airborne disease. There are susceptible people in the United State, and measles is present in many parts of the world. The only way to prevent measles is through immunization.

Measles symptoms usually begin 10 to 12 days (up to 21 days) after exposure, with a fever as high as 105°F (40.5°C), malaise, cough, runny nose, and conjunctivitis. Three to five days following the onset of those symptoms, a rash develops. The rash usually begins around the ears and hairline and then spreads down to cover the face, trunk, arms, and legs.

Health-care providers should:

- Consider the diagnosis of measles in patients with an appropriate clinical presentation. Any patient suspected of having measles should be masked and immediately moved to a negative-pressure room when available.

- In office or clinic settings, consider options such as having patients call ahead when measles symptoms are present, and arranging to see suspect measles cases after all other patients have left the office. Another option is to assess patients outside of the building to avoid having a potentially infectious individual enter the office.
- Notify the Public Health Department Epidemiology section immediately about any suspect cases during office hours by calling (760) 482-4723, or the Duty Officer after hours.
- Do not wait for laboratory confirmation before reporting a suspect case. Epidemiology staff can assist with arranging testing.
- Test for measles. Recommended testing samples include throat or nasopharyngeal swab and urine specimen for measles PCR and culture, and a serum specimen for measles IgM and IgG.
- Ensure staff and patient vaccinations are up to date. Two doses of measles-containing vaccine (MMR) are more than 99% effective in preventing measles. Measles vaccines have been available in the United States since 1963, and two doses have been recommended since 1989. The first dose is given at 12-15 months of age, with the second dose at 4-6 years. The second dose may be given any time one month or more following the first dose. All medical staff should have two documented doses of MMR or serologic evidence of measles immunity.
- Provide post-exposure prophylaxis when indicated.

More information is available at:

<http://www.cdc.gov/vaccines/vpd-vac/measles/faqs-dis-vac-risks.htm>

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