

# MEDICAL HEALTH OFFICERS **UPDATE** FOR PHYSICIANS

**September 14, 2018**

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**Medical Health Officers:**

Dr. Trevor Corneil

Dr. Kamran Golmohammadi

Dr. Silvina Mema

Dr. Sue Pollock

Dr. Karin Goodison

**CONTACT INFO:**

**Duty MHO line (24/7)**

**1-866-457-5648**

## **Measles Update**

There are currently **no** confirmed cases of measles in Interior Health but we are asking healthcare professionals and the public to be alert for the signs and symptoms of measles.

There have been measles cases reported recently within the Lower Mainland (<http://www.bccdc.ca/>). Most recently, a confirmed case of measles attended the Skookum Music Festival and other events in Vancouver between Sept. 8 - 11, 2018.

### **Actions requested of all clinicians:**

1. Please consider measles in any patient with fever and rash, especially if they attended the Skookum Music Festival on Sept. 8, 2018 and/or the other events in Vancouver during these dates. Link to VCH Info Bulletin: <http://www.vch.ca/about-us/news/measles-alert-for-several-vancouver-locations>.
2. Please have office reception staff screen patients while booking their appointment so that those with fever and rash can be isolated upon arrival. Please ask them to wear a facemask and place them in a private room as soon as possible.
3. Test suspect measles cases by both virus detection and serology:
  - Nasopharyngeal swab (measles virus isolation and PCR testing)
  - Urine sample (measles virus isolation and PCR testing)
  - Blood sample to test for measles specific IgM and IgG class antibodies.

If you suspect the patient is still in their period of infectivity, please call ahead to the lab to ensure they can maintain isolation of the patient when coming in for testing. As the clinical presentation of measles can resemble other viral infections, please request that sera from suspect measles cases also be tested for parvovirus B19 and rubella antibodies.

4. Physicians who suspect measles in a patient who has attended these locations/ events:

**Please call the IH Communicable Disease Unit immediately during business hours at 1-866-778-7736. After hours and on weekends, please call the Medical Health Officer on-call at 1-866-457-5648.**

5. Promote immunization. Review with your patient their own and their children's medical records to ensure they have received two doses of measles containing vaccine. Children receive their first dose of measles containing vaccine at 12 months and their second dose at ages 4-6 years (second dose was previously given at 18 months).

- Individuals born before January 1, 1957 are considered immune, regardless of lack of memory disease.
- Individuals born January 1, 1957 to December 31, 1969 (except Health Care Workers) are considered immune if they report a history of disease or at least one dose of vaccine, otherwise they can be offered 2 doses of measles containing vaccine.
- Individuals born January 1, 1970 and later (January 1, 1957 for Health Care Workers) require either lab evidence of immunity or documentation of 2 doses of live measles vaccine given at 12 months of age and older and at least 4 weeks apart to be considered immune.
- Individuals can be immunized by calling their local health unit/centre.

6. Make sure yours and your office staff immunizations are complete.

**Symptoms of measles include:**

- Fever, cough, coryza and/or conjunctivitis and a maculopapular rash typically starting 3-4 days after the fever
- Koplik spots that look like grains of salt on a red inflamed background and appear on the mucosa of the cheek next to the upper premolars and molars in the early illness.

**Patients are considered infectious from 4 days prior to 4 days following rash onset and should be encouraged to self-isolate at home during this period.**

References:

Link to VCH Info Bulletin/website: <http://www.vch.ca/about-us/news/measles-alert-for-several-vancouver-locations>

Measles Health Link file: <https://www.healthlinkbc.ca/healthlinkbc-files/measles>

MMR Health Link file: <https://www.healthlinkbc.ca/healthlinkbc-files/measles-mumps-rubella-vaccine>

BC CDC Communicable Disease Control Manual: <http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20CDC/MeaslesSeptember2014.pdf>