

13 August 2019

## Measles in Auckland – 410

- There are now more than 400 confirmed measles cases in Auckland.
- Please notify on suspicion as ARPHS is seeing an increase in the number of cases *not* notified. See our [map for the distribution of cases in the region](#).
- Please test with a nasopharyngeal or throat swab, not a buccal swab.
- ARPHS is focussed on supporting high risk groups such as Early Learning Services (ELs) and schools, and working with health sector partners to increase vaccination coverage.
- Due to volumes, ARPHS is no longer able to call practices to confirm that a patient has measles. Practices are usually already aware of *possible* measles through patient presentations and *confirmed* measles through lab results.
- You may order serology to establish immunity in a contact of a case, when the result will impact on work or school attendance. If you request IgG serology for contacts of a confirmed measles case, please note “exposure to confirmed case” on the lab form, so the patient is not charged.

### Confirming measles cases in practices

- Due to volumes, ARPHS is currently not able to routinely notify general practices if they have a confirmed case. You will receive lab results to notify patients accordingly.
- Since measles is now circulating widely in the community, general practices should decide whether to inform patients who have been exposed to a confirmed case in a waiting room. Our data indicate these have a 0.3% risk of becoming a secondary case (compared to 6% for household contacts). You may have high risk patients (e.g. immune-suppressed) who you believe should be informed.

### Management of suspected measles

Test for suspected measles with urgent nasopharyngeal or throat PCR swab.

- Please notify ARPHS using the measles notification form (download from: <http://www.arphs.health.nz/public-health-topics/disease-and-illness/measles/>) faxed to 09 630 7431. You do not need to phone us to notify measles, however you may call for advice.
- Provide advice to suspected cases from the [Measles Whānau Pack](#) on our website.
- As the test requestor, please tell your patients the results of PCR tests. Some will be in isolation waiting for the result, or will have warned schools and early learning services.
- The updated process is outlined in the [clinical pathway flowchart](#), and on Regional HealthPathways.

### **Establishing immunity**

- There is high demand for serology testing to establish immunity, especially for those working in education.
- Individuals who have been exposed to measles and need to prove immunity to return to work should have serology. Mark lab request as “exposure to confirmed measles - for immunity determination” or similar. This will ensure they are not charged for the test.
- Those who are not close contacts may be charged for serology. Consider MMR vaccination instead, if immunisation status is unknown.

### **Promote MMR vaccinations**

- Actively schedule vaccinations for 12 month old children, brought forward from the 15 month schedule. All 15 month vaccinations can be given at 12 months.
- Recall unvaccinated children aged 1 to 5 years for MMR1.
- Opportunistically vaccinate: non-immune parents accompanying a suspected measles case, and anyone else under 50 years with uncertain vaccination status.