

INFO-MADO

Vol. 7, No. 1, May 2019

Newsletter of the Nunavik Department of Public Health on Reportable Diseases

Call for Vigilance: Measles

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Context

One case of measles was reported by the Regional Department of Public Health of the Centre-Sud-de-l'Île-de-Montréal Integrated University Health and Social Services Centre on May 2, 2019. This is the sixth case reported in Québec since the beginning of 2019. The infection was probably acquired during a trip to France.

Previously, on April 5, one case of measles was reported by the same Department of Public Health. The patient was a health worker of the McGill University Health Centre (MUHC) who was considered protected against measles. The atypical clinical presentation suggested partial immunity and reduced contagiousness. A process to identify contacts was undertaken by the MUHC and is now complete.

Epidemiology

Measles is endemic in many parts of the world, particularly Latin America, Africa, Asia, the Middle East, New Zealand and many European countries. Outbreaks are also under way in several states in the U.S.

In Québec, barring outbreaks, the number of measles cases varies from zero to four per year. Most of the reported cases turn out to have been acquired in a country where the disease is endemic.

Signs and Symptoms

Prodrome

- High fever ($\geq 38.3^{\circ}\text{C}$)
- Conjunctivitis with or without photophobia
- Rhinitis
- Cough
- Koplik's spots (1 to 2 days after rash)

Maculopapular rash (three to five days after onset of prodrome)

- Starts on face and neck and then becomes generalized
- Lasts at least three days

Contagiousness

Lasts from four days before onset of skin rash until four days after

Case Treatment

- No particular treatment
- Support treatment in case of complications

Diagnostic Tests

Test Period for taking specimens

Viral culture Nasopharyngeal: ≤ 4 days after onset of rash

 Urinary: ≤ 7 days after onset of rash

IgM serology From 3 to 28 days after onset of rash

IgG serology 1st serum (acute phase): ≤ 7 days after onset of rash

 2nd serum (convalescence): 1 to 3 weeks after first specimen

Nucleic acid amplification test (NAAT) Nasopharyngeal: ≤ 4 days after onset of rash

 Urinary: ≤ 7 days after onset of rash

Serology for IgM parvovirus B-19 and rubella is also recommended in order to exclude these diagnoses.

Recommendations

In the presence of a suspected case

- Have patient wear a surgical mask and have attending professional wear an N95 mask
- Isolate patient in a closed room
- Rapidly notify your institution's advisor for prevention and control of infections
- Rapidly notify the Department of Public Health

We recommend that health professionals take all opportunities to update the clientele's vaccinal status.

For further information

- *MSSS* Web site on measles (for professionals):
<https://www.msss.gouv.qc.ca/professionnels/maladies-infectieuses/rougeole/>
- Québec immunization protocol (*PIQ*):
<https://www.msss.gouv.qc.ca/professionnels/vaccination/piq-vaccins/rro-vaccin-contre-la-rougeole-la-rubeole-et-les-oreillons/>