

February 6, 2015

Attention: Physicians, Nurse Practitioners, Walk-in Clinics, Hospitals – Emergency, Infection Control, Occupational Health; Correctional Services, EMS

## **RE: MEASLES ACTIVITY and MMR RECOMMENDATIONS (2 pages)**

Currently, there have been four (4) confirmed measles cases in Toronto. In addition, Niagara Region Public Health has identified a fifth confirmed measles case. **At this time there are no confirmed cases locally.** There is also considerable measles activity occurring in the United States.

Measles is highly infectious and spread by **airborne droplet nuclei, close personal contact or direct contact with respiratory secretions of a case.** Transmission can occur as a result of the persistence of the virus in the air or on surfaces for up to 2 hours. Signs and symptoms of measles include **fever, runny nose, cough, drowsiness, irritability, soreness and redness of the eyes.** A red blotchy rash appears on the 3<sup>rd</sup> to 7<sup>th</sup> day, beginning on the face and spreading down the body. A person with measles is **infectious 4 days before and 4 days after the onset of the rash.**

**Report suspected cases of measles to the HKPR District Health Unit immediately.** Patients suspected to have measles should wear a mask and be placed in a separate room with the door closed when in a health care setting. Suspected cases should also be instructed to remain in isolation until contacted by public health.

**We would ask all health care providers to be on alert and remain vigilant for measles** in general, and in particular, for patients with compatible signs and symptoms who have traveled to Toronto or internationally (including the United States). For your reference, Public Health Ontario's (PHO) "Measles in Ontario: Update for Clinicians" is available at:

[http://www.publichealthontario.ca/en/eRepository/Measles\\_Update\\_for\\_Clinicians\\_February\\_3\\_2015.pdf](http://www.publichealthontario.ca/en/eRepository/Measles_Update_for_Clinicians_February_3_2015.pdf)

### **IMMUNIZATION**

There are no recommended changes to Ontario's routine, two-dose measles immunization schedule. As per the current immunization schedule, administering a second dose of measles-containing vaccine before the age of four to six years may be considered under certain circumstances, such as for individuals at higher risk of being exposed to measles during travel. In these situations, an accelerated schedule can be implemented, in which two doses of MMR vaccine may be given with a minimum interval of four weeks between doses.

For infants, the ministry currently publicly funds MMR vaccine for travel outside of North America as early as six months of age, based on the clinical judgment of the health care provider and the needs of the child. **Effective immediately, this eligibility has been expanded to include travel to regions where measles is a concern, including within North America.** Please note that, if the first dose of MMR is given at less than 12 months of age, two additional doses of measles containing vaccine must be administered after the child is one year of age to ensure long lasting immunity to measles.

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Adults born before 1970 are generally presumed to have acquired natural immunity to measles; however, some of these individuals may be susceptible. As per the current publicly funded immunization schedules, all Ontarians, regardless of date of birth, are eligible for two doses of measles-containing vaccine based on the health care provider's clinical judgment and the needs of the patient. A second dose of measles-containing vaccine is particularly recommended for adults in the following groups:

- Young adults (18 to 25 years of age)
- Post-secondary students
- Persons who received killed vaccine previously (born between 1967 to 1970)
- Health care workers
- Those who plan to travel internationally.

**Please continue to order MMR and MMRV vaccine through the regular vaccine order process.**

Canadian Blood Services (CBS), which is responsible for providing Ontario's immune globulin (Ig) supply, is aware of the current situation and the potential for increased orders. If Ig is required, hospitals and other clients should continue to order Ig through CBS.

If you have questions, please call the Health Unit and ask to speak with a nurse in the Communicable Disease Control Department.

Haliburton  
705-457-1391

Lindsay  
705-324-3569

Port Hope  
905-885-9100

After Hours  
1-888-255-7839