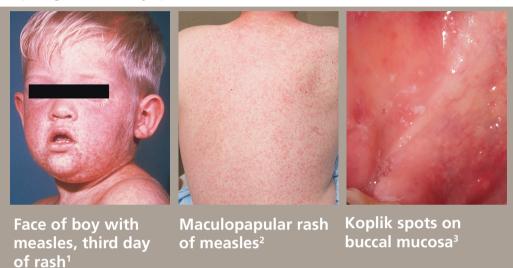
Emergency Department Staff be alert for Measles!



Measles

- is a highly infectious airborne illness that is often severe
- aerosols remain a risk to others for at least 30 minutes after the infectious person has left
- is infectious from 24 hours before onset of prodromal symptoms to 4 days after the appearance of the rash (if no clear date for onset of prodrome, then infectious from 4 days before rash onset)
- incubation period is usually 10 days to the onset of fever (range 7-18 days).



Symptoms and signs

Prodrome

- 2-4 days with FEVER and malaise, AND
- one or more of:
 - cough
 - coryza
 - conjunctivitis
 - Koplik spots on buccal mucosa (transient and uncommonly observed).

Rash

- fever is present at the time of rash onset
- commences on face / head then descends
- maculopapular becoming confluent
- onset 2-7 days after prodrome.

Patient usually looks and feels very unwell.

If measles is suspected

1. Infection control

- immediately put a fluid resistant surgical mask on the patient: this should be worn during transport and until the patient is in an isolation room
- treat the patient in strict airborne isolation: single negative pressure room with the door shut
- only healthcare workers who are immune to measles (see box) should treat the patient
- leave the room vacant for at least 30 minutes after the patient has left.

2. Treatment

- assess and treat the patient, including any complications
- provide supportive treatment such as antipyretics and fluids, as required.

3. Laboratory tests (URGENT)

- PREFERRED SPECIMEN: throat swab or nose swab or nasopharyngeal swab or aspirate, for measles PCR, in viral transport medium
- urine for measles PCR
- serology for measles IgG and IgM.

4. Notification (URGENT)

 notify all patients with suspected or confirmed measles immediately to SA Health Communicable Disease Control Branch to enable prompt public health action: phone 1300 232 272, 24 hours/7 days.

Who is immune to measles?

People who are:

∇immunocompetent **AND**

have at least one of:

∇born before 1966 (most will have been exposed to Á Ámeasles in childhood)

∇documented evidence of two measles containing Ávaccinations when both doses were given at Á≥ 12Ánonths of age and at least 4 weeks apart

∇serological evidence of measles immunity

∇documented laboratory definitive evidence of prior Ámeasles.

Further information including the management of measles contacts is available from

www.sahealth.sa.gov.au/InfectiousDiseaseControl



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- 2 Prof D Gordon, Flinders Medical Centre. Used with permission.3 Prof D Gordon, Flinders Medical Centre. Used with permission.