

SUBJECT: Measles
Date: April 3, 2024
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To: Hospitals, Emergency Physicians
From: Dr. Nicola Mercer, Medical Officer of Health

Actions to take:

- **Consider measles as a differential diagnosis for individuals presenting with compatible clinical signs and symptoms.**
- **Multiple specimens for diagnostic testing of measles are strongly preferred.**
- **In hospital settings, please draw serology in addition to PCR swabs. This can offer additional information to quickly confirm the diagnosis.**
- **Utilize appropriate IPAC practices when assessing individuals with suspected or confirmed measles.**
- **Report any suspect measles cases to Wellington-Dufferin-Guelph Public Health.**

Background

Recently, a suspect case of measles sought medical attention at a variety of medical settings, including several hospital emergency rooms. One hospital emergency site recognized this individual with compatible clinical symptoms of measles and implemented appropriate infection prevention and control measures to reduce any potential transmission. Please have a high level of suspicion for possible measles cases and conduct appropriate testing prior to discharge/admission. Hospitals are an ideal setting to collect serology as an addition to PCR testing which can provide more laboratory evidence to confirm the diagnosis as it is recognized that urine samples can be difficult to obtain in the pediatric population.

Clinical Information and Signs and Symptoms of Measles

The initial onset of symptoms of measles usually occurs 7-21 days after exposure. Symptoms include fever, cough, runny nose and conjunctivitis. Then 3-7 days after initial onset of symptoms, a maculopapular rash may appear on face and progress down the body (including the palms and soles).

When assessing a patient for measles, consider their vaccination status or any recent travel history. Individuals who have travelled internationally and who are unimmunized or under-immunized for measles are at increased risk of infection. Implement appropriate infection and prevention control measures to decrease any potential spread of infection.

Diagnosis of Measles in Acute Care Settings

The collection of multiple specimens is ideal for measles diagnostic testing. In acute care/hospital settings consider:

- Serology (acute - within 7 days of rash onset; convalescent minimum 7-10 days after the acute sample)
AND
- Nasopharyngeal or throat swab PCR (within 7 days of rash onset)
AND
- Urine PCR (within 14 days of rash onset)

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Refer to [Public Health Ontario's \(PHO\) Test information Index](#) for testing guidelines.

Reporting

Measles is a reportable disease. If you suspect a case of measles, please report to Wellington-Dufferin-Guelph Public Health immediately, **519-822-2715 ext. 4752**. After hours, weekends and holidays please call **1-877-884-8653**.

For more information, please contact:

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