



Philadelphia Department of Public Health
Division of Disease Control

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Health Alert
Confirmed Case of Measles in a Philadelphia Resident
May 25, 2012

The Philadelphia Department of Public Health (PDPH) Division of Disease Control is investigating a case of measles in a Philadelphia adult resident who did not have a history of MMR vaccine. The individual traveled to Thailand and returned to Philadelphia on May 5th 2012. The onset of prodromal symptoms was May 13th with rash onset on May 17th. The individual was seen at a Philadelphia hospital emergency department on May 18th and was subsequently admitted with signs and symptoms consistent with measles. Laboratory test results for measles IgM were reported positive to PDPH on May 24th. PDPH and the hospital are working closely to identify and alert exposed individuals. During the contagious period, the person attended a local establishment, *Barcade* (1114 Frankford Avenue) on the evening of May 12th and early morning May 13th, but otherwise remained isolated until presentation at the hospital. In light of these possible community exposures, PDPH recommends the following:

- Healthcare professionals should consider the diagnosis of measles in susceptible individuals who present with fever, rash, and cough, coryza, and conjunctivitis. Given the global resurgence of measles, suspicion should be especially high for individuals who report recent international travel, or contact with persons who have traveled internationally.
- Immigrants, international travelers and others who have not received vaccines in the United States as part of the pediatric immunization schedule may be susceptible to measles. In general, persons are considered immune to measles if they have had 2 doses of measles containing vaccine (generally given as measles, mumps, and rubella or MMR vaccine) given after the age of 12 months and at least one month apart; or if they have had a history of measles; or if they were born before 1957.
- Obtain urine and nasopharyngeal specimens for viral diagnosis (culture, PCR) from suspect measles cases as early as possible in the course of illness. Serum for measles IgM should be collected after the onset of rash. PDPH can facilitate specimen transport to the Pennsylvania Department of Health Bureau of Laboratories for diagnostic testing.
- To prevent transmission of measles in health-care settings, staff should be vigilant about recognizing measles-compatible rash illness in patients. Such patients should be removed from waiting areas to isolation rooms as quickly as possible. Patients should be asked to wear a surgical mask (if tolerated) for source containment, airborne infection-control precautions should be followed stringently, and patients should be placed in a negative air-pressure room as soon as possible. If a negative air-pressure room is not available, the patient should be placed in a room with the door closed.
- Health-care personnel place themselves and their patients at risk if they are not protected against measles. Health-care personnel should have documented evidence of measles immunity readily available at their work location.

Report all suspected measles cases *immediately* to the Division of Disease Control at 215-685-6748, so that public health investigation and disease control measures can be initiated promptly. After normal business hours and on weekends, call 215-686-4514 and ask for the person on-call for the Division.