



# Measles

## What is measles?

Measles is a highly infectious viral illness, which can cause serious disease. Measles is now uncommon in Australia because of high levels of immunisation.

Annually in Australia since 2000 there have been years with 10 cases only and some years with up to 200, many in returned travelers. In the Northern Territory since 2000 there have been 0 to 5 cases per year.

## How is measles spread?

Measles is spread by breathing in airborne droplets from the coughs and sneezes of people infected with the disease. Measles is one of the most highly infectious communicable diseases. In Australia most measles infection originates from returned overseas travelers or from foreign visitors who can then spread the infection to non-immune individuals.

## What are the symptoms?

The symptoms of measles are fever, cough, runny nose and sore eyes, which usually occur about 7 to 10 days after exposure to a case followed by a red, blotchy rash 2 to 4 days later. The rash starts on the face and spreads down the body. One third of people with measles develop complications particularly young children and adults. These include ear infection, diarrhoea and pneumonia, which may require hospitalisation. Rarely, measles may result in encephalitis (infection of the brain).

## What is the infectious period?

A person with measles is infectious from 24 hours before the onset of the first symptoms until 4 days after the appearance of the rash. They are most infectious before the rash appears so often do not know they have measles.

## Who is at risk?

People who are not immune either by vaccination or previous infection are at risk of measles infection.

## How can measles be prevented?

The best protection against measles infection is vaccination and people should receive 2 measles-containing vaccines. In Australia the vaccine is available as a combination vaccine containing measles-mumps-rubella (MMR) or measles-mumps-rubella-varicella (MMRV).

All children are currently recommended to get vaccinated for measles at 12 and 18 months of age as part of the National Immunisation Program. Children that did not receive the 2nd vaccine at age 18 months should receive the 2nd dose at 4 years.

People who were born before 1966 were most likely exposed to measles and are considered immune.

All people who were born after 1966 should have evidence of either receiving 2 measles-containing vaccines or evidence of having had the disease (by a blood test).

It is important for all overseas travelers to ensure that they are immune to measles.

No measles-containing vaccine should be given during pregnancy or to women contemplating pregnancy. Pregnancy should be avoided for 28 days after vaccination.

Disease in non-immune people exposed to measles can be prevented by administration of a measles-containing vaccine if given within 3 days of exposure, or by administration of immunoglobulin within 7 days of exposure. See the 'Measles Contact' fact sheet.

## How is it diagnosed?

Measles can be difficult to diagnose early in the illness because there are many other viruses that cause similar symptoms (cough, conjunctivitis and runny nose) with fever and a rash. Sometimes the presence of white spots inside the mouth, called Koplik spots, the timing of the fever and the rash and the characteristics of the rash can help a doctor to make the diagnosis.

Whenever measles is suspected, swabs from the nose or throat, a urine sample or a blood test can be collected to confirm the diagnosis in the laboratory. Confirming the diagnosis is important so that other people who may be at risk of measles can be identified.

## What is the treatment?

There is no specific treatment for measles. People with measles should have plenty of fluids and rest and treat symptoms as they occur. While the person remains infectious it is important that they stay at home to reduce the risk of spreading the disease to other people.

## Where can I get vaccinated?

The free vaccine is available from your community health centre, Aboriginal Medical Service and most general practitioners.

## How is measles controlled?

People who have measles should stay at home until they are no longer infectious which is usually 4 days after the onset of the rash. Doctors, hospitals, laboratories, schools and childcare centres must notify cases of measles to the local Centre for Disease Control. This is so that people at risk of infection can be identified and control measures can be implemented to prevent further spread of the virus.

For more information contact the Centre for Disease Control in your region

Alice Springs 8951 7540

Darwin 8922 8044

Katherine 8973 9049

Nhulunbuy 8987 0357

Tennant Creek 8962 4259

or <http://www.nt.gov.au/health/cdc>