Information about a measles outbreak in the Philippines

Current situation

On the 6th of February 2019 the Department of Health (DOH) of the Republic of the Philippine declared a measles outbreak at the National Capital Region. Meanwhile the DOH raised the red flag for measles in 15 other regions. From 1 January to 19 March this year, a total of 22,967 measles cases have been reported, with 333 deaths. The DOH points to vaccine hesitancy as one of the reasons for the recent measles outbreak. 66 % of the measles cases had no history of vaccination.

[https://www.doh.gov.ph/node/16721]

Measles

- **Epidemiology**
  Measles are caused by viruses and appear around the world. They are highly contigous. A measles infection is not a harmless children’s disease: about one in 10 patients will suffer complications. In Germany, vaccinations have ensured that measles infections are now much less common.

- **Transmission**
  Measles viruses can spread only by person-to-person contact through contact with infectious secretions from the nose or throat. Coughing, sneezing or talking produces small drops of infected saliva. These airborne pathogens can spread further and then be inhaled.

- **Incubation period**
  The first Symptoms occur roughly 8 to 10 days after being infected. It usually takes 2 weeks before the typical skin rash appears.

- **Contagiosity**
  People with measles are contagious for about 3 to 5 days before appearance of the rash. Once the skin rash is visible, you stay contagious for 4 more days.

- **Symptoms**
  Initially, patients suffer from fever, conjunctivitis, rhinitis, cough and an oral mucosal rash. The characteristic brownish-pink skin rash (measles exanthema) only forms after a few days – starting in the face and behind the ears before spreading over the patient’s entire body.

- **Preventive measures**
  The most effective preventive measure is the vaccination against measles. Basically, a lifelong immunity after two vaccinations is assumed. Unvaccinated children from the age of 9 month on, persons vaccinated only once in childhood or persons with unclear vaccination status with contact to measles patients should be vaccinated against measles with one vaccine dose, if possible within 3 days of exposure.

[www.infektionsschutz.de]

Management and Treatment

If a suspected case of measles is identified on board, immediate contact with a medical doctor is strictly advised. Also promptly notify the local health authority at the first port of call. The ill crew member or passenger should be isolated immediately and only be assisted by one person wearing a surgical mask and which is ideally immune (vaccinated two times or has undergone measles earlier). Crew members should wear gloves if touching the patient (or any object that may have contaminated with secretions from the patient). When assisted in his/her cabin, the patient should wear a surgical mask. Close contacts of the patient should be identified and checked for symptoms for the duration of the incubation period, and a post-exposure prophylaxis (vaccination) should be considered.