



June 2011

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MEASLES

Suspected
case



Notify PHPU
0141 201 4917



Non-charcoal
flocked
throat swab*



Insert in viral
PCR solution
(VPS)



Virus Lab
Gartnavel
0141 211 0080

*Swabs can be taken
from prodromal to 14
days after onset of
rash

PHPU Newsletter

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MMR SPECIAL EDITION

Measles outbreak in Europe

On 26th May, the Health Protection Agency in England reported that more than 330 cases of confirmed measles had been reported in the previous 4 months; a 10-fold rise on the same period last year. It is believed that the disease is being spread across the country by travellers returning from those areas of Europe where there have been large on-going outbreaks as reported in this newsletter previously.

GPs are advised that children and young adults not fully immunised with two doses of the MMR vaccine as infants, due to unfounded fears over links between the MMR vaccine and autism, be vaccinated as soon as possible. Vaccination is especially required if they are planning to go to the affected countries in Europe during the summer holiday (Spain, France, Germany and Belgium). See table on page 2 for MMR requirement by age.

Important notes about MMR

- Where a child under 1 year is travelling to a country affected by outbreak, MMR can be given from age 6 months but 2 further doses should be given at the recommended ages
- Children who are travelling who have received one dose of MMR at the routine age should have the second dose brought forward to at least one month after the first
- If the child is under 18 months of age and the second dose is given within three months of the first dose, then the routine pre-school dose (a third dose) should be given in order to ensure full protection
- Ideally, the 2 doses of MMR should be 3 months apart as this produces a better immune response
- Mumps: many young people have not received mumps vaccine, even if they have received vaccines containing measles and rubella. They may be under the impression that they have received mumps vaccine and are protected. *Prior to 1988 there was no routine vaccination against mumps in the U.K.* In 1994 MR (measles/rubella) was used because sufficient quantities of MMR were not available
Two doses of MMR are required at least 1 month apart (preferably 3) to provide optimum protection against mumps
- It is desirable to give a full primary course of 2 doses, in practice, if there is insufficient time. However, giving a single dose to a traveller will provide good protection (approximately 90%) against measles
- Measles vaccine was introduced in the U.K. in 1968 and uptake was good from 1980s. An MR (measles/rubella vaccine) campaign in schools in 1994, followed up with a second dose (MMR) in 1996 makes it likely that people in school between these dates have had at least one dose of measles vaccine
- If exposed to measles in pregnancy, a clear record of a full course of MMR indicates that HNIG would **not** be required
- MMR should not be given to a pregnant woman

MMR vaccine supply

Travellers are entitled to free centrally-supplied MMR vaccine as GPs have the discretion to give it when they consider clinically necessary. MMR stocks are available from the NHSGGC Pharmacy Distribution Centre in Govan (0141 347 8981)

If you would like to comment on any aspect of this newsletter please contact Marie Laurie on 0141 201 4933 or at marie.laurie@ggc.scot.nhs.uk

MMR requirement for travellers by age

Year of birth	Vaccination history	Recommendation for travellers
1990 - present	2 doses MMR or previous measles infection	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps-containing vaccination
	No history of MMR or measles	2 doses of MMR, at least 1 month apart, preferably 3 months apart
1980 - 1990	2 doses of MMR or other measles vaccine or measles infection	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps-containing vaccination
	At least 1 dose of measles vaccine	1 dose MMR (2 doses if no history of mumps vaccination)
	Women of child-bearing age, who may have had a single dose of measles vaccine PREGNANT WOMEN SHOULD NOT BE GIVEN MEASLES VACCINE	With an uncertain vaccination history, it is preferable to give 2 doses of MMR, at least 1 month apart but preferably 3 months apart, to ensure that the patient has a documented completed primary course of measles vaccination. <i>Pregnancy should be avoided for at least 1 month after MMR</i> ENSURE THAT THE WOMAN IS NOT PREGNANT BEFORE COMMENCING VACCINATION
1970 - 1979	2 doses of MMR or other measles vaccine	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps-containing vaccination
	No history of MMR or measles infection	2 doses of MMR, at least 1 month apart, preferably 3 months apart
Pre - 1970	Assumed to have been exposed to measles and be immune	No measles vaccination required

IMPORTANT REMINDER TO PRIMARY CARE STAFF: CHILDHOOD MMR UPTAKE (Apr 10 - Mar 11)

1st dose of MMR: The uptake-rate of MMR1 by age 24 months in NHSGGC was **92.6%**. This increased to **95.8%** by age 5 and to **96%** by age 6. **Of all the children evaluated in the 3 cohorts (39504), 2076 (5.25%) were unimmunised against measles.**

2nd dose of MMR: The MMR2 uptake-rate was **88.4%** by age 5 years and **92.7%** by age 6 in NHSGGC. **Of the children in the two cohorts (25644), 2449 children at age 5 and 6 (9.5%) during the 10/11 period were partially immunised against measles.**

GPs, HVs and practice nurses are requested to make every attempt to identify those children who have not received the full course of MMR but especially MMR1 between the ages of 13 months and 6 yrs as children are at high risk of measles and its complications. Where compliance is not assured, the interval between doses can be reduced to 1 month if child is >18mths.