



# MEASLES

Single  
Point  
Lesson

Measles is a viral illness caused by a morbillivirus of the paramyxovirus family which is very infectious. The virus is passed in the respiratory secretions of the infected person's nose and throat and is spread by their sneezing and coughing. It is possible to catch measles from direct contact with articles which have been contaminated by these infected secretions e.g. hankies or tissues. It is one of the most highly infectious communicable diseases- **contact of 15 minutes or more in the same room** as someone with measles is sufficient to be deemed a significant exposure and to transmit the infection.

Since 1 January 2018 and 31 October 2018, there has been a rise of 913 laboratory-confirmed measles cases in England compared to 259 in 2017.

## Symptoms

- Measles starts with a 2 – 4 day illness ('**prodromal phase**') before the rash appears, which typically includes high fever, coryzal symptoms, cough and conjunctivitis.
- **The maculopapular rash.** See fig 1, generally starts on the face and behind the ears and their distribution expands further to the trunk
- **Koplik spots.** See fig 2

## Complications of Measles

- Viral pneumonitis and otitis media, as well as diarrhoea.
- Tracheobronchitis ('measles croup')
- Encephalitis occurs more rarely-0.05% to 0.1%
- Subacute sclerosing panencephalitis (SSPE) is very rare -0.01% of cases .

## Incubation

- The **incubation period can vary from 7-21 days** but typically onset of symptoms is around 10-12 days from exposure
- Measles is infectious from the start of the symptoms (typically 4 days before the appearance of the rash) to four days after.
- **Stay off school/ work for 4 days from onset of rash**



Fig 1



Fig 2

**Treatment** There is no specific treatment for Measles infection but an appropriate medicine such as paracetamol to help bring down a high temperature should be used. Also, if a secondary infection develops the doctor may prescribe antibiotics to treat this e.g. an ear or chest infection.

## GP practice

- **Signs should be placed in GP surgery waiting areas advising patients with any rash illness to report to reception straight away so they can be directed to a side room with a closed door**
- **Only measles immune staff to care for the patient**
- **The room the patient was seen in should be closed for 2 hours after. Open a window if possible after this time, and then deep clean**

**Measles is a Notifiable disease. Inform Public Health England.** PHE will contact all close contacts. Vulnerable contacts may need post exposure prophylaxis with MMR or human immunoglobulin as appropriate. An Oral Fluid kit will be sent to the patient to be taken as soon as possible.

## Risk Assessment

- **Travel:** assessment if the area is known to have measles circulating.
- **Immunisation history:** any known vaccination of MMR or history of measles.
- **Epidemiological link:** assess if there has been a known epidemiological link with another confirmed case.