

**Alabama Department of Public Health (ADPH)
Alabama Emergency Response Technology (ALERT)
Health Alert Network (HAN)
March 4, 2024
Measles Alert**

Between December 1, 2023 and January 23, 2024, the Centers for Disease Control and Prevention (CDC) was notified of 23 confirmed U.S. cases of measles, including seven direct importations of measles by international travelers and two outbreaks with more than five cases each. Most of these cases were among children and adolescents who had not received a measles-containing vaccine (MMR or MMRV), even if age eligible.

At this time, there are no reported cases of measles in Alabama, but the Alabama Department of Public Health (ADPH) urges vigilance for this disease. Measles is a disease that is reportable in Alabama within 24 hours of suspected diagnosis, and ADPH can assist in testing, as well as investigation of suspected cases.

Healthcare providers should be on alert for patients who have: (1) febrile rash illness and symptoms consistent with measles (*e.g.*, cough, coryza, or conjunctivitis) (2) have recently traveled abroad, especially to countries with ongoing measles outbreaks, or to states where measles has been reported (3) Have no documented history of MMR or MMRV vaccine.

Measles cases originate in under vaccinated U.S. residents who travel internationally or are exposed to measles in other settings and then transmit the disease to people who are not vaccinated against measles. Infected people are contagious from 4 days before the rash starts through 4 days afterwards

Recommendations for Healthcare Providers

1. **Isolate:** Do not allow patients with suspected measles to remain in the waiting room or other common areas of the healthcare facility; isolate patients with suspected measles immediately, ideally in a single-patient airborne infection isolation room (AIIR) if available, or in a private room with a closed door until an AIIR is available. Healthcare providers should be adequately protected against measles and should adhere to standard and airborne precautions when evaluating suspect cases regardless of their vaccination status.
2. **Notify:** Immediately notify local or state health departments about any suspected case of measles to ensure rapid testing and investigation. Measles cases are reported by states to CDC through the National Notifiable Diseases Surveillance System (NNDSS) and <https://www.alabamapublichealth.gov/immunization/measles.html>
3. **Test:** Follow ADPH testing recommendations and collect either a nasopharyngeal swab or throat swab for reverse transcription polymerase chain reaction (RT-PCR), as well as a blood specimen for serology from all patients with clinical features compatible with measles. Testing should be sent to the Bureau of Clinical Laboratories, Alabama Department of Public Health <https://www.alabamapublichealth.gov/immunization/assets/measles-test-collect-ship.pdf>

4. **Manage:** In coordination with local or state health departments, provide appropriate measles post-exposure prophylaxis (PEP) to close contacts without evidence of immunity, either MMR or immunoglobulin. The choice of PEP is based on elapsed time from exposure or medical contraindications to vaccination.
5. **Vaccinate:** Make sure all your patients are up to date on measles vaccine, especially before international travel. People 6 months of age or older who will be traveling internationally should be protected against measles.
6. For More Information, please review the information below:
<https://us2.campaign-archive.com/?u=2ba8493f7021514e0ec227751&id=f856eb2fc4>
<https://www.childrensal.org/news/health-experts-warn-parents-about-rise-measles-cases>
<https://www.cdc.gov/measles/index.html>