

## Measles Cases, Measles Elimination and MMR vaccination

For the attention of:

- Senior Partners
- GPs
- Practice Nurses
- Practice Managers
- All other practice staff

Dear Colleagues

We are writing to advise that we have had a number of **confirmed and probable measles** cases reported across Gloucestershire, and more recently further afield including in Bristol and South Gloucestershire, and Poole in Dorset.

There has been communications activity in relation to these cases and resultant media interest. You may therefore experience an increase in queries regarding measles and / or the MMR vaccine from your patients. Please could you ensure that any unvaccinated individuals who contact you regarding MMR are offered an appointment to receive these vaccines promptly.

We would also like to remind staff to check the MMR vaccine status of patients attending your practice and to **opportunistically offer the vaccine to those with an unknown or incomplete vaccine status**, where possible.

For adults over 16 years the payment for administering the vaccine, under the Enhanced Service, is £9.80 which can be claimed via the normal CQRS process. For patients aged under 16 years, this is already included as part of your contractual payment (Global Sum).

Please could you also **maintain a low diagnostic threshold for measles** if you see patients presenting with suggestive symptoms (including but not limited to: high temperature and typical rash, conjunctivitis, Koplik spots); report suspected cases to the PHE Health Protection Team; and follow prevention measures if you suspect measles e.g. remind all staff, including receptionists, to encourage patients to call ahead and not to turn up at the practice, self-exclude and avoid school or other gatherings, whilst infectious, etc.

We realise that this message about measles cases might be confusing coming so soon after the **announcement by the WHO that measles had been eliminated** in the UK, so here is an explanation of what 'elimination' of measles means in practice:

Elimination of measles or rubella can be verified by WHO once a country has sustained interruption of endemic transmission for at least 36 months. Endemic transmission is defined as continuous transmission of indigenous or imported measles or rubella virus that persists for a period of 12 months or more in a defined geographical area.

The UK submits evidence to WHO on an annual basis on the epidemiology of our cases including the genotyping information which we use to track chains of transmission (which is why reporting of suspected cases and the oral fluid testing that you help to collect for us is so important!)

Measles elimination does not mean that there is no more measles and the status of having achieved elimination can be lost as well as gained if we do not maintain high levels of MMR uptake and promptly manage any cases of measles to prevent further transmission.

After the 2012/13 measles outbreak, and subsequent national catch up campaign, there were two very quiet years where there were very few measles cases and all of them were imported infections with limited onward transmission. None of these cases resulted in a chain of transmission that lasted 12 months.

In 2016, however, there were over 500 confirmed measles cases in the UK– most of them in the 15 to 25 year old age group, with transmission fuelled by summer music festivals. 240 of these cases occurred in the South West and we did have a chain of transmission which persisted for 10 months, but not for more than 12 months. This is the same situation so far in 2017 and so it is likely the UK will maintain this status in 2017 as well, unless we see a rapid increase in transmission from recent cases.

It is important to stress that although measles is no longer freely circulating it has certainly not been wiped out. We continue to get many importations and these could lead to larger outbreaks if introduced in communities where we have particularly under vaccinated communities. So we certainly need to maintain our focus on achieving and maintaining 95% MMR uptake for the childhood programme plus catching-up those who missed out – particularly the 15 to 25 year olds.

If you have any queries then please do not hesitate to contact us via the following email: [england.southwestscrimms@nhs.net](mailto:england.southwestscrimms@nhs.net)