



STATE OF NEW YORK DEPARTMENT OF HEALTH

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To: Providers, Hospitals, and Local Health Departments

From: New York State Department of Health, Bureau of Immunization

HEALTH ADVISORY: MEASLES IMMUNIZATION PRIOR TO INTERNATIONAL TRAVEL

Please distribute to the Infection Control Department, Infectious Disease Department, Director of Nursing, Medical Director, Director of Pharmacy, and all patient care areas.

SUMMARY

- All travelers, children and adults, with destinations outside the United States (U.S.) should be up to date on their immunizations prior to travel. Measles outbreaks are common in both developed and developing countries, making the risk for exposure to measles high for many U.S. travelers.
- Infants 6 – 11 months of age who are traveling outside of the U.S. should receive a dose of measles, mumps, and rubella (MMR) vaccine prior to travel.
- Children > 12 months of age, adolescents and adults should receive two doses of MMR vaccine prior to departure, as long as 28 days have passed since the first dose. A physician documented history of measles disease, laboratory evidence of immunity, or having been born before 1957 are also accepted as proof of immunity to measles.
- Ideally, vaccination should be given at least 4 weeks prior to travel, however MMR vaccine effectively prevents measles even if given days before travel.

BACKGROUND

In New York in the last 3 years, 60% of the cases of imported measles have occurred among U.S. travelers to Europe and Asia, including travelers to the United Kingdom, France, Belgium, and other developed nations. From 2001 through 2010 in the U.S, 692 measles cases were reported to the Centers for Disease Control and Prevention (CDC); 300 (43.4%) were imported. Among the imported cases 157 (52.3%) were U.S. residents. Forty eight (30.6 %) of the 157 U.S. resident imported cases occurred among children aged 6–24 months. While all 48 children were eligible for MMR vaccine, only 3 (6.3%) had been vaccinated for measles before their departure. Fourteen (29.2%) of the 48 children were hospitalized; no deaths were reported.

MEASLES EPIDEMIOLOGY

Measles is one of the most highly contagious infectious diseases. It is spread by contact with an infected person and through coughing and sneezing. Measles virus can remain active and contagious for up to 2-3 hours in the air or on surfaces.

Measles is characterized by a prodrome of fever (101–105 degrees F) followed by cough, coryza, and/or conjunctivitis. An erythematous, maculopapular rash presents 2-4 days later and lasts ≥ 3 days. It usually starts

on the face and proceeds down the body to involve the extremities last, including the palms and soles. The rash is usually discrete but may become confluent on the upper body; it resolves in the same order that it appeared. Koplik's spots (punctate blue-white spots on the bright red background of the buccal mucosa) may be present but are often not seen and are not required for the diagnosis of measles.

MEASLES VACCINATION RECOMMENDATIONS

Children 6–11 months of age who are traveling outside the United States

- Should receive a dose of MMR vaccine prior to international travel.
- MMR vaccine given before 12 months of age should not be counted as part of the routine series. Children who receive MMR vaccine before age 12 months will need two more doses, the first of which should be administered at 12–15 months of age (12 months if the child remains in a high-risk area), and the second at least 28 days later (typically at age 4–6 years or before beginning kindergarten).

Children ≥ 12 months, adolescents, and adults who are traveling outside the United States

- All children regardless of whether they are traveling should receive an MMR vaccine at 12–15 months of age. Children over one year of age who have received one dose of MMR vaccine more than a month prior to international travel should receive a second dose prior to departure, as long as 28 days have passed since the first dose.
- Anyone who has received two valid doses of MMR, or other live measles-containing vaccine, is considered immune to measles.
- Documentation of provider-diagnosed measles disease, laboratory evidence of immunity, or having been born before 1957 are also accepted as proof of immunity to measles.
- Anyone who lacks proof of measles immunity, as defined above should receive MMR vaccination prior to international travel.

ADDITIONAL INFORMATION

Destination specific travel immunization information is available on the Centers for Disease Control and Prevention's Travelers' Health website at: wwwnc.cdc.gov/travel/destinations/list.aspx.

For additional information on measles outbreak control measures, clinical presentation and diagnostic tests, please refer to the CDC website at:

<http://www.cdc.gov/vaccines/vpd-vac/measles/default.htm>.

The NYSDOH Measles Fact Sheet is available online at:

http://www.nyhealth.gov/diseases/communicable/measles/fact_sheet.htm

For further information, please contact your local health department, the New York State Department of Health, Bureau of Immunization at 518-473-4437, or the New York City Department of Health and Mental Hygiene at 212-676-2323.