



**MEASLES CASE REPORTED IN WEST VIRGINIA:  
PROVIDER AND HEALTH CARE FACILITY GUIDANCE FOR  
DETECTION AND MANAGEMENT**

**TO: West Virginia Local Health Departments, Health Care Providers, Health Care Facilities,  
Health Professional Organization and Other Health Partners**

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West Virginia Department of Health and Human Resources, Bureau for Public Health**

**DATE: June 15, 2009**

**LOCAL HEALTH DEPARTMENTS:** PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HEALTH FACILITIES, LABORATORIES AND OTHER APPLICABLE PARTNERS

**OTHER RECIPIENTS:** PLEASE DISTRIBUTE TO ASSOCIATION MEMBERS, STAFF, ETC.

**West Virginia is reporting a case of measles in a two year old unvaccinated resident of Wood County, West Virginia. This is the first case of measles in West Virginia since 1994. Rash onset was June 6, 2009, making the infectious period June 2 – June 10, 2009. The second generation of cases, if any, is expected to have rash onset between June 9 and June 28, 2009. During the infectious period, the child visited four health care facilities in Wood and Kanawha Counties, West Virginia.** Physicians at two of these facilities requested measles IgM, which was positive in two independent laboratories. Serum is being referred to the Centers for Disease Control and Prevention for confirmation. Health care providers and patients who were exposed to this case during the infectious period have been contacted and advised to watch for signs and symptoms.

**Providers are advised to be on the alert for possible measles.** Measles presents with 2-4 days of a prodrome characterized by fever which increases in a step-wise fashion, reaching as high as 103° - 105°F. Subsequent signs include cough, coryza (runny nose) and conjunctivitis ('the 3 C's'). The measles rash is maculopapular and lasts about 5 days. It begins at the hairline, and then proceeds gradually downwards over about 3 days, eventually reaching the hands and feet, including the palms and soles. The maculopapular lesions are generally discrete, but may become confluent. Initially, lesions blanch with pressure. By 3-4 days, most lesions will not blanch. Fine desquamation may occur over more severely involved areas. The rash fades in the same order as its appearance. Measles is highly contagious by the airborne route. Patients with suspect measles should be isolated immediately using airborne precautions.

Complications of measles occur in 30% of individuals and may include diarrhea, otitis media, pneumonia, and acute encephalitis. Death occurs in 0.2% of individuals.

**Suspect and confirmed cases of measles should be reported immediately to the local health department. Infectious Disease Epidemiology, Bureau for Public Health (800-423-1271) can assist with obtaining confirmatory testing through the Centers for Disease Control and Prevention. (False positives sometimes occur through commercial labs.)**

If exposure is recognized, disease may be prevented in healthy susceptible persons by administration of MMR vaccine within 3 days of the exposure. Immunocompromised persons or infants or susceptible pregnant women should be offered immune globulin within 6 days of exposure. Prompt reporting enables tracing exposed persons and intervening to prevent secondary cases.

**Measles can be prevented with two doses of MMR vaccine, given one month apart on or after the first birthday. Health care facilities should assure that all health care personnel are immune to measles.**

For further questions about measles, contact your local health department or the WV Bureau for Public Health's Division of Infectious Disease Epidemiology at (800) 423-1271.

This message was directly distributed by the West Virginia Bureau for Public Health to Local Health Departments, Health Care Providers and Facilities, Health Professional Organizations and Other Health Partners. Receiving entities are responsible for further disseminating the information to the targeted audiences noted.

**Categories of Health Alert messages:**

**Health Alert:** Conveys the highest level of importance, warrants immediate action or attention.

**Health Advisory:** Provides important information for a specific incident or situation. May not require immediate action.

**Health Update:** Provides updated information regarding an incident or situation. Unlikely to require immediate action.