

CORRECTED VERSION – amended phone number below

## Measles Cases in the Lower Mainland

This summer, there have been a number of lab-confirmed cases of measles in the Lower Mainland. Most recently, an individual with measles travelled through YVR on July 30<sup>th</sup> and August 6<sup>th</sup>. The BCCDC released information on this case which can be found here: <http://www.bccdc.ca/about/news-stories/news-releases/2018/yvr-measles-alert-aug-14>. If a patient has been infected with measles from this event, they may present with symptoms until approximately August 27<sup>th</sup>, 2018.

In light of recent cases, we would like to remind all physicians of the protocol for managing suspect measles cases that may present to your office or department:

**a. Please be vigilant for clinical cases of measles.** Measles presents with a fever, cough, runny nose, conjunctivitis and a red maculopapular rash. The rash begins in the hairline on the 3rd or 4th day after fever onset, then spreads rapidly to the face, trunk and limbs. Koplik spots, if present, fade as the rash appears. Individuals born after 1970 and unimmunized against measles are the most likely to be infected. Although less likely, those who received only one dose of measles-containing vaccine can also contract measles disease.

**To confirm the diagnosis, please collect a nasopharyngeal or throat swab and urine for measles virus detection and blood for serologic testing (measles IgG and IgM; mark as 'ACUTE measles').** For nasal/NP swabs, please use a flocked swab (COPAN, red top with viral transport media)/ for throat swabs use a virus isolation swab (Starplex, S160V, blue top). If you don't have these swabs, they can be ordered by faxing your request to BCCDC at 604.707.2606. Order form available at: <http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Forms/Labs/PHLOrderForm.pdf>

**b. Promptly isolate patients with suspect measles:** Measles is airborne and highly infectious. If a patient presents with a fever and rash or reports contact with a case of measles, please provide them a surgical mask, and place them in a private room immediately to protect other patients. The patient should remain masked during the entirety of the appointment and **the exam room should not be used for two hours after the patient has left.** Visits to the Emergency department should be avoided, but if required, the ER should be notified in advance and the patient instructed to remain masked the entire time, including on ER arrival, where the patient will be put into a negative pressure room immediately. Suspect cases will need to stay isolated at home until four days after rash onset.

**c. Public Health should be immediately notified of all suspect measles cases/contacts,** preferably while the patient is in your office (604-675-3900 and 604-527-4893 after hours). Early intervention with MMR vaccine after measles exposure can prevent further cases. Immediate notification of Public Health increases the effectiveness of this intervention.

**d. Please take this opportunity to immunize against measles.** Two doses of MMR vaccine are recommended for patients born after January 1, 1970. Those most likely to be unprotected are young adults who received their childhood vaccinations outside of Canada or those whose parents refused childhood vaccinations. For health care workers, including you and your staff, two doses of MMR are recommended if you were born after January 1, 1957. While people born prior to 1970 have likely been exposed and are considered protected, they

You can reach a Medical Health Officer in Vancouver at 604.675.3900 Toll free at 1.855.675.3900  
For public health emergencies after hours contact the Medical Health Officer on call at 604.527.4893

Vancouver Medical Health Officers

Dr. Patricia Daly (Chief Medical Health Officer)

Dr. Réka Gustafson, Dr. John Harding, Dr. James Lu, Dr. Emily Newhouse

To receive Physicians' Updates by email please contact us at: [vchregistrationcdc@vch.ca](mailto:vchregistrationcdc@vch.ca)

can be immunized if they do not recall a history of measles infection. Adults often do not have reliable immunization records. Patients with an uncertain immunization history may also be immunized. There is no harm in giving MMR to those who are already immune. Be sure to review contraindications to MMR vaccine and inform patients of side effects.

## Concussion Training for Physicians: CATT

The approach of the fall sports season can mean peak concussion season for many of your patients. However, mild traumatic brain injury affects a broad swath of the population – including patients impacted not only by sports, but also by falls and road collisions. The BC Injury Research and Prevention Unit has recently released a revised **Concussion Awareness Training Tool (CATT)** for medical professionals that can help you assess and treat your patients facing mild traumatic brain injury.

### **CATT for Medical Professionals**

CATT-MP is updated with the most recent recommendations from the Concussion in Sport Group. It synthesizes current evidence to provide guidance on assessing patients within the first few hours post-injury, optimally managing care within the first 2-4 weeks, and determining when specialty referral is appropriate. It includes the SCAT5 – a standardized tool for evaluating concussions. CATT-MP is free, provides Section 3 credits for MOC and is accredited by UBC CPD.

### **CATT for Coaches, Parents, Players, and School Professionals**

Your patients may also benefit from learning more about concussions as well. There are tailored versions of the CATT for coaches, parents, players, and teachers. Information includes the medical impact of concussions, how to recognize and respond to a potential concussion, and prevention strategies. Evaluation has demonstrated CATT is effective at increasing knowledge among lay audiences.

Each CATT can be found at: <https://cattonline.com/>

You can also find a wealth of other concussion management tools and resources on the CATT website. Print materials can be ordered at: <https://cattonline.com/order-catt-print-resources/>

You can reach a Medical Health Officer in Vancouver at 604.675.3900 Toll free at 1.855.675.3900  
For public health emergencies after hours contact the Medical Health Officer on call at 604.527.4893

Vancouver Medical Health Officers

Dr. Patricia Daly (Chief Medical Health Officer)

Dr. Réka Gustafson, Dr. John Harding, Dr. James Lu, Dr. Emily Newhouse

To receive Physicians' Updates by email please contact us at: [vchregistrationcdc@vch.ca](mailto:vchregistrationcdc@vch.ca)