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## Measles

Although no cases of measles have been identified in Alberta in 2024, outbreaks are occurring around the world and people from Alberta may contract the disease through travel if they are not immune. AHS is advising anyone with symptoms of measles to stay at home, avoid contact with others and call 811 before visiting any hospital, clinic or healthcare provider.

Symptoms include:

- fever 38.3°C or higher
- cough, runny nose, or red eyes, and
- a red, blotchy rash appearing three to seven days after fever starts, beginning behind the ears and on the face and spreads down to the body and then to the arms and legs.

The virus is highly contagious and can stay in the air for up to two hours. The best protection against measles is immunization with two doses of a measles-containing vaccine. In Alberta, measles-containing vaccine is offered free of charge through Alberta's publicly funded immunization program. Children are currently recommended to receive their first dose at 12 months and their second dose at 18 months of age. For more information see the biologics page:

<https://www.albertahealthservices.ca/assets/info/hp/cdc/if-hp-cdc-mmr-vac-bio-pg-07-270.pdf>

Individuals are considered to have evidence of immunity to measles if they:

- received two documented doses of measles-containing vaccine after one year of age delivered at least 28 days apart, OR
- have serologic proof of immunity (i.e., a positive measles IgG), OR
- have had prior lab-confirmed measles disease, OR
- were born before 1970 (see exceptions below).

Some groups/individuals have additional recommendations for measles immunization including:

- health care workers without evidence of immunity are recommended to have 2 doses of measles-containing vaccine regardless of their year of birth (i.e., including those born before 1970).
- travelers 6 months of age and older traveling to places in Canada where measles is circulating or outside Canada, including to the United States, should be immunized, ideally at least two weeks before they travel, as follows:
  - Infants 6 to 11 months who are traveling should receive 1 dose of measles-containing vaccine. (Two additional doses should be given at 12 months of age and older with at least 28 days between doses.)

- A complete series of immunization consists of 2 doses of measles-containing vaccine provided after 12 months of age administered at least 28 days apart. All Albertans should confirm their immunization status prior to departure. Adults born prior to 1970 should be offered a dose of measles-containing vaccine prior to travel if they do not have a history of laboratory-confirmed measles disease or laboratory evidence of measles immunity.
- Students at post-secondary educational institutions born before 1970 without evidence of immunity to measles should have one lifetime dose of measles containing vaccine.

Albertans 14 years and older can get their immunization records online using their [MyHealth Records account](#).

Albertans uncertain of their immunization history, or their child's immunization history, can talk to their healthcare provider or call Health Link at 811 to discuss.

Serological pre-exposure testing to determine immunity in healthy individuals including health care workers is not routinely recommended.

- If a person's immunization records are unavailable, it is preferable to offer measles containing vaccine on a schedule appropriate for their age and risk factors rather than ordering serological testing.
- Please refer to the [Provincial Laboratory Bulletin on testing](#) in the exceptional situation that serological testing to determine immunity is required.

#### Actions for Healthcare Providers:

- Ensure you and your staff are immune to measles. Healthcare providers should confirm that they have received 2 doses of measles containing vaccine, regardless of their year of birth. Options include checking proof of immunity records, [MyHealth Records](#), or calling 811.
- Recommend all patients born in 1970 or later check their immunization records and get caught up on routine measles immunizations.
- Encourage patients to follow additional immunization guidance before traveling to areas where measles is circulating, as recommended above. More information is available here: [07.270 Measles Mumps Rubella Vaccine Biological Page \(albertahealthservices.ca\)](#)
- Report all suspected cases immediately to the MOH on-call prior to ordering testing. Do not send patients for testing without discussion with the MOH on-call to avoid unwanted exposures.
- Arrange for testing of clinical specimens as outlined in the Provincial laboratory guidance, available here: <https://www.albertahealthservices.ca/assets/wf/plab/if-provlab-laboratory-testing-for-measles.pdf>

#### Infection Prevention and Control (IPC) recommendations:

- Measles is highly communicable from person-to-person via the airborne route from one day prior to onset of the prodromal period until four days after appearance of the rash.
- All health care workers assessing a suspect or confirmed measles case should wear a fit-tested N95 respirator.

- Instruct patient to don a procedure mask before arriving at the clinic or facility or immediately place a procedure mask on the patient at triage, if tolerated.
- Physicians working in facilities with IPC coverage should contact their site IPC team for direction.
  - Patients with suspected measles infection should not spend time in the waiting room and should be assessed in a negative pressure room whenever possible.
  - If negative pressure room is unavailable, place patient directly in a private room, close the door, and have the patient keep their mask on.
  - An [Infection Prevention and Control Point of Care Risk Assessment](#) , [Routine Practices](#) & [Airborne Precautions](#) are required for determining the need for face shields/eye protection, gowns, and gloves.
- Persons sharing the same airspace as a probable/confirmed case for any duration, including up to two hours after the case has left a closed area, are considered exposed and potentially at risk, if not immune.
- A non-negative pressure examination room should NOT be used for two hours after a potential case has left the room to allow suspended virus to settle. Routine cleaning prior to re-use is advised.
- For physicians practicing in the community, it is strongly preferred that patients with fever and rash that could be measles are seen at the end of the day, in a private room with a closed door, to limit potential exposures in your waiting room and clinic. If multiple patients need to be assessed who are not from the same exposure cluster, then the minimum two hour settle time with routine cleaning following, should occur between visits in the same room.
- Confirmed and probable measles cases will be excluded from public places until four days after the appearance of the rash.

#### Additional Resources:

- For full details on measles, immunization and severity, please see <https://myhealth.alberta.ca/topic/immunization/pages/measles.aspx>, <https://open.alberta.ca/publications/measles>
- For more information on routine childhood immunizations, including for measles, visit [ahs.ca/immunize](https://ahs.ca/immunize).
- To receive information about measles, text 'measles' to 88111.
- Provider FAQs will be coming soon.

#### Lab update on measles from APL:

Alberta Precision Laboratories (APL) is asking primary care providers to take the additional following action regarding measles prevention and testing:

- Check that you have sufficient supplies of nasopharyngeal swabs, Universal/Viral Transport medium and sterile urine containers for sample collection, and ensure the transport medium has NOT expired (expiry date on container)
- Familiarize yourself and your nursing staff with [how to collect a nasopharyngeal swab](#)

- Ensure you have sufficient supplies of personal protective equipment, especially N95 respirator, available
- Before sending a suspect measles patient to have their blood collected, first contact the APL Appointment Booking line at 1-877-702-4486
- Refer to the [APL Guide to Services](#) for additional information
- Refer to the [AHS IPC Acute Care Resource Manual](#) for additional information.

[Read the full lab bulletin](#)

### **Adult immunization – Urban Calgary**

The Calgary Zone adult immunization program centralized services at the Sheldon M. Chumir Health Centre, effective Sunday, March 31. There is increased appointment availability for immunization services, including weekends and evenings. Adult immunization services are offered one day per week at the Brentwood, South Calgary Health Centre and Sunridge locations. Please note: The location of children’s services will not change.

[More information](#)

### **Pertussis**

An increase in cases of pertussis has been identified in the Okotoks area, and AHS is reminding residents and visitors to protect themselves and others.

To check if your immunizations are up to date, or to book an immunization appointment, call Health Link at 811. Albertans can also text “Whooping Cough” to 88111 for general information on symptoms, treatment, and prevention.

[More information](#)

### **Syphilis**

Testing is recommended for:

- Anyone experiencing STI-related symptoms.
- Anyone with a sexual partner who has an STI
- Anyone in a new, anonymous, or multiple sexual partners, should be screened every 3-6 months.
- All pregnant persons should be tested in the first trimester and again at the time of delivery.

[More information](#)

### **Mobile mammography in Strathmore**

A mobile mammography trailer will be in Strathmore from Monday, April 8 to Saturday, April 13 and Monday, April 15 to Saturday, April 20. It will be at the Strathmore Peavy Mart, 300 Edgefield Place. Residents can book an appointment or learn more about the program by calling 1-800-667-0604. Screen Test travels to 120 communities throughout Alberta. To access the screen test mobile schedule, click [here](#).

[More information](#)