



# GRAYSON COUNTY HEALTH DEPARTMENT

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## Health Alert: Confirmed Case of Measles August 29, 2023 Summary

### Summary

The Texas Department of State Health Services (DSHS) is reporting a confirmed case of measles in a resident of McCulloch County. The last confirmed measles case in Texas was in June 2023 in Hood County. **Due to the highly contagious nature of this disease, additional cases may occur. We advise clinicians to follow the recommendations below and report any suspected cases to your local health department, preferably while the patient is in your presence.**

### Background

Two cases of measles have been confirmed in Texas this year. The first case was diagnosed in June and more recently a second child was diagnosed with measles. The cases were residents of Hood County and McCulloch County, respectively. Both cases were confirmed by reverse transcription-polymerase chain reaction (RT-PCR). No risk factors for disease or exposure have been identified. Neither case has a history of travel to an area where measles is spreading and no risk factors for exposure were reported or identified. Both cases had received one dose of the measles-mumps-rubella (MMR) vaccine prior to onset of symptoms. At this time, public health officials do not suspect these cases are related.

Measles is a highly contagious respiratory illness. The virus is transmitted by direct contact with infectious droplets or by airborne spread when an infected person breathes, coughs, or sneezes. Measles virus can remain infectious in the air for up to two hours after an infected person leaves an area. Illness onset (high fever, cough, runny nose, and red, watery eyes) begins a week or two after someone is exposed. A few days later, the telltale rash breaks out as flat, red spots on the face and then spreads down the neck and trunk to the rest of the body. A person is contagious about four days before the rash appears to four days after. People with measles should stay home from work or school during that period.

The best way to prevent getting sick is to be immunized with two doses of the measles-containing vaccine, which is primarily administered as the combination of measles-mumps-rubella (MMR) vaccine. Two doses of the measles vaccine are highly effective at preventing measles, however even vaccinated people can occasionally become infected. DSHS and the Centers for Disease Control and Prevention recommend children receive one dose at 12 to 15 months of age and another at 4 to 6 years. Children too young to be vaccinated or who have only had one dose of vaccine are more likely to get infected and more likely to have severe complications if they do get sick.

### Recommendations For Health Care Professionals:

Healthcare providers should consider measles in patients presenting with the following symptoms, particularly those who have traveled abroad or had contact with known measles cases:

- Fever  $\geq 101^{\circ}\text{F}$  ( $38.3^{\circ}\text{C}$ ) AND
- Generalized maculopapular rash lasting  $\geq 3$  days AND
  - Rash begins at the hairline/scalp and progresses down the body
- Cough, runny nose, or conjunctivitis OR Koplik spots (bluish-white specks or a red-rose background appearing on the buccal and labial mucosa usually opposite the molars)

**Immediately report any suspected measles cases** to your local health department (contacts by county at [dshs.texas.gov/idcu/investigation/conditions/contacts](https://dshs.texas.gov/idcu/investigation/conditions/contacts)). If possible, please report while the patient is present to facilitate testing and the public health investigation, including follow-up of potential exposures.

### Infection Control Precautions

- Airborne precautions should be followed to reduce possible exposures in healthcare settings.
- In urgent/emergency healthcare settings, suspected cases should be masked with a surgical mask and triaged quickly from waiting areas into a room with a closed door, airborne isolation precautions recommended. In other outpatient settings, suspected cases should be scheduled at the end of the day, if possible. Healthcare workers caring for patients suspected of having measles should use airborne infection control precautions ([www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html](https://www.cdc.gov/hicpac/2007IP/2007isolationPrecautions.html)).
- Since measles is so highly transmissible and can spread in healthcare settings, people who work in places like a doctor's office or emergency room should have evidence of measles immunity to prevent any potential outbreak (<https://www.cdc.gov/vaccines/pubs/surv-manual/chpt07-measles.html#f21>).

### Diagnostic Testing

Testing for measles should be done for all suspected measles cases at the time of the initial medical visit:

- DSHS strongly encourages providers to submit PCR specimens to the DSHS Laboratory because genotyping will be performed on positive PCR specimens, which can be helpful during outbreaks.
- The Texas DSHS Laboratory can perform PCR testing on throat swabs (preferred) or nasopharyngeal swabs placed in viral transport media and serology on serum specimens.
- Measles PCR and serology (IgM and IgG) testing is available at both the Texas DSHS Laboratory in Austin and at commercial laboratories.
- Providers should work with their local health department or DSHS regional office to coordinate testing at the DSHS laboratory to ensure specimens are submitted correctly and meet testing requirements.
- Unless coordinated in advance, specimens may only be received by the DSHS Lab during normal business hours Monday through Friday.