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Dear Doctors,

Alert on Measles Cases in Okinawa, Japan and Taiwan

In view of the recent outbreaks of measles in Okinawa, Japan and Taiwan, we would like to update you of the latest situation of the disease and the local situation in Hong Kong.

According to the information from the Government of Okinawa Prefecture, there is an ongoing outbreak of measles since late-March involving a total of 70 confirmed cases in Okinawa (as of April 21), including the index patient who was a traveller from Taiwan. The index case had travelled to Thailand during his incubation period and confirmed to have measles infection on March 20, 2018. While the earlier cases had either direct contact with or were present at same locations as the index case, cases without epidemiological link to a confirmed case are now being reported suggesting ongoing spread in the local community in Okinawa. Apart from Okinawa, one case in Aichi Prefecture had travel history to Okinawa during the incubation period and this case has spread to another case in the same healthcare facility in Aichi. Nonetheless, there was no ongoing community spread from this cluster in Aichi at the present moment.

In Taiwan, the aforementioned index case triggered a cluster of 12 other cases in Taiwan (as of April 21). The 12 cases mainly affected the flight contacts of Tigerair Taiwan and workplace contacts of the index and secondary cases. According to the health authority of Taiwan, there is so far no evidence of further community spread in Taiwan arising from this cluster. Apart from this cluster of 13 cases, there have been six imported cases and three local cases in Taiwan in 2018 (including a nosocomial cluster of one imported case and two local cases) and they were not related to the above cluster.



Locally, the Centre for Health Protection (CHP) of the Department of Health recorded four confirmed cases of measles infection in 2018 (as of April 22) affecting four males aged from nine months to 38 years. Among the cases, two were imported from the Mainland (one case) and Indonesia (one case) respectively. The CHP has been liaising with the World Health Organization (WHO) as well as the health authorities of both Japan and Taiwan for further information and will continue to closely monitor the situation.

Immunisation against measles is the most effective way to prevent the disease. In 1967, measles-containing vaccine was first introduced in Hong Kong, at that time a single valent vaccine to prevent measles only and later replaced by combined measles, mumps and rubella (MMR) vaccine since 1990. Since 1997, a second dose of MMR vaccine was introduced to the Hong Kong Childhood Immunisation Programme (HKCIP) given at Primary One. Separately in late 1997, because of a local epidemic of measles, a mass immunisation campaign was conducted targeting those aged 1 to 19 years who had not completed 2 doses of measles vaccination. The coverage of MMR vaccination in Hong Kong is over 95% at Primary One. Serological surveillance also revealed high serological rates of measles virus antibodies in local population in recent years.¹

For those who had received two doses of measles vaccine or confirmed to have measles infection in the past are considered to be immune to measles. People who intend to travel to Okinawa are advised to review their vaccination history and past medical history. For those with incomplete vaccination, unknown vaccination history or unknown immunity against measles, they are advised to consult their doctor for advice on measles vaccination.

Currently, children are given the MMR vaccine at one year old, followed by a second dose at Primary One under the HKCIP. As those under one year are not due for MMR vaccination and are susceptible to measles, they are advised not to travel to Okinawa during the outbreak. On the other hand, pregnant women and women preparing for pregnancy should be assessed individually for their immune status against measles. If they are non-immune to measles, they are also advised not to travel to Okinawa during the outbreak as they are contraindicated to receive MMR.

According to the United States Centers for Disease Control and

¹ <https://www.chp.gov.hk/en/statistics/data/10/641/701/3536.html>

Prevention, when given as scheduled, two doses of MMR vaccine are 97% effective while one dose is 93% effective against measles. According to the WHO, evidence indicates that a single dose of correctly administered measles vaccine which results in seroconversion will probably offer lifelong protection for most healthy individuals.

Besides measles vaccination, please advise your patients to take the following measures to prevent measles:

- * Maintain good personal and environmental hygiene;
- * Maintain good indoor ventilation;
- * Keep hands clean and wash hands properly;
- * Wash hands when they are dirtied by respiratory secretions, such as after sneezing;
- * Cover the nose and mouth while sneezing or coughing and dispose of nasal and mouth discharge properly;
- * Clean used toys and furniture properly; and
- * Children with measles should be kept out of school till four days from the appearance of rash to prevent spread of the infection to non-immune persons in school.

In addition, measles is a statutory notifiable disease in Hong Kong. Suspected or confirmed measles cases should be notified to the Central Notification Office (CENO) of the CHP via fax (2477 2770), phone (2477 2772) or CENO On-line (https://cdis.chp.gov.hk/CDIS_CENO_ONLINE/ceno.html).

Please draw the attention of the healthcare professionals and supporting staff in your institution/ working with you to the above. Thank you for your unfailing support in prevention and control of communicable diseases.

Yours faithfully,



(Dr SK CHUANG)

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