

Measles

Information Sheet

What is it?

Measles is a serious respiratory disease caused by the Measles virus. In the past, measles infection was common in childhood but is now rare in New Zealand because of childhood immunisation programmes.

It is a notifiable disease under the Health Act 1956 and Public Health staff will contact cases to find how the infection occurred, identify other people at risk of infection, implement control measures and provide other advice.

How does a person become infected?

Measles is usually spread by coughing and sneezing. The virus lives in the mucus in the nose and throat of the infected person. When that person sneezes or coughs, droplets spray into the air. The infected mucus can land in other people's noses or throats when they breathe or put their fingers in their mouth or nose after touching an infected surface. The virus remains active and contagious on infected surfaces for up to 2 hours. Measles spreads so easily that anyone who is not immunized will probably get it.

People are contagious from 5 days before the onset of the rash to 5 days after the rash appears.

People at risk of measles include:

- anyone who has never had measles and have not received two doses of Measles-Mumps-Rubella (MMR) vaccine from the age of 12 months
- anyone with a weak immune system (e.g. people on chemotherapy/radiotherapy for cancer) even if they have been fully immunised or had had measles infection
- anyone who is not immune and travel overseas

What are the signs and symptoms of the illness?

The illness usually takes ten to fourteen days for the symptoms to show after you have been infected. The usual symptoms are:

- High fever (lasting about 2 to 4 days)
- Cough
- Runny nose and/or sore, red watery eyes (lasting about a week)
- Feeling unwell
- A red blotchy rash which begins at the hairline, then involves the face and upper neck. Over the next 3 days, the rash gradually proceeds downward and outward, reaching the hands and feet. The rash usually appears about 14 days after exposure and lasts 4 to 7 days.

Diagnosis can only be confirmed by blood and/or throat or nose swabs arranged by a doctor.

How bad is it?

Most cases of measles are relatively mild however up to a third of people infected with measles can have serious complications such as diarrhoea, ear infections, pneumonia and encephalitis (swelling of the brain). These complications are more common among children than in adults and usually require hospitalisation.

There is no specific treatment for measles. Treatment includes rest, plenty of fluids and paracetamol for fever.

For people who are not immune and come into contact with a case of measles, infection can sometimes be prevented with MMR vaccine (if given within 3 days of exposure) or with immunoglobulin (within 6 days of exposure).

Will I need time off school, childcare or work?

Your Health Protection Officer or Public Health Nurse can give you instructions on this. Generally cases are kept home from childcare, school and work until at least 5 days have passed since the rash appeared.

Anyone born after 1 January 1969, who isn't up to date for measles vaccine, or has not had measles already, is at risk of catching the disease and therefore needs to stay in isolation at home. This includes babies, children, and adults.

How do I avoid the illness?

The best protection against measles is through immunisation with a vaccine called MMR (Measles-Mumps-Rubella vaccine). This vaccine provides protection against measles as well as against mumps and rubella. It is a safe and effective vaccine that has been used worldwide for many years.

MMR vaccine is part of the childhood immunisation schedule; children receive one dose of vaccine at age 15 months and a second at 4 years. These two doses provide protection against measles in over 99% of those immunised.

For Further Information Contact:

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