

MEASLES PUBLIC HEALTH ADVISORY

March 6, 2025

Situation Update

As of February 22, 2025, three confirmed cases of measles have been reported in California in 2025. Fifteen measles cases were identified in California in 2024 compared to four cases in 2023. No cases have been reported in Riverside County since 2018. However, recent cases have been reported in other Southern California jurisdictions. The Orange County (OC) Health Care Agency (HCA) confirmed a case of measles in an infant returning home to Orange County following international travel. The infant was at the Los Angeles International (LAX) airport while infectious. It is unknown at this time if additional measles cases have been identified.

Per CDC, as of February 27, 2025, a total of 164 measles cases were reported by 9 jurisdictions: Alaska, California, Georgia, Kentucky, New Jersey, New Mexico, New York, Rhode Island, and Texas, which is experiencing a large measles outbreak with 159 cases reported and one death in a school-aged child.

Background

Measles symptoms usually begin 10-12 days (up to 21 days) after exposure with a prodrome of fever as high as 105°F (40.5°C), malaise, cough, runny nose, and conjunctivitis. Three to five days following the onset of the prodrome, a maculopapular rash develops. The rash usually begins around the ears and hairline and then spreads down to cover the face, trunk, arms, and legs. More information for providers may be found on the California Department of Public Health Measles website. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/measles.aspx>

Recommendations For Healthcare Providers

- Consider measles in patients of any age who have **a fever AND a rash**. Please remember that patients can be infectious four days prior to rash onset. Fever can spike as high as 105°F. A measles rash is red, blotchy and maculopapular, typically starting on the hairline and face, and then spreading downwards to the rest of the body. Often the facial rash is confluent.
- Obtain a thorough history on such patients, including:
 - Travel
 - Prior vaccinations for measles
 - Contact with anyone with a rash illness

- Do not use the examination room for at least two hours after the measles case (or suspect) leaves.
- Restrict care of patients with suspect or confirmed measles to immune healthcare workers.

If you suspect measles:

- Isolate the patient immediately using airborne and standard precautions. The risk of measles transmission to others can be reduced if control measures are implemented.
- Place patient in a surgical mask, if it can be tolerated.

Specimen collection for measles testing

Throat, Nasal, or NP Swab

Collect within 2 weeks of rash onset. Use a sterile synthetic swab (e.g. Dacron). A throat swab is the preferred respiratory specimen. Place into viral transport media.

Urine

Collect within 2 weeks of onset, 10-40 ml of urine in a sterile 50 ml centrifuge tube or urine specimen container. The first morning void is ideal.

Specimen storage and shipping

Store all specimens at 4°C and ship on cold pack within 24 to 72 hours. For longer storage, process serum and urine and ship all specimens at -70°C or colder.

For questions on submission of specimens please contact the Public Health Laboratory at (951) 358-5070.

Prevention

Management of Exposed Individuals

- IG may be given to exposed susceptible individuals of any age, if given within 6 days to prevent infection.
- MMR vaccine may be given ≤ 72 hours of exposure to persons ≥ 6 months of age with one or no documented doses of MMR, if not contraindicated.
- Ensure all exposed Health Care Workers have had two MMR or proof of immunity.



Vaccination

According to 2022 data, 94% of kindergartners had up-to-date immunizations in Riverside County. We are conducting analyses to identify areas with lower vaccination rates where there may be opportunity for additional vaccination efforts. A link to vaccination rates by school is listed under resources.

Young children should get two doses of MMR vaccine, starting with the first dose at 12 to 15 months of age, and the second dose at 4 to 6 years of age. Children can receive the second dose earlier than 4 years of age if at least 28 days have passed since the first dose.

People 6 months of age and older who will be traveling internationally should be protected against measles. Before any international travel, infants 6 through 11 months of age should receive one dose of MMR vaccine.

Infants who get one dose of MMR vaccine before their first birthday should get two more doses (one dose at 12 through 15 months of age and another dose separated by at least 28 days.)

Reporting

Notify Disease Control immediately of any suspect measles patients: call (951) 358-5107 during regular business hours, or (951) 782-2974 after hours.

Resources

Measles Testing Guidance

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Measles-Testing-InformationVRDL.pdf>

Should I Test for Measles

<https://eziz.org/assets/docs/IMM-1269.pdf>

AAP Publications and Guidance

<https://publications.aap.org/aapnews/news/31490/AAP-leaders-combating-misinformation-amid-measles>

<https://publications.aap.org/redbook/book/755/chapter/14079321/Measles>

CDPH Vaccination Data by School

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/School/HowDoing.aspx>