



UK Health Security Agency North West

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Dear colleagues,

Re Recent measles cases in Greater Manchester

UKHSA North West Health Protection Team has recently identified a very small number of confirmed measles cases in the Greater Manchester area. We are continuing to monitor this and work with partners to respond to the situation.

We appreciate your continued assistance, in ensuring staff remain vigilant for possible cases, ensure anyone who presents at a health care setting is isolated appropriately at the earliest opportunity and MMR vaccination is arranged when appropriate.

Support Resources and Guidance

We are expecting a national briefing note to be issued in the near future. In the meantime, please review the information and resources below.




a) Measles case vigilance and management:

Suspected measles cases should be isolated immediately to protect other patients, where appropriate an diagnostic specimen should be sent and the case should be excluded from school, nursery or work for 4 days after the onset of rash.

The following images from NHS.uk show how the rash develops:



Small white spots may appear inside the cheeks and on the back of the lips a few days later. These spots usually last a few days.

	<p>A measles rash usually appears a few days after the cold-like symptoms. The rash starts on the face and behind the ears before spreading to the rest of the body.</p>
	<p>The spots of the measles rash are sometimes raised and join together to form blotchy patches. They're not usually itchy.</p>
	<p>The rash looks brown or red on white skin. It may be harder to see on brown and black skin.</p>

b) Sample options for RAPID laboratory diagnosis and testing

Rapid laboratory diagnosis greatly aids public health management of cases, which aims to minimise impact on close contacts, the community, and health care services.

How to take a sample for measles PCR:

- Option 1: A mouth swab (ideally in viral transport medium; usually available from your local laboratory).
- Option 2: A dry swab can be used to swab the inside of the mouth, use the swab from a charcoal transport medium pack but DO NOT place in the charcoal transport medium. Please use a plain sterile container such a universal container used for urine samples.
- Option 3: Where mouth swabs or dry swabs are not available, a urine sample; please use a plain sterile urine container without preservative.

Please send these samples urgently to the UKHSA Virology lab at MFT via your local laboratory.

c) Notification of measles cases to the Health Protection Team

All suspected measles cases should be promptly notified to the local Health Protection Team (HPT) to facilitate timely public health action, including urgent risk assessment of any vulnerable contacts.

UKHSA National Measles Guidelines are available at

<https://www.gov.uk/government/publications/national-measles-guidelines> and a measles self-identify poster for GP surgeries/walk-in centres/emergency departments is available at <https://www.gov.uk/government/publications/measles-outbreak>.

d) Continue to review and deliver MMR vaccination for staff:

It is an Occupational Health Service responsibility to determine immune status, test and vaccinate as appropriate. Please make sure all health professionals and reception staff are fully protected against measles, mumps and rubella to protect staff and patients.

e) Continue to promote MMR vaccination:

Please continue to identify patients who are not fully vaccinated with MMR and advise them to complete the course of vaccination via their GP.

- children should receive their two scheduled doses of MMR vaccine on time at the ages of 12 months and 3 years and 4 months.
- the MMR vaccine can be given from six months of age before travel to a high-risk country. Children who receive an MMR dose before their first birthday still require two further doses to be given at the recommended times.
- patients over the age of three years and four months who do not have two recorded doses of MMR vaccine should be caught up opportunistically.
- there is no upper age limit to offering MMR vaccine and adults who are not protected should also be caught up. An item of service fee can be claimed manually via the CQRS MMR programme for each dose of MMR administered to patients aged 16 years or over. This includes patients born before 1970 who have no history of measles or MMR vaccination.
- new entrants from abroad and newly registered patients should have their immunisation history checked and missing doses caught up.
- post-natal women should have their *MMR vaccine history* checked and offered any outstanding doses.

e) Communications

The link below is to the Gov.uk website that has communication materials for you to download giving further information and resources to help you promote the MMR vaccination

[https://www.gov.uk/government/collections/immunisation#measles,-mumps-and-rubella-\(mmr\)](https://www.gov.uk/government/collections/immunisation#measles,-mumps-and-rubella-(mmr))

If you have any questions on MMR vaccination, please contact your local Screening and Immunisation enquiry line (LSC: england.lancashiresit@nhs.net / N Cumbria: england.cane.screeningimms@nhs.net / C&M england.cmimms@nhs.net / GM: england.gmsit@nhs.net).



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