



MEASLES OUTBREAK ALERT TO ALL PARENTS – PLEASE READ THIS NOTICE

We should like to alert parents to the fact that there has been an outbreak of measles in Feltham Community College and another case at Oriel Academy. Public Health England and the Department of Health recommend that all children receive the first dose of MMR vaccine at 12-15 months, and a second dose between 3 years 4 months to 5 years of age.

Frequently asked Questions about measles

What is measles?

- Measles is an acute infection caused by the measles virus.

Who catches measles?

- Measles is usually a childhood infection and is most common in the 1-4 year old age group in children who have not been immunised.
- However, people can catch measles at any age.
- Epidemics often coincide during school terms when there is more close contact between children.

How do you catch measles?

- Measles is caught through direct contact with an infected person through droplets when an infected person speaks coughs or sneezes.

How infectious is measles?

- About 90% of people who have not been immunised against measles or had a past measles infection develop the illness if they live in the same house as someone with measles.
- Measles is most infectious four days before the rash appears, and remains infectious for four days after the appearance of the rash. Even trivial contact may be sufficient for the virus to spread...

What are the symptoms and signs of measles?

- Symptoms typically develop 9–14 days (usually 10 days) after becoming infected.
- Initial symptoms include cold-like symptoms, e.g. runny nose, cough, red eyes, aches and pains, tiredness, irritability and high fever, which may peak at 40°C / 104°F.
- Tiny greyish-white spots (called Koplik's spots) may appear in the mouth and throat.
- Initial symptoms are followed by a red-brown spotty rash, which develops a few days later.
- The rash usually starts behind the ears and spreads over the face, neck and body.
- Spots are initially small but quickly get bigger and often join together.

How serious is measles?

- One million children die from measles worldwide each year. In the UK measles cases have increased annually since 2003 because of a decrease in the uptake of MMR vaccine. Measles is circulating again in the community; in London there have been significant outbreaks of measles in recent years.



Protecting and improving the nation's health

- Measles is a highly infectious and dangerous illness, and as there is increased close contact in institutions such as schools and nurseries it can spread easily.
- Complications are quite common and may result in hospitalisation. They include a severe cough and breathing difficulties, ear infections, viral and bacterial lung infections (pneumonia), and eye infections (conjunctivitis). Most are caused by secondary bacterial infections which can be treated with antibiotics.
- One of the most serious problems is acute encephalitis, which is inflammation of the brain and can occur 2-6 days after the rash has appeared. This affects less than 1 in 1000 measles cases, but 25% are left with brain damage.
- SSPE (subacute sclerosing pan-encephalomyelitis) is the most severe complication of measles. It is rare, occurring in less than 1 in 100,000 cases of measles. It usually occurs years after the initial illness and is a slowly progressive degenerative condition of the nervous system which causes death. SSPE occurs only after infection with wild measles virus and MMR vaccine offers protection against this fatal complication.
- Severe disease and complications are most likely in infants under 12 months and those with a weakened immune system.
- Measles infection in pregnancy can lead to loss or early birth of the baby, but is not associated with congenital infection or damage.
- There is a group of people (including children) who are immunocompromised who cannot be given MMR. They include those with cancer, leukaemia and high dose steroids. Measles in these cases can be deadly; improving uptake of MMR vaccine in the community will help to prevent spread of measles to these vulnerable groups.

Can you prevent measles?

- Measles can be prevented by a highly effective and safe measles-mumps-rubella (MMR) vaccine. The first dose is usually given at 12-15 months, and the second dose between 3 years 4 months to 5 years of age.
- Pregnant women or those with weakened immune systems should not be immunised.
- Past infection gives immunity.
- A successful immunisation programme is essential to prevent measles cases in the UK.

How soon should a child be back at school after measles?

- Measles is most infectious from 4 days before the appearance of rash until 4 days after.
- Children should be kept off school for 5 days after the onset of the rash.

How can you treat someone with measles?

- There is no specific treatment for measles. The patient should drink lots of clear fluid to replace body water lost through the fever.
- Paracetamol can be used to reduce the fever. Aspirin should NOT be given to children as its use is associated with Reye's syndrome (a severe neurological disorder).
- Children with measles should be closely monitored for complications.
- Consult your GP for medical advice.

Further information about measles and MMR vaccine may be sought from NHS 111, or online:

- <http://www.nhs.uk/conditions/Measles/Pages/Introduction.aspx>
- <https://www.gov.uk/government/publications/measles-symptoms-diagnosis-complications-treatment/measles-symptoms-diagnosis-complications-and-treatment-factsheet>