# MEASLES, MUMPS, RUBELLA

#### **Disease name**

| Disease | Select from measles, mumps or rubella. Cases of congenital rubella should |
|---------|---------------------------------------------------------------------------|
|         | be reported using the generic form.                                       |
|         |                                                                           |

# **Basis of diagnosis**

| Clinical criteria                  |                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Fits clinical description          | Select the 'Yes' option if the case fits the clinical description (for the disease) as follows:                                                                                                                                                                                                                                                                          |
|                                    | Measles: cases must meet all the following criteria:                                                                                                                                                                                                                                                                                                                     |
|                                    | <ul> <li>cough and/or coryza and/or conjunctivitis and/or Koplik's spots present at the time of rash onset</li> <li>fever (at least 38°C if measured) present at time of rash onset</li> <li>generalised maculopapular rash starting on the head and neck then spreading down and out and fading.</li> </ul>                                                             |
|                                    | <b>Mumps:</b> an acute illness with unilateral or bilateral tenderness and swelling of the parotid or other salivary gland/s, lasting more than two days, with or without fever and without other apparent cause.                                                                                                                                                        |
|                                    | <b>Rubella:</b> an illness with a generalised maculopapular rash, and fever, <b>and</b> one or more of the following:                                                                                                                                                                                                                                                    |
|                                    | <ul> <li>arthralgia / arthritis</li> <li>lymphadenopathy</li> <li>conjunctivitis.</li> </ul>                                                                                                                                                                                                                                                                             |
|                                    | Rubella often presents atypically and is difficult to diagnose clinically with certainty. Up to 50% of infections are subclinical. If accurate diagnosis is important, it must be laboratory confirmed.                                                                                                                                                                  |
| Clinical features                  | Ideally, obtain information on all of the clinical features (for the disease)<br>listed. If the feature was present, record by selecting the 'Yes' option. If<br>not, select the 'No' option. If not known or unavailable, then select the<br>'Unknown' box. Where maculopapular rash is present for measles or<br>rubella cases, specify the date of onset of the rash. |
| Laboratory criteria                |                                                                                                                                                                                                                                                                                                                                                                          |
| Laboratory confirmation of disease | If the laboratory test results were positive select the 'Yes' option, if<br>negative select the 'No' option. If the results of the laboratory test are not<br>yet available, select 'Awaiting results'. If laboratory tests were not carried<br>out, select 'Not Done'.                                                                                                  |
| Laboratory confirmation date       | If the case was laboratory confirmed, provide the date of the first positive laboratory test.                                                                                                                                                                                                                                                                            |
| Confirmation method                | Specify the method(s) of confirmation - select all that apply. If genetic characterisation was done, select the 'Genetic characterisation' checkbox and provide the typing result.                                                                                                                                                                                       |

| Epidemiological criteria                                                                                                                                                   |                                                                                                                                                                                                                        |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Contact with a confirmed case                                                                                                                                              | Indicate whether the person has had any contact with a confirmed case of<br>the disease. If 'Yes', specify the EpiSurv number of the confirmed case. If<br>not known or unavailable, then select the 'Unknown' option. |  |
| Additional laboratory res                                                                                                                                                  | ults                                                                                                                                                                                                                   |  |
| This section will be automatically populated with data from the National Measles and Rubella Reference<br>Laboratory in Christchurch when the typing results are available |                                                                                                                                                                                                                        |  |
| Genotype                                                                                                                                                                   | Specify the measles genotype identified.                                                                                                                                                                               |  |
| Strain name                                                                                                                                                                | Specify the measles strain.                                                                                                                                                                                            |  |
| Strain ID                                                                                                                                                                  | Specify the strain ID code.                                                                                                                                                                                            |  |
| Updated                                                                                                                                                                    | A flag to indicate that the laboratory results have been updated by CHL (closed to users)                                                                                                                              |  |
| Laboratory                                                                                                                                                                 | The name of the laboratory from where the results originated (closed to users).                                                                                                                                        |  |
| Date result updated                                                                                                                                                        | The date the result fields were updated (closed to users).                                                                                                                                                             |  |
| Sample Number                                                                                                                                                              | The laboratory sample number (closed to users).                                                                                                                                                                        |  |

### **Classification**

| Classification (Measles mumps and rubella) | <b>Under investigation</b> - a case which has been notified but information is not yet available to classify it as probable or confirmed.                                                                                                                                                                      |
|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                            | <b>Probable (measles only)</b> – a clinically compatible illness where there is a high index of suspicion* of disease, and either laboratory suggestive evidence or laboratory confirmatory testing is inconclusive or cannot be performed.                                                                    |
|                                            | Probable (mumps and rubella) – a clinically compatible illness                                                                                                                                                                                                                                                 |
|                                            | <b>Confirmed</b> – a clinically compatible illness that is laboratory confirmed or epidemiologically linked to a confirmed case.                                                                                                                                                                               |
|                                            | <b>Not a case</b> – a case that has been investigated, and subsequently found not to meet the case definition.                                                                                                                                                                                                 |
| Laboratory confirmation                    | Definitive laboratory evidence for a measles confirmed case is:                                                                                                                                                                                                                                                |
| Measles                                    | A positive NAAT of a non-vaccine strain                                                                                                                                                                                                                                                                        |
|                                            | Suggestive laboratory evidence for a measles probable case is:                                                                                                                                                                                                                                                 |
|                                            | <ul> <li>IgG seroconversion between paired sera tested in parallel</li> <li>IgM detection in an unvaccinated person.</li> </ul>                                                                                                                                                                                |
|                                            | * A high index of suspicion is if someone has a clinically compatible illness, is susceptible to measles (not immune/immunised) and has been in an area with known measles cases (either in New Zealand or overseas) during the incubation period OR when there is an epidemiological link to a probable case. |

| Laboratory confirmation<br>Mumps          | <b>Definitive laboratory evidence</b> for a mumps confirmed case requires at least one of the following:                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                           | <ul> <li>detection of mumps virus nucleic acid (PCR) (recommended)</li> <li>isolation of mumps virus by culture.</li> </ul>                                                                                                                                                                                                                                                                                            |
|                                           | If the case received a vaccine containing the mumps virus in the 6 weeks prior to symptom onset then laboratory definitive evidence requires also:                                                                                                                                                                                                                                                                     |
|                                           | <ul> <li>evidence of infection with a wild-type virus strain obtained through genetic characterisation.</li> </ul>                                                                                                                                                                                                                                                                                                     |
| Laboratory confirmation<br><i>Rubella</i> | If the case received a vaccine containing the rubella virus in the 6 weeks prior to symptom onset then <b>laboratory definitive evidence</b> for a confirmed case requires:                                                                                                                                                                                                                                            |
|                                           | <ul> <li>evidence of infection with a wild-type virus strain obtained through genetic characterisation.</li> </ul>                                                                                                                                                                                                                                                                                                     |
|                                           | If the case did not receive a vaccine containing the rubella virus in the 6 weeks prior to symptom onset, then <b>laboratory definitive evidence</b> for a confirmed case requires at least one of the following:                                                                                                                                                                                                      |
|                                           | <ul> <li>detection of rubella virus nucleic acid (preferred method)</li> <li>detection of IgM antibody specific to the virus</li> <li>IgG seroconversion or a significant rise (four-fold or greater) in antibody level for the virus between paired sera tested in parallel where the convalescent serum was collected 10 to 14 days after the acute serum</li> <li>isolation of rubella virus by culture.</li> </ul> |

## **Risk factors**

| Contact with a confirmed case | Indicate whether the case has been in contact with a confirmed case of<br>the same disease during the incubation period for the disease. Consult the<br><u>Communicable Disease Control Manual</u> for details of the incubation<br>periods for each disease. If not known or unavailable then select the<br>'Unknown' option. |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Overseas travel               | Indicate whether the case was overseas during the incubation period for<br>the disease. If 'Yes', record the date of arrival in New Zealand. List the<br>countries/regions visited (up to three) from the most recent to the least<br>recent. Record date of entry and departure for each country/region.                      |
| Other risk factor for disease | Specify any other risk factors under surveillance for the disease if they were present.                                                                                                                                                                                                                                        |

**E/S/R** Manual for Public Health Surveillance in New Zealand (Section C)

#### Source

| Source of the virus<br>(measles and rubella only) | For cases of measles and rubella, indicate whether the infection was imported, import related or endemic. If not known or unavailable, then select the 'Unknown' option.                                                                                                            |
|---------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                   | <b>Imported</b> : is an infection resulting from exposure outside the country during the incubation period (7-21 days prior to rash onset for measles and 14-23 days for rubella) as supported by epidemiological and/or virological evidence.                                      |
|                                                   | <b>Import-related</b> : is a locally-acquired infection due to transmission from an imported or other import-related case as supported by epidemiologic and/or virological evidence.                                                                                                |
|                                                   | Endemic: is a locally acquired infection due to transmission of an indigenous virus or an imported measles virus that has persisted in the country for ≥12 months.                                                                                                                  |
|                                                   | If the case was imported, specify the country and region/city they visited<br>at the likely time of exposure. If the case was import-related, provide the<br>EpiSurv number of the source case. If the case was infected in New<br>Zealand, specify the DHB where contact occurred. |

## **Protective factors**

| Was case immunised at 12 months or older | Indicate whether the case had been immunised with MMR or the appropriate monovalent vaccine at age 12 months or older at any time <b>before becoming ill.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Vaccine details                          | If the case had been immunised (prior to becoming ill), record the details<br>of each dose they received. Record the date of each dose or the age when<br>it was given. Specify the age units (weeks, months, years) by selecting one<br>of the boxes. If the case only received one dose, record the details for the<br>dose received and select the 'Not given' option for the second dose to<br>indicate no further doses had been received. If vaccination dose<br>information is not known or unavailable, then select the 'Unknown'<br>option. Indicate whether the source of immunisation information was<br>patient/caregiver recall or documented for each dose. |
| Was case given MMR0 when under 12 months | Indicate whether the case had been immunised with MMR or the appropriate monovalent vaccine when they were aged under 12 months at any time <b>before becoming ill</b> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| MMR0 vaccine details                     | If the case had received a dose of MMR when aged under 12 months,<br>record the date or the age when it was given. Specify the age units<br>(weeks, months, years) by selecting one of the boxes. Indicate whether<br>the source of immunisation information was patient/caregiver recall or<br>documented.                                                                                                                                                                                                                                                                                                                                                               |



#### Management

| Case management                                        |                                                                                                                                                                                                                                                           |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Investigation start date<br>(measles and rubella only) | For cases of measles and rubella, indicate the date the case investigation was started.                                                                                                                                                                   |
| Pregnant (rubella only)                                | For cases of rubella, indicate whether they were pregnant. If 'Yes', record gestation in weeks at time of onset. If not known or unavailable, then select the 'Unknown' option.                                                                           |
| Contact management                                     |                                                                                                                                                                                                                                                           |
| Flight number/s<br>(measles only)                      | For cases of measles, record the flight numbers if the case was infectious<br>while on board any international flights. List flight numbers (up to four)<br>from the most recent to least recent flight. Record the date of departure<br>for each flight. |

