

# HEALTH UPDATE



**Public Health**  
Prevent. Promote. Protect.

**REGION IV PUBLIC HEALTH**

Clark, Cowlitz, Skamania, Wahkiakum  
counties and Cowlitz Tribe

**To: Physicians and other health care providers**

**Please distribute a copy of this information to each provider in your organization.**

Questions regarding this information may be directed to the following Region IV health officers:

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Clark County Public Health, (564) 397-8412

Skamania County Community Health, (509) 427-3850

Cowlitz County Health & Human Services, (360) 414-5599

Wahkiakum County Health & Human Services, (360) 795-6207

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<b>Alert categories:</b>
<p><b>Health Alert:</b> conveys the highest level of importance; warrants immediate action or attention.</p>
<p><b>Health Advisory:</b> provides important information for a specific incident or situation; may not require immediate action.</p>
<p><b>Health Update:</b> provides updated information regarding an incident or situation; no immediate action necessary.</p>

### *Summary*

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Clark County Public Health has declared the local measles outbreak over, following two incubation periods with no new cases.

The outbreak began Jan. 3, when laboratory testing confirmed measles in a child who traveled to Clark County from Ukraine. Based on the information gathered during the investigation, Public Health could not determine that this first confirmed case was the source of the outbreak.

Public Health confirmed 71 cases of measles during the outbreak. Two confirmed cases previously included in the Clark County totals have been removed. Those two individuals moved to Georgia during the outbreak and are being counted in that state's measles case numbers.

The local outbreak predominantly affected children (93 percent were 1 to 18 years old) and people who were not immunized (of cases with known immunization status, 95 percent were unimmunized). One person was hospitalized; there were no deaths.

Based on Public Health's investigation, measles transmission most often occurred within the household (51 percent); at a general public location, such as a grocery store, retail establishment or church (25 percent); or at a school or child care center (16 percent).

While the local outbreak has ended, measles outbreaks continue across the country and around the world. Measles was documented as "eliminated" in the United States in 2000. However, importation of measles cases and limited local transmission continue to occur.

### *Clinical presentation*

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#### **Health care providers should continue to consider measles in patients who:**

- Present with febrile rash illness and the "three Cs": cough, coryza (runny nose) or conjunctivitis (pink eye).
- Recently traveled internationally to a county with ongoing measles transmission or were exposed to someone with confirmed measles.
- Are being evaluated for febrile rash illnesses, including dengue (<https://www.cdc.gov/denque/>) and Kawasaki disease (<https://www.cdc.gov/kawasaki/>).

#### **Routine MMR vaccination is recommended for the following people who lack evidence of measles immunity\*:**

- All children, with the first dose given at age 12–15 months and a second dose at age 4–6 years.
- Adults born after 1956 should get at least one dose of MMR vaccine.

- Health care personnel, college students and international travelers should get two appropriately spaced (minimum 28 days) doses of MMR vaccine.
- One additional dose of MMR vaccine is recommended for infants aged 6-11 months traveling internationally. Infants who get one dose of MMR vaccine before their first birthday will still require two more doses (one dose at 12-15 months, and an additional dose at age 4-6 years).

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*\*Presumptive evidence of measles immunity is defined as:*

1. *Birth before 1957*
2. *Laboratory-confirmed disease*
3. *Laboratory evidence of immunity (protective antibody titers) or*
4. *Documentation of age-appropriate vaccination with a live measles virus-containing vaccine:*
  - *Pre-school children: 1 dose*
  - *Children in grades K–12: 2 doses*
  - *Health care personnel born during or after 1957: 2 doses*
  - *Students at post-high-school educational institutions: 2 doses*
  - *International travelers ≥12 months of age: 2 doses*
  - *Children 6–11 months of age who plan to travel internationally: 1 dose*
  - *All other adults: 1 dose*

**Thank you for your partnership.**

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