Reporting Criteria for Measles

(1) Definition
Acute febrile exanthematous infectious disease caused by measles virus infection.

(2) Clinical manifestations
After an incubation period of 10-12 days, the patient first experiences a catarrh phase for 2-4 days starting with prodromal fever (~38°C), cough, coryza, conjunctivitis, eye discharge, and photophobia. Koplik spots then appear when fever transiently declines. Once the exanthema phase sets in, which lasts for 3-4 days, the patient develops high fever (39-40°C) and characteristic exanthema (consisting of small scarlet colored spots that gradually turn into dark red papules that get fused to form a mesh-like pattern). Exanthema first appears in the postauricular region, which then spreads to the neck, face, trunk, and upper and lower extremities. During recovery (7-9 days), fever declines and exanthema disappears leaving pigmentation. Occasional complications include pneumonia, otitis media, croup, and encephalitis. After infection, subacute sclerosing panencephalitis (SSPE) may develop several years or decades later.

In addition, there are cases where only some of the signs or symptoms above present (“modified measles”). Such cases are frequent among vaccinated persons whose immunity has declined.

(3) Reporting criteria
a) “Patients (confirmed cases)”
In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a patient with clinical signs and symptoms as described in (2), suspected measles, and considered the patient meets the requirements for the notification as described in (4), the physician shall notify the case immediately.

b) “Deceased”
In compliance with Article 12 paragraph 1 of the Infectious Diseases Control Law, if a physician has examined a deceased person with clinical signs and symptoms as described in (2), suspected measles, and considered that the patient meets the requirements for the notification as described in (4), the physician shall notify the case immediately.
(d) Requirements for reporting

a) Measles (laboratory-confirmed)

The patient must fulfill all three clinical characteristic required for notification and be confirmed by one of the laboratory methods required for notification.

b) Measles (clinical diagnosis)

The patient must fulfill all three clinical characteristics required for notification.

c) Modified measles (laboratory-confirmed)

The patient must have at least one of the characteristics required for notification and be confirmed by one of the laboratory methods required for notification.

<Clinical characteristics required for notification>

a. Exanthema characteristic of measles
b. Fever
c. Catarrh sign or symptom such as cough, coryza, or conjunctivitis

<Laboratory diagnosis required for notification>

<table>
<thead>
<tr>
<th>Laboratory method</th>
<th>Specimen</th>
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<tbody>
<tr>
<td>Detection of pathogen by isolation and identification</td>
<td>Throat swab, blood, cerebrospinal fluid, urine</td>
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<tr>
<td>Detection of viral genome from clinical specimen(s) by PCR</td>
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<td>Detection of antibody (detection of IgM antibody, positive conversion or increase in antibody titer in paired serum specimens)</td>
<td>Serum</td>
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