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 (approximately around 38°C), cough, coryza, conjunctivitis, eye discharge, and photophobia. Koplik spots then appear when the 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, upper extremity and lower extremity regions. During recovery (7-9 days), the 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)
If a physician examines a patient with clinical characteristics as described in (2), suspects measles from clinical signs, symptoms and other findings, and diagnoses measles based on the clinical criteria as described in (4), the physician must notify the case within 7 days, according to Article 12 paragraph 1 of the Infectious Diseases Control Law.

b) Deceased
If a physician examines a deceased patient with clinical characteristics as described in (2), suspects measles from clinical signs, symptoms and other findings, and diagnoses measles based on the clinical criteria as described in (4), the physician must notify the case within 7 days according to Article 12 paragraph 1 of the Infectious Diseases Control Law.
(4) Requirements for reporting

(a) Measles (laboratory-confirmed)

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

(b) Measles (clinically diagnosed)

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) Cough, coryza, and other catarrh signs or symptoms such as 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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