Measles in New Zealand

The Ministry of Health in New Zealand has reported a measles epidemic which began in late February. Most cases have been reported from Auckland and Waikato and a few cases from Wellington. Up to 16 May, 353 notifications had been received for 1997, with 86 in the previous week. Nineteen patients have been hospitalised and no deaths have been reported. Ninety-four cases (27%) were for infants under the age of 12 months, 75 (21%) were aged 12 - 23 months

and 122 (35%) were in the 5 - 9 years age group.

Mathematical modelling predicted that there would be a measles epidemic in New Zealand in 1997 or 1998. The Ministry of Health has undertaken a two part approach to the outbreak. In December 1996 health professionals were warned of the predicted epidemic and advised to ensure that parents were aware of the need for their children to be immunised against

measles. Further action involves the early identification of local outbreaks and the coordination of a prompt and intensified local response. This includes bringing forward the second dose of measles vaccine for all children in the 2 - 10 years age group. The age of the first dose may also be brought forward from 15 months to as low as six months depending on the age of those affected by the local outbreak.

National Health and Medical Research Council recommendations on measles vaccination

In Australia, the National Health and Medical Research Council (NHMRC) recommends MMR (measles, mumps, rubella vaccine) for all children at 12 months of age¹. A second dose is recommended at 10-16 years of age. For populations with a high incidence of early measles infection, vaccination at nine months of age is recommended. In the Northern Territory, Aboriginal children receive a first dose of MMR at the age of nine months.

Unimmunised children in the following groups are at high risk of severe measles infection:

- children with chronic conditions such as cystic fibrosis, congenital heart or kidney disease, failure to thrive and Down syndrome;
- children over the age of one year in child-care centres, family day care and play groups;
- · children living in institutions;
- Aboriginal and Torres Strait Islander children.

MMR vaccine can be used during a measles outbreak to protect susceptible contacts. This must be administered within three days of exposure. For immunocompromised individuals for whom MMR vaccine is contraindicated, normal human immunoglobulin should be given as soon as possible after exposure.

Reference

 National Health and Medical Research Council. The Australian immunisation handbook. Sixth Edition. Canberra: Australian Government Publishing Service, 1997.

Notices to readers

National Notifiable Diseases data on the Internet

Summarised data from the National Notifiable Diseases Surveillance System (NNDSS) is now available on the Internet. Information is available from 1991 to the present. Data will be updated fortnightly. The Internet address is:

'http://www.health.gov.au/hfs/pubs/nndss/nndss1.htm'

Changes at the CDI desk

After nine months as Editor of Communicable Diseases Intelligence, Dr Ana Herceg has moved on. Ana's hard work and dedication has ensured that CDI continues to be a publication of high standard. During this time Ana led the editorial team in making significant changes to CDI, including improvements to the design, readability and quality of the publication. Ana was also a strong supporter of the Master of Applied Epidemiology program,

assisting students both in her role as Editor and as a local supervisor.

Ana's commitment will be maintained by a dedicated team, headed by Dr Bronwen Harvey. The editorial team will ensure that *CDI* continues as a quality publication and a valuable national resource for those working in communicable diseases.