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MEMO

Date: Friday, March 3, 2023

Pages: 2

To: **Health Care Providers**

From: Dr. Karalyn Dueck, Acting Medical Officer of Health

Re: **Measles Preparedness; Risks of Acute Toxicity from Substances in the Unregulated Drug Supply; COVID-19 Vaccine Guidance Update**

Measles Preparedness

The Pan American Health Organization (PAHO) has issued an epidemiological alert regarding increased risk of measles in the Americas and globally with decreased measles vaccination coverage. Lambton Public Health (LPH) is reminding health care providers to ensure patients are up-to-date with routine and catch-up schedules, are protected against measles when travelling, and to include measles in their differential diagnosis, particularly when there is history of recent travel to a measles-endemic area. Risk of local cases of vaccine-preventable diseases increases with travel to areas where infectious diseases are endemic or there are ongoing outbreaks, which is particularly noteworthy with measles given the communicability of the virus.

Clinical Presentation

Measles symptoms begin around 10 days (range 7 to 21 days) after exposure, including fever, cough, coryza, conjunctivitis, and a maculopapular rash that typically begins 3 to 7 days after symptom onset, beginning on the face and progressing down the body, lasting 4 to 7 days. Koplik spots may appear on the buccal mucosa. Complications include otitis media, diarrhea, pneumonia, blindness, encephalitis, and also rare but fatal sclerosing panencephalitis (SSPE). Those most at risk of complications include children under the age of 1 year, persons with malnutrition, immunodeficiency, and in pregnant individuals. Period of communicability to transmit the measles virus to others occurs around 4 days prior to 4 days after rash onset.[1-3]

Recommended Testing

1) Initial Laboratory Testing includes **acute serology** **AND** virus detection by **PCR** (**NP or throat swab AND urine**), per Public Health Ontario (PHO) instructions (linked in text).

Mark symptoms, onset date, exposure/travel/vaccination history on all requisitions submitted.

2) Follow-up Laboratory Testing includes **convalescent serology** (a second blood/serum specimen). On the requisition, specify for convalescent measles serology.

Test in-office to limit possible transmission of measles elsewhere. If initial testing yields a low, indeterminate, or negative IgM and/or IgG result with clinical symptoms of measles and known or suspected exposure to measles, both tests should be repeated as described above.

Visit PHO's website for information about **lab kit ordering** (linked in text).

Recommendations for Clinical Office Practices to Reduce Exposures

Measles is one of the most highly communicable infectious diseases, spread by airborne droplet nuclei and contact with respiratory secretions, lasting up to 2 hours in the air or on environmental surfaces.[2] For suspected measles, recommendations for clinics are as follows:

- Patient to isolate while awaiting appointment; book at end of clinic or less active times.
- Provide a surgical mask to the patient when at clinic and expedite a room.
- Isolate in a single room, window open, with closed door, and alert signage for the room.
- Only health care providers up-to-date with measles vaccination or evidence of laboratory-confirmed immunity should assess the patient. Follow airborne precautions, with N95 respirator needed if a health care provider is not measles-immune. Consider gowns and gloves as additional personal protective equipment (PPE), per risk assessment.[4]
- Once empty, do not use isolation room again until 2 hours have passed, as droplet nuclei can remain active in the air space (time may vary if using HEPA unit, per air exchanges).
- Advise the patient to isolate at home while awaiting LPH follow-up instructions.[4]

Report Suspected or Confirmed Measles to Lambton Public Health

Diseases of public health significance, **whether suspected or confirmed**, must be **reported** to the Medical Officer of Health by telephone or fax, under the *Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7* (list linked here; those with an asterisk (*) require immediate Public Health follow-up, per the *HPPA*, O. Reg. 135/18, O/ Reg. 569).

Risks of Acute Toxicity from Substances in the Unregulated Drug Supply

A memorandum from Ontario's Chief Medical Officer of Health and Chief Coroner was sent on February 28, 2023, alerting organizations that work with people who use drugs, impacted health care providers, and people who use drugs, that recent evidence shows an increase in xylazine and benzodiazepine presence in Ontario's unregulated drug supply. Key messages include:

- Xylazine is a very toxic animal tranquilizer, presenting high risk of acute toxicity.
- Benzodiazepines, when used with opioids, present high risk of toxicity.

Health care providers are recommended to review harm reduction strategies to reduce risk of toxicity and death with people who use drugs, including being trained and carrying naloxone, and calling 911 in all cases of suspected overdose. The Good Samaritan Drug Overdose Act provides some legal protection for persons who seek emergency support during an overdose. If you are interested in more information on harm reduction, or to subscribe to the LPH opioid surveillance bulletin, please email healthcarepartners@county-lambton.on.ca.

COVID-19 Vaccine Guidance Update

Ontario's COVID-19 Vaccine Administration Guidance Document has been updated.
Please note LPH is transitioning to bivalent Moderna BA.4/5 vaccine product and a new order form will be shared when available to be ordered. This anticipated transition will occur end of March to early April. Further updates to the COVID-19 Vaccine Administration Guidance are also expected in March, with future direction for 2023 COVID-19 vaccine administration.

References:
1. Government of Canada. Measles: For health professionals. 2020 Jan [cited 2023 Mar 2]. Available from: https://www.canada.ca/en/public-health/services/diseases/measles/health-professionals-measles.html
2. Ministry of Health and Long-Term Care. Ontario Public Health Standards: Infectious Diseases Protocol, 2022. Appendix 1: Case definitions and disease-specific information: Disease: Measles. 2022 May [cited 2023 Mar 2]. Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/infdispro.aspx
3. Public Health Ontario. Vaccine preventable diseases: Measles. 2022 Dec [cited 2023 Mar 2]. Available from: https://www.publichealthontario.ca/en/health-topics/immunization/vaccine-preventable-diseases/measles
4. Public Health Ontario. Measles information for clinicians. 2019 Jun [cited 2023 Mar 2]. Available from: https://www.publichealthontario.ca/-/media/documents/M/2019/measles-information-clinicians.pdf