

MLS Laboratory Advisory: Travel Associated Measles Case

JULY 25, 2024

Purpose of this Message:

To inform clinical laboratory partners of three new measles cases in the metro area and provide instructions on acceptable specimens, transport media and shipping conditions for testing at MDH-PHL.

Action Item:

Please review the information below and share with your clinical laboratory partners.

Laboratory Testing Information:

The MDH Public Health Laboratory (MDH-PHL) offers a real-time reverse transcriptase PCR assay for measles testing. Real-time PCR is the preferred diagnostic assay due to cross-reactivity with the serology test. It is important to collect specimens as soon as possible after the onset of the rash. Considering day 0 as the rash onset date, collect specimens as outlined below:

- Day 0 – 5 of rash: throat swab
- Day 6 – 9 of rash: throat swab and urine

Requests for measles IgM serologies should be sent to your regular reference lab; serology requests received at MDH-PHL for measles IgM serology are forwarded to CDC and may result in slower test reporting.

Acceptable specimens:

- Throat swab (preferred), nasal/nasopharyngeal swab or nasal washing submitted in a viral transport media [VTM, universal transport medium (UTM), M5, M4, Minimum Essential Medium (MEM), saline, balanced salt solution (BSS), Sterile isotonic solutions, Phosphate buffered saline (PBS), Liquid Stuart's Medium].
- Urine (10 – 40 mL) should be collected and shipped in a sterile urine container.

Transport:

In order to obtain same-day results, specimens must arrive at MDH-PHL before 11:00 AM.

Store and ship specimens at refrigeration temperature (2 - 8°C) in an insulated container and on ice packs. Further information on collection, transport media and shipping can be found on the [MDH Measles Lab Testing web page](https://www.health.state.mn.us/diseases/measles/hcp/labtesting.html) (<https://www.health.state.mn.us/diseases/measles/hcp/labtesting.html>).

Background:

Cases of measles have been identified in three unrelated children who reside respectively in Hennepin, Anoka, and Ramsey counties. None of the children have history of MMR vaccination. Based on current information, these cases are not directly linked to each other, so there is concern for possible spread of measles in the community. MDH continues to investigate links among these cases and recent cases in June.

Health care providers play an important role in promoting MMR vaccine to help minimize community transmission and by recognizing and testing for measles early.

These most recent cases bring our total in Minnesota to 15 since January, an increase from previous years that also parallels national increases in measles cases ([CDC: Measles \(Rubeola\): Measles Cases and Outbreaks \[https://www.cdc.gov/measles/data-research/\]](https://www.cdc.gov/measles/data-research/)). This year all Minnesota cases have occurred in unvaccinated children and over 50% have needed hospitalization.

All recent measles cases were laboratory confirmed by PCR at the Minnesota Department of Health's Public Health Laboratory (MDH-PHL) between July 22 and July 24. Exposures included the families, health care facilities, and activity settings. Where possible, MDH and local public health have worked with the settings to notify contacts and provided post-exposure prophylaxis (PEP) recommendations as indicated. Susceptible persons who do not get PEP will be asked to exclude themselves from high-risk settings for 21 days following exposure.

This information was shared with clinicians and infection preventionists through the Health Alert issued by [MDH Health Alert Network \(https://www.health.state.mn.us/han\)](https://www.health.state.mn.us/han).

Questions: Please contact: Scott Cunningham, Virology Unit Supervisor; 651-201-5032, Scott.Cunningham@state.mn.us or Dr. Anna Strain, Infectious Diseases Laboratory Manager, Anna.Strain@state.mn.us, 651-201-5035.

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****PLEASE FORWARD THIS TO ALL APPROPRIATE PERSONNEL WITHIN YOUR INSTITUTION AND HEALTH SYSTEM****

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To obtain this information in a different format, call: 651-201-5200.