Cluster of measles in a school of Brussels

In June 2003, the school health service of Forest (Brussels) has reported 9 cases of measles in children belonging to the 1st and 2nd primary classes of the same school of Forest. Disease onset ranged between the 3rd and the 11th of June 2003. Cases were aged 6-8 years and 60% of them - with known vaccinal status - were not vaccinated. After investigation, two additional cases were identified in brothers, with earlier onset (after Eastern) and are likely to represent the index cases. Both belong to other classes. They had spent Eastern holidays in Italy, had been in contact there with a sick child and were not vaccinated (see below “New measles epidemic in southern Italy”). All cases have been diagnosed on clinical basis and no laboratory confirmation has been carried out.

The vaccination status of all children of the 2 classes has been checked and a letter has been sent to parents, containing advises to get vaccinated those children who were not immunized.

According to the French Community decree (2002), cases of measles in French-speaking schools must be notified to the French Community health services and non-immunized children must be vaccinated, in agreement with their parents.

Since the elimination of measles in Europe is targeted for 2007, an effective surveillance of measles is urgently needed in Belgium. However, data available so far are incomplete: cases reported by school health services to the Communities represent only a low proportion of the true disease incidence; cases reported by the IPH sentinel laboratory network represent only the few cases for which a laboratory confirmation has been requested. In 2002, the IPH has set up a network of paediatricians and general practitioners (limited to the Brussels region in this pilot phase) for the surveillance of measles, rubella, mumps and acute flaccid paralysis (AFP). This surveillance system is effective since October 2002. 2,831 physicians have been contacted, around 1,300 have sent at least one monthly report over the 8 month-period (October 2002 – May 2003) and 182 have sent reports every month in this period. Efforts are being done to improve coverage and participation, and an evaluation is currently being conducted to identify obstacles to participation and propose improvements. In the period January - May 2003, 11 cases of measles (clinical diagnosis) have been detected by this network while 2 cases only have been reported by the IPH sentinel laboratory network.

Sources: School Health Services of Forest, Brussels Health Inspection (CCC/GGC) and IPH. Follow up at the IPH: Dr T. Lernout.
**ELSEWHERE IN EUROPE**

**New measles epidemic in southern Italy**

In January 2003, data from the Italian Pediatric Sentinel Surveillance System (SPES) showed a new rise in measles incidence, with a total of 1217 cases reported between January and May 2003. Most of these cases (89%) were from three southern regions: Abruzzo, Puglia, and Calabria. This epidemic is affecting areas and age groups with low vaccination coverage (55-77% according to 2003 cluster surveys), as did the 2002 epidemic. The high incidence of measles was predictable given the high proportion of susceptible subjects in many Italian areas. Following the 2002 epidemic, a national plan for measles and congenital rubella elimination has been developed jointly by the regional health authorities, the National Institute of Health and the Ministry of Health. Key actions to improve measles vaccination coverage in the plan include training activities targeting health professionals involved in vaccination services and a national campaign targeting children of school age. Source: Eurosurveillance weekly (http://www.eurosurveillance.org/index-02.asp). Website of the Pediatric Sentinel Surveillance System (SPES): http://www.spes.iss.it/Report.htm.

**Outbreak of hepatitis A in Sukhodilsk, Ukraine**

According to the Ukraine Health and Emergency Ministries, 375 people in the town of Sukhodilsk in eastern Ukraine (23,000 inhabitants) have been diagnosed with hepatitis A after drinking contaminated water. The number is expected to increase significantly because of the long incubation period. The outbreak began on 9 June 2003 after high levels of stagnant subsoil waters caused the town's water supply and sewage system to overflow. To control the disease spread, authorities have begun replacing pipes, overhauling sewage systems, pumping water out of dwellings, and distributing fresh drinking water to residents. Source: Promed (http://www.promedmail.org)

**IN THE REST OF THE WORLD**

**Outbreaks of measles at colleges and high schools in Japan**

Several measles outbreaks have affected 3 colleges and 14 high schools in Japan, according to the Infectious Disease Surveillance Center.

In June 2003, 60 freshmen at the medical school of Kagoshima University were infected with measles. All 1500 medical and dental students were tested for serum measles antibody, and negative students were isolated at home until they received vaccination. In Kanazawa Technology College, 70 students became infected with measles and 26 were hospitalized between 8 May and 30 Jun 2003. The college called upon every student and employee to be vaccinated, and 70 percent of them complied. High schools in Tokyo, Miyazaki, and Ishikawa have also experienced outbreaks.

Vaccination law requires that measles vaccine be administered between the ages of 1.5 to 7.5 years, but only voluntarily. About 80 percent of children were vaccinated. MMR (mumps, measles, rubella) mixed vaccine used in the late 80's caused some adverse

**Outbreak of monkeypox in the US: update**

Federal health officials confirmed on 2 July 2003 the presence of monkeypox virus in 6 African rodents that were part of a shipment of animals imported to the US on 9 April 2003. The Center for Disease Control and Prevention (CDC) is confident that this shipment is the source of the current US outbreak of monkeypox. As a result, the agency is recommending the quarantine and euthanasia of all animals from the shipment, as well as prairie dogs from the US that were exposed to the imported species or to other animals suspected of having monkeypox.

To prevent further transmission of monkeypox, 26 residents of 5 states have received smallpox vaccine since 13 June 2003.

Sources: Promed (http://www.promedmail.org) and CDC (http://www.cdc.gov/ncidod/monkeypox/index.htm)