



January 1 – February 4, 2017

Epidemiology Bureau
Public Health Surveillance Division

Classification of Suspect Measles-Rubella Cases

A total of 179 suspect measles-rubella cases were reported nationwide from January 1 to February 4, 2017. Of these, 141 (79%) were tested. Among the suspect cases, 3 cases (1.68%) were classified as **laboratory confirmed measles** while 34 cases (18.99%) were classified as **laboratory confirmed rubella**. Measles cases are **50% lower** while rubella cases are **17.24% higher** than the previous year of the same time period. Currently, there were no reported deaths among the confirmed measles-rubella cases.

FIGURE 1. CLASSIFICATION OF SUSPECT MEASLES-RUBELLA CASES, PHILIPPINES, JANUARY 1 – FEBRUARY 4, 2017 (N=179)

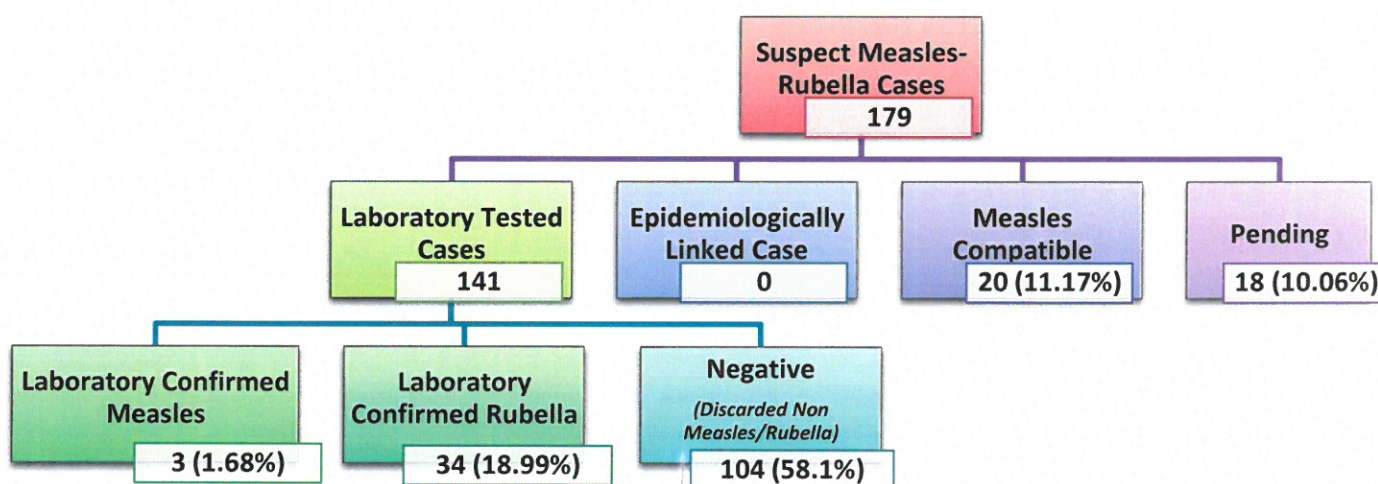


TABLE 1. MEASLES AND RUBELLA CASES BY REGION PHILIPPINES, JANUARY 1 – FEBRUARY 4, 2017 (N=179)

| REGION | REPORTED | LABORATORY CONFIRMED MEASLES | MEASLES COMPATIBLE | LABORATORY CONFIRMED RUBELLA | DISCARDED AS NON-MEASLES/RUBELLA | PENDING CLASSIFICATION |
|------------|------------|------------------------------|--------------------|------------------------------|----------------------------------|------------------------|
| I | 18 | 0 | 1 | 3 | 12 | 2 |
| II | 3 | 0 | 0 | 0 | 2 | 1 |
| III | 9 | 1 | 0 | 3 | 5 | 0 |
| IVA | 62 | 0 | 5 | 13 | 39 | 5 |
| IVB | 1 | 0 | 0 | 0 | 0 | 1 |
| V | 6 | 0 | 0 | 2 | 2 | 2 |
| VI | 10 | 0 | 0 | 3 | 6 | 1 |
| VII | 11 | 0 | 0 | 2 | 5 | 4 |
| VIII | 1 | 0 | 1 | 0 | 0 | 0 |
| IX | 5 | 1 | 3 | 0 | 1 | 0 |
| X | 16 | 1 | 4 | 1 | 8 | 2 |
| XI | 5 | 0 | 0 | 0 | 5 | 0 |
| XII | 3 | 0 | 0 | 0 | 3 | 0 |
| ARMM | 1 | 0 | 1 | 0 | 0 | 0 |
| CAR | 3 | 0 | 0 | 0 | 3 | 0 |
| CRG | 0 | 0 | 0 | 0 | 0 | 0 |
| NCR | 25 | 0 | 5 | 7 | 13 | 0 |
| PHL | 179 | 3 | 20 | 34 | 104 | 18 |



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**FIGURE 2. GEOGRAPHICAL DISTRIBUTION OF CONFIRMED CASES*,
PHILIPPINES, JANUARY 1 – FEBRUARY 4, 2017**

| Region | Measles | Rubella |
|------------|----------|-----------|
| I | 0 | 3 |
| II | 0 | 0 |
| III | 1 | 3 |
| IVA | 0 | 13 |
| IVB | 0 | 0 |
| V | 0 | 2 |
| VI | 0 | 3 |
| VII | 0 | 2 |
| VIII | 0 | 0 |
| IX | 1 | 0 |
| X | 1 | 1 |
| XI | 0 | 0 |
| XII | 0 | 0 |
| ARMM | 0 | 0 |
| CAR | 0 | 0 |
| CRG | 0 | 0 |
| NCR | 0 | 7 |
| PHL | 3 | 34 |

*lab confirmed and epi-linked confirmed cases

Legend:
1 dot = 1 case
● Rubella
● Measles

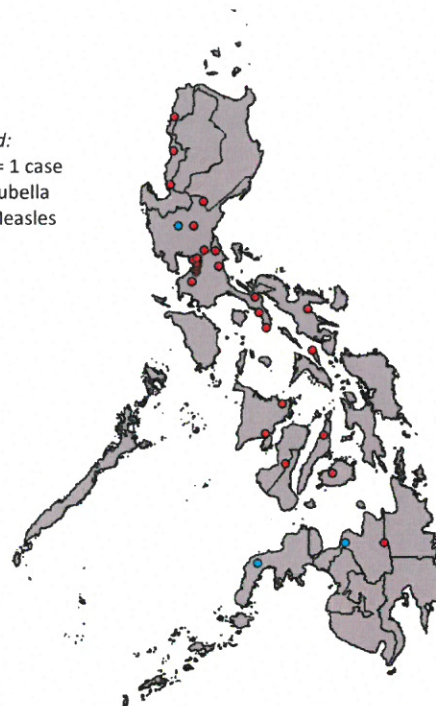


Figure 2 shows the distribution of cases among regions. Confirmed measles cases were from Regions III, IX and X. Majority (13, 38.24%) of the confirmed rubella cases were from Region IVA followed by NCR (7, 20.59%).

**TABLE 2. CONFIRMED MEASLES AND RUBELLA CASES BY REGION
PHILIPPINES, 2016 vs. 2017**

| REGION | CONFIRMED MEASLES CASES | | | CONFIRMED RUBELLA CASES | | |
|------------|-------------------------|----------|-----------------|-------------------------|-----------|----------------|
| | 2017 | 2016 | % CHANGE | 2017 | 2016 | % CHANGE |
| I | 0 | 0 | → 0.00 | 3 | 0 | ↑ 300.00 |
| II | 0 | 0 | → 0.00 | 0 | 0 | → 0.00 |
| III | 1 | 0 | ↑ 100.00 | 3 | 1 | ↑ 200.00 |
| IVA | 0 | 0 | → 0.00 | 13 | 3 | ↑ 333.33 |
| IVB | 0 | 0 | → 0.00 | 0 | 0 | → 0.00 |
| V | 0 | 0 | → 0.00 | 2 | 0 | ↑ 200.00 |
| VI | 0 | 1 | ↓ -100.00 | 3 | 21 | ↓ -85.71 |
| VII | 0 | 2 | ↓ -200.00 | 2 | 0 | ↑ 200.00 |
| VIII | 0 | 0 | → 0.00 | 0 | 0 | → 0.00 |
| IX | 1 | 1 | → 0.00 | 0 | 0 | → 0.00 |
| X | 1 | 0 | ↑ 100.00 | 1 | 0 | ↑ 100.00 |
| XI | 0 | 0 | → 0.00 | 0 | 0 | → 0.00 |
| XII | 0 | 0 | → 0.00 | 0 | 1 | ↓ -100.00 |
| ARMM | 0 | 0 | → 0.00 | 0 | 0 | → 0.00 |
| CAR | 0 | 1 | ↓ -100.00 | 0 | 0 | → 0.00 |
| CRG | 0 | 1 | ↓ -100.00 | 0 | 0 | → 0.00 |
| NCR | 0 | 0 | → 0.00 | 7 | 3 | ↑ 133.33 |
| PHL | 3 | 6 | ↓ -50.00 | 34 | 29 | ↑ 17.24 |

The number of confirmed rubella cases increased by **17.24%** while number of measles cases decreased significantly by **50%** as of morbidity week 5, compared to the same time period last year (see Table 2).

Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.



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**FIGURE 3. CONFIRMED RUBELLA ALERT AND EPIDEMIC THRESHOLD
PHILIPPINES, JANUARY 1 – FEBRUARY 4, 2017 (n=34)**

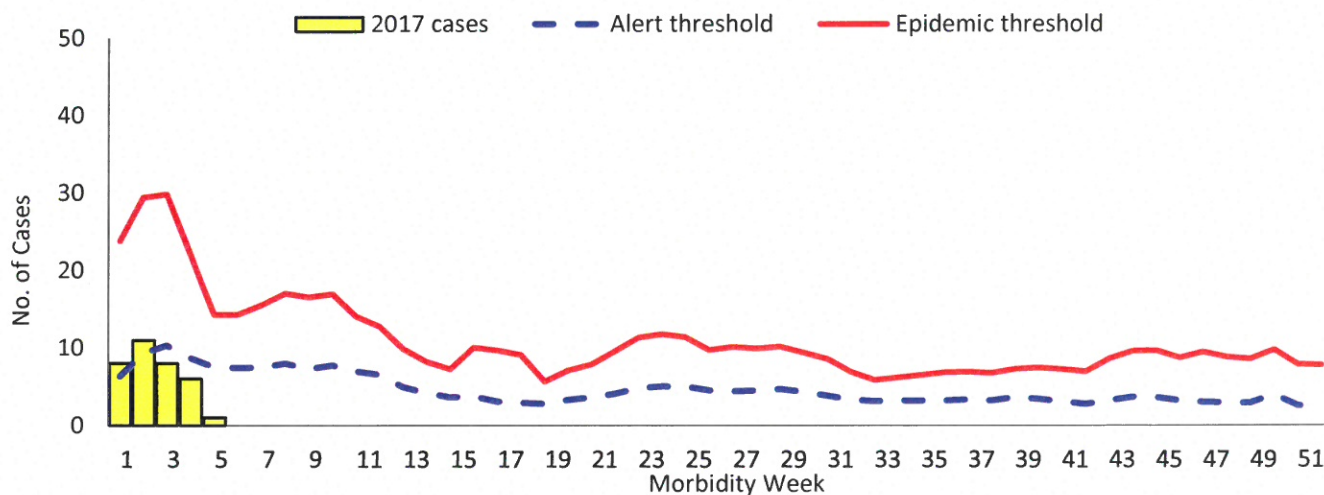


Figure 3 reflects the confirmed rubella cases in relation with the rubella alert and epidemic thresholds. Rubella case counts reached the alert threshold in morbidity weeks 1 to 2. As of morbidity week 5, rubella incidence rate is 0.32 per 1,000,000 population.

The current number of confirmed measles cases is still way below the alert threshold. Measles incidence rate is 0.03 per 1,000,000 population.

**Note: Target incidence rate for measles and rubella elimination is <1 per 1,000,000 population*

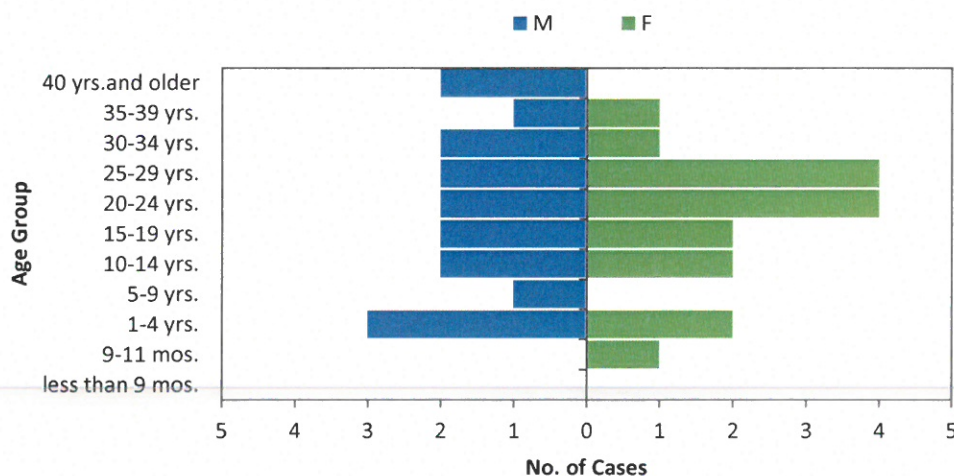
Virus Isolation and Genotyping

There were 5 oropharyngeal/nasopharyngeal swab samples submitted since January 2017. Among these, only 1 tested positive for rubella virus. Genotype identified for the case was 2B. None of the samples tested positive for measles virus.

RUBELLA

Profile of Cases

**FIGURE 4. CONFIRMED RUBELLA CASES BY AGE GROUP AND SEX
PHILIPPINES, JANUARY 1- FEBRUARY 4, 2017 (n=34)**



The confirmed rubella cases are equally distributed among males and females. Majority of the confirmed rubella cases belonged to the 20-24 and 25-29 year old age group (17.65% each) as shown in Figure 4.

One pregnant woman reported in January tested positive for rubella and now on her 11th week. The case is currently being monitored by her respective Epidemiology and Surveillance Unit (ESU) and Maternal, Newborn and Child Health and Nutrition (MNCHN) program manager.



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Immunization Status

MMR vaccine was added to the routine immunization program in 2010 and school-based immunization activities for Grades 1 and 7 were implemented starting 2014. This may explain why majority of the cases were from the age groups not covered by the MMR vaccination. Analysis on MMR vaccination and doses are limited due to incomplete data on the current surveillance database.

Rubella Clusters

| MW | Region | Province | Muncity | Barangay | Place of Transmission | No. of Confirmed Cases |
|-----|--------|-----------------|---------------|------------|------------------------|------------------------|
| 3 | V | Camarines Norte | Labo | Malatap | Home/ Dormitory | 2 |
| 3-4 | NCR | Metro Manila | San Juan City | West Crame | Barangay/ Community | 2 |

Two rubella clusters have been identified for year 2017. These cases are related in place of residences and onset of symptoms, located in the same barangay or identified place of transmission and occurred within 4 consecutive weeks.

MEASLES

Profile of Cases

Of the confirmed measles cases, 2 were male. Two of the three confirmed measles cases belonged to the 9 to 11 month old age group and 1 is less than 9 months old. Only 1 case was vaccinated.

Measles Clusters

No measles clusters identified.



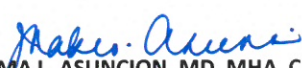
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Annex A. Definition of Terms

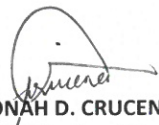
| | |
|---|--|
| Laboratory confirmed measles case | ☞ A suspect measles case with a positive laboratory test result for measles-specific IgM antibodies or other approved laboratory test method |
| Laboratory confirmed rubella case | ☞ A suspect measles case with a positive laboratory test result for rubella-specific IgM antibodies or other approved laboratory test method |
| Measles compatible case | ☞ A case that meets the suspect case definition for measles but for which no adequate blood specimen was taken and which has not been linked epidemiologically to another case positive for measles IgM or another laboratory-confirmed communicable disease |
| Confirmed Measles cases | ☞ Laboratory confirmed + Epidemiologically-linked measles cases |
| Epidemiologically-linked measles (or rubella) case | ☞ A suspect measles case that has not been confirmed by laboratory but that is geographically AND temporally related (with dates of rash onset occurring between 7 and 21 days apart) to a laboratory-confirmed case or (in the event of an outbreak) to another epidemiologically confirmed measles case. |
| Discarded non-measles/rubella | ☞ A case that meets the clinical case definition for measles and tested negative for both measles and rubella testing. |
| Pending Classification | ☞ Cases with blood specimen collected and pending laboratory results. |
| Alert threshold | ☞ Refers to the level of occurrence of disease that serves as an early warning for epidemics. An increase in the number of cases above the threshold level should trigger an investigation, epidemic preparedness and implement appropriate prevention and control measures. |
| Epidemic threshold | ☞ Refers to the level of occurrence of disease above which an urgent response is required. The threshold is specific to each disease and depends on the infectiousness, other determinants of transmission and local endemicity levels. |
| Cluster of cases | ☞ 2 or more cases with temporal (occurring in a span of 4 weeks) and geographical association (within the same barangay) |

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