



## Measles infection prevention

The person/worker is protected from infection if he/she is vaccinated against measles (has received two doses of MMR vaccine) or has had measles. It is strongly recommended that all healthcare professionals be vaccinated. Also, everyone is strongly encouraged to get themselves and their children vaccinated against measles.

In Iceland, vaccination against measles is carried out from 18 months of age, but up to 6 months of age, maternally derived antibodies are protected. If an unvaccinated child is exposed to infection, physicians will decide whether to accelerate vaccination, but this cannot be done before 6 months of age. Therefore, it may be prudent to travel with unvaccinated children to an area where there is an increased risk of transmission of measles.

### In healthcare

In waiting rooms of healthcare facilities (ER, primary care, clinics), consideration should **always** be given to separating those with symptoms of respiratory infection from others and wearing hillside masks ("surgical masks"), especially during seasons when influenza, COVID-19, RSV or other airborne infections such as measles are likely to occur. FFP2's viral masks provide the best protection if measles is suspected. Encourage caution in coughing, good hand hygiene and ventilation.

Basic precautions against infections [should always be taken](#)

Have in place measures and instructions, on what to do if a case of measles is diagnosed which is primarily isolation in a room with specially designed ventilation or a private room with good venting options into the atmosphere.

### The Measles Virus

The measles virus is an enveloped RNA virus and is classified by the genus Morbillivirus in the family Paramyxoviridae. Humans are the only natural hosts of the measles virus.

The virus is spread by aerosols/droplets from the respiratory tract but can remain in the air for 2 hours (if not vented) after an infected person has resided in the space and for 2 hours on the immediate surface of the sick person.

### Disinfection

The virus is not hardy and all traditional disinfection methods work on it, such as fever and all common disinfectants. It is recommended to aerate very well and clean the sick person's environment with soapy water and then with disinfectant.

### Infection routes

The measles virus is a respiratory virus that settles on the mucous membranes of an infected person's mouth, nose and throat and is transmitted through aerosols and droplets from their senses when talking, coughing or sneezing. A person with measles is considered **highly contagious** 4 days before the onset of a rash and for 4 days after the onset of a rash.

### **Protective equipment in cases of suspected or confirmed measles**

- A tight protective mask (FFP 2) is the primary protective equipment and it is recommended that all healthcare workers wear such a mask if they stay in the same space as a person with measles while contagious.
- It is recommended that a person with measles wear a protective mask FFP2 for lighthouses to reduce the spread of viruses into the atmosphere.
- Goggles for those who treat the sick person up close (less than 2 metres away). You do not need to wear goggles when entering a room, i.e. a person with measles stays if you do not need to be closer than approx. 2 metres away.
- Disposable gloves when in direct contact with a possible infectious agent (respiratory tract fluid, saliva) and careful hand washing when removing gloves. Hand sanitiser.
- A robe in itself is not necessary except if there is a high level of infectious agent (mucus from the respiratory system is transmitted from the patient), or a single-use plastic apron may also be used.
- If the patient's symptoms require more protective equipment (e.g. diarrhoea), the use of protective equipment should be taken into account.

**Individual organisations may lay down specific rules for the use of protective equipment if they deem it necessary.**