

Introduction

The following preliminary measles surveillance report aims to describe basic epidemiological features of measles in EUVAC.NET-participating countries for 2008.

Methods

Measles surveillance data were submitted by all 32 EUVAC.NET-participating countries for the whole year. Thirty-one countries provided casebased data obtained through national mandatory notification systems. Belgium provided casebased data gathered through both a national voluntary notification system and a mandatory system applied to schools. Turkey provided aggregated data. Cases meeting requirements for national surveillance, including laboratory-confirmed, clinical, epidemiologically linked cases, were analysed.

Data analysis was based on cases with disease onset in 2008. Case-based reports provided data disease onset dates, age, diagnosis confirmation. vaccination. importation. hospitalisation. the presence of acute encephalitis as a complication of measles, and death. Variables for which no data were available in the case-based reports were converted to unknown status. Aggregated data consisted of the number of cases in specified age-groups categorised diagnosis confirmation. by vaccination. importation, and hospitalisation variables. The number of cases complications including death was also supplied.

We defined indigenous cases as those that were not recorded as imported from another country. Those with unknown importation status were also regarded as indigenous cases. Data for imported cases indicated the most probable country to have been the source of infection. Countries were grouped into categories of zero. low, moderate, and high incidence for the corresponding indigenous measles incidence per 100,000 inhabitants per year of 0, less than 0.1, 0·1-1, and more than 1, respectively.

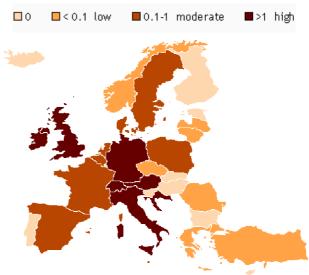
Case-based reports with absent or unknown disease onset dates were included in the analyses because the date of notification or the date of collection of the laboratory sample was during the corresponding years. Incidence was calculated with the number of cases of reported measles as the numerator and the country population obtained from the WHO Computerized Information System for Infectious Diseases

(CISID)¹ as the denominator. We expressed incidence of disease as measles cases per 100,000 inhabitants per year, and that of death as the total per 1000 measles cases per year. We included all reported cases (i.e., including indigenous cases, imported cases, and those importation unknown status) calculating crude incidences.

Incidence - notifications and laboratory data

During 2008, a total of 7,817 measles cases was reported and included 314 (4%) case-based reports with absent or unknown disease onset dates. Most cases (n=7,033; 90%) were from six countries: Switzerland, Italy, the UK, Germany, France and Austria (table 1).

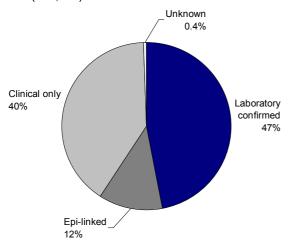
Figure 1. Geographical indigenous incidence of measles, 2008



In some countries minor discrepancies with nationally reported data may arise if these include cases reported in 2008 but with disease onset in 2007

The distribution of reported measles cases varied considerably among the participating countries (table 1). The largest numbers of cases in 2008 were reported from Switzerland (26% of the total) and Italy (21%), and the highest crude incidences were in Switzerland and Austria with 27.45 and 5.09 per 100,000 inhabitants, respectively (figure 1). Figure 2 below shows the proportions of cases by diagnosis classification.

Figure 2. Diagnosis classification of measles cases, 2008 (n=7,817)



In panel 1, countries have been grouped into low, moderate and high incidence categories based on reported indigenous measles cases. No indigenous cases were reported from 10 countries: Bulgaria, Cyprus, Estonia, Finland, Hungary, Iceland, Luxembourg, Portugal, Slovakia and Slovenia.

Panel 1: Reported incidence of indigenous measles per 100,000 inhabitants by country, 2008

High incidence (>1) Switzerland (27.2), Italy (2.7), United Kingdom (2.3), Germany (1.0), Austria (4.9), Ireland (1.2) and Croatia (1.1).

Moderate incidence (0.1-1) France (0.9), Belgium (0.9), The Netherlands (0.6), Spain (0.6), Denmark (0.1), Sweden (0.2), Poland (0.2) and Malta (0.2)

Low incidence (<0.1) Romania (0.05), Latvia (0.09), Norway (0.04), Lithuania (0.03), Czech Republic (0.01), Greece (0.01) and Turkey (0.004).

Outbreak-related and imported cases

Information on outbreak status was provided in 51% of case-based reports. Of these, there were 2,747 outbreak-related cases (table 2) making up to 69% of those with a known outbreak status. Most outbreak cases were reported from the United Kingdom (31%) followed by Germany (24%). Measles outbreaks in 2008 were reported from Austria,^{2,3} Belgium,⁴ Denmark,⁵ France,^{6,7} Germany, 2,8,9 Italy, 10-13 the Netherlands, 14 Norway, 2,15 Spain, 16,17 Switzerland, 18-21 and the UK. 22-26 They involved the general population as well as particular groups such as travellers communities and ultra-orthodox Jewish communities.

Importation status was known in 4,249 (54%) of cases (table 2). Of these, there were 218 imported cases amounting to 5% of cases with known importation status. 165 (76%) were imported from another European country. The rest were reported as imported from other continents including, 30 from Asia, six from the Middle East, 13 from Africa, three from North America and one from South America. The number of reported measles cases by country identified as sources of importation is seen in panel 2.

Panel 2: Top 10 countries identified as sources of importation, 2008

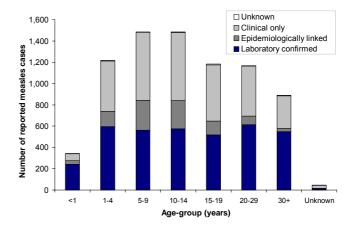
Switzerland (68), United Kingdom (30), Italy (15), India (12), Thailand (12), Germany (11), Austria (10), France (6), Spain (6), Egypt (4)

This panel needs to be interpreted with caution as the definition of an imported case may differ from country to country.

Age distribution

Measles was reported in both children and adults. Overall, 4% of cases were infants, 16% 1-4 years, 53% 5-19 years and 26% were ≥ 20 years. Figure 3 shows the number of reported measles cases by age-group and diagnosis confirmation status.

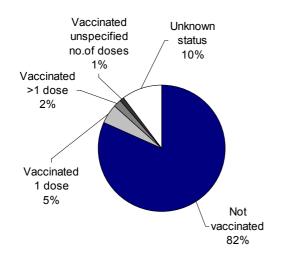
Figure 3. Reported measles cases by age-group and diagnosis confirmation status, 2008 (n=7,817)



Vaccination status

Information on known vaccination status was provided in 7,063 (90%) of all reported measles cases (table 3). Overall, 91% of those with a known vaccination status were unvaccinated. Figure 4 overleaf shows the proportions of cases by vaccination status.

Figure 4. Vaccination status of measles cases, 2008 (n=7,817)



Morbidity and mortality

Data on known hospitalisation status was available in 96% of all reported measles cases. There were 1,142 reported hospitalised cases in connection with measles (table 2) amounting to 15% of all cases with known hospitalisation status.

One patient acquiring measles in 2008 died (0.13 per 1000 measles cases) due to pneumonia. The death was reported from the UK and occurred in a 17-year-old with a congenital immunodeficiency disorder. The case was laboratory-confirmed.

Eight cases were complicated with encephalitis corresponding to an overall incidence of 200 per 100,000 measles cases. The cases were reported from Germany (four cases), Switzerland (two cases), Italy (one case) and the UK (one case). They were distributed between age-groups with one aged 5–9 years, one aged 15–19 years and six aged 20–29 years. None had been vaccinated against measles.

Comments

The number of reported measles cases in EUVAC.NET-participating doubled in 2008 compared with the previous year. The increase has been mostly attributed to the increased number of reported cases from Italy, Switzerland and France, Austria and the UK. Conversely, Romania reported the largest decrease in measles cases.

Comparisons between countries should, however, be made with caution because while some countries reported both clinical cases and laboratory-confirmed cases others only reported

the latter. Fewer countries reported zero indigenous cases with 10 countries in 2008 compared with 13 in 2007. As expected, the majority of measles cases occurred in unvaccinated cases.

Most imported cases were reported to occur following travel to countries with documented outbreaks or where endemic measles transmission still occurs. It is to be noted that the list of countries reported as sources of importation of measles (panel 2) has to be interpreted with caution since different countries may use different definitions of imported cases.

The sharp increase in number of measles cases in EUVAC.NET-participating countries is of great concern in relation to the measles elimination goal by 2010. The commitment to eliminate measles in Europe needs to be strengthened by increasing vaccination coverage with two doses of measles vaccines to a WHO recommended minimum of 95%.

Additionally, enhanced surveillance from clinical to laboratory level needs to be undertaken for early identification and laboratory confirmation of cases. An increased level of suspicion in cases with rash, particularly in those >15 years old and in travellers returning from endemic countries is important. Laboratory investigations including molecular characterization of measles virus help to better define outbreaks and identify imported measles thereby demonstrating the absence or presence of endemic measles.

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Reporters

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Table 1. Reported measles cases and laboratory-confirmed cases by country, 2008 (n=7,817)

Country	Number of cases (Crude incidence per 100,000 inhabitants)				Laboratory-col	nfirmed	Epidemiologically linked cases		
	2	007	2	2008 2008		3	2008		
Austria	20	(0.24)	427	(5.09)	154	36%	3	1%	
Belgium	58	(0.55)	98	(0.94)	36	37%	56	57%	
Bulgaria	1	(0.01)	1	(0.01)	1	100%	0	0%	
Croatia	0	(0)	50	(1.10)	40	80%	4	8%	
Cyprus	0	(0)	1	(0.12)	1	100%	0	0%	
Czech Republic	2	(0.02)	2	(0.02)	2	100%	0	0%	
Denmark	2	(0.04)	12	(0.22)	12	100%	0	0%	
Estonia	1	(0.08)	0	(0)	0		0		
Finland	0	(0)	5	(0.09)	5	100%	0	0%	
France	40	(0.07)	604	(0.98)	305	50%	58	10%	
Germany	571	(0.69)	915	(1.11)	374	41%	405	44%	
Greece	2	(0.02)	1	(0.01)	1	100%	0	0%	
Hungary	0	(0)	0	(0)	0		0		
Iceland	0	(0)	0	(0)	0		0		
Ireland	52	(1.22)	56	(1.28)	10	18%	3	5%	
Italy	420	(0.72)	1,619	(2.75)	261	16%	145	9%	
Latvia	0	(0)	3	(0.13)	3	100%	0	0%	
Lithuania	0	(0)	1	(0.03)	1	100%	0	0%	
Luxembourg	0	(0)	0	(0)	0		0		
Malta	2	(0.49)	1	(0.24)	1	100%	0	0%	
Netherlands	10	(0.06)	109	(0.66)	50	46%	59	54%	
Norway	20	(0.43)	4	(0.08)	3	75%	1	25%	
Poland	43	(0.11)	100	(0.26)	76	76%	8	8%	
Portugal	0	(0)	1	(0.01)	1	100%	0	0%	
Romania	352	(1.63)	14	(0.07)	11	79%	0	0%	
Slovakia	0	(0)	0	(0)	0		0		
Slovenia	0	(0)	0	(0)	0		0		
Spain	265	(0.61)	296	(0.66)	196	66%	31	10%	
Sweden	1	(0.01)	25	(0.27)	19	76%	5	20%	
Switzerland		(14.30)		(27.45)		36%		8%	
Turkey		(0.004)		(0.01)		100%		0%	
United Kingdom		(1.67)		(2.30)	1,379			2%	
Total	3,909	(0.67)	7,817	(1.33)	3,684	47%	966	12%	

Table 2. Reported measles cases: hospitalised, outbreak related and imported, by country, 2008

Country	Hospitalised cases ¹			Outbreak-related cases ¹			Imported cases ¹		
	No. of cases (% of known hospitalisation status)		% Unknown	No. of cases (% of known		% Unknown	No. of cases		% Unknown
			status			status	(% of k	nown	of total
			or no data	outbreak status)		or no data	importation		or no data
							status)		
Austria	74	17%	0%	348	81%	0%	14	3%	0%
Belgium	11	13%	13%	83	88%	4%	2	2%	4%
Bulgaria	1	100%	0%	0	0%	0%	1	100%	0%
Croatia	11	24%	10%	47	98%	4%	2	4%	4%
Cyprus	1	100%	0%	0	0%	0%	1	100%	0%
Czech Republic	2	100%	0%	0	0%	0%	1	50%	0%
Denmark	7	58%	0%	6	75%	33%	5	42%	0%
Estonia	0			0			0		
Finland	0		100%	0		100%	5	100%	0%
France	112	19%	2%	310	66%	22%	22	4%	16%
Germany	97	11%	0%	664	73%	0%	74	9%	7%
Greece	1	100%	0%	0	0%	0%	0	0%	0%
Hungary	0			0			0		
Iceland	0			0			0		
Ireland	7	15%	23%	6	19%	49%	4	17%	59%
Italy	328	23%	13%	1	1%	96%	0	0%	96%
Latvia	3	100%	0%	0	0%	0%	1	33%	0%
Lithuania	0	0%	0%	0	0%	0%	0	0%	0%
Luxembourg	0			0			0		
Malta	0	0%	0%	0	0%	0%	0	0%	0%
Netherlands	8	7%	1%	73	95%	29%	12	11%	0%
Norway	0	0%	0%	3	75%	0%	2	100%	50%
Poland	80	80%	0%	68	68%	0%	14	14%	0%
Portugal	0	0%	0%	0	0%	0%	1	100%	0%
Romania	12	86%	0%	0	0%	50%	3	27%	21%
Slovakia	0			0			0		
Slovenia	0			0			0		
Spain	24	8%	0%	278	95%	1%	7	2%	0%
Sweden	0		100%		60%	0%	11	44%	0%
Switzerland	165		3%	0		100%		1%	24%
Turkey		50%	0%	3	75%	0%	1	25%	0%
United Kingdom		14%	0%	842		0%		22%	94%
Total	1,142		4%	2,747		49%	218		46%
ı Ulai	1,142	10/0	+ /0	2,141	09 /0	+3 /0	210	J /0	+∪ /0

¹Denominator n=7,817

Table 3. Vaccination status of reported measles cases by country, 2008 (n=7,817)

Country	No. of unvace	cinated cases	No. of vacci	inated cases	No. with unknown		
	(% of unvaccinated of		(% vaccinat	ed of known	vaccination status/no data		
	known vaccination status)		vaccinati	on status)	(% unknown status		
					/no data of total)		
Austria	363	87%	53	13%	11	3%	
Belgium	63	77%	19	23%	16	16%	
Bulgaria	0	0%	1	100%	0	0%	
Croatia	32	82%	7	18%	11	22%	
Cyprus	1	100%	0	0%	0	0%	
Czech Republic	0	0%	2	100%	0	0%	
Denmark	11	92%	1	8%	0	0%	
Estonia	0		0		0		
Finland	5	100%	0	0%	0	0%	
France	504	89%	65	11%	35	6%	
Germany	801	96%	35	4%	79	9%	
Greece	1	100%	0	0%	0	0%	
Hungary	0		0		0		
Iceland	0		0		0		
Ireland	31	66%	16	34%	9	16%	
Italy	1,262	88%	175	12%	182	11%	
Latvia	1	50%	1	50%	1	33%	
Lithuania	0	0%	1	100%	0	0%	
Luxembourg	0		0		0		
Malta	0	0%	1	100%	0	0%	
Netherlands	100	93%	8	7%	1	1%	
Norway	4	100%	0	0%	0	0%	
Poland	90	90%	10	10%	0	0%	
Portugal	1	100%	0	0%	0	0%	
Romania	9	64%	5	36%	0	0%	
Slovakia	0		0		0		
Slovenia	0		0		0		
Spain	118	80%	30	20%	148	50%	
Sweden	23	92%	2	8%	0	0%	
Switzerland	1,697	93%	118	7%	247	12%	
Turkey	0	0%	1	100%	3	75%	
United Kingdom	1,314	94%	81	6%	11	1%	
Total	6,431	91%	632	9%	754	10%	

Contributors

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