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**Infection Control: Clinical epidemiology of nosocomial infections**

**Nosocomial transmission of measles in a training hospital in Turkey**

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Measles cases in Europe have been increasing during the last decade. Currently, an important mode of measles transmission appears to be nosocomial, even in developed countries as a result of suboptimal vaccine coverage. A measles outbreak was detected at Celal Bayar University Hospital in Manisa, Turkey during spring 2013. The aim of this report is to describe measles outbreak involving health-care workers (HCWs) in our hospital and all the infection control measures used to limit the spread of the disease.

Our hospital is the training and research hospital of the city of Manisa with a capacity of 585-inpatient, total 1836 HCWs. During the outbreak, all the hospitalized patients and HCWs presenting the clinical symptoms of measles were evaluated and standard surveying techniques and preventive measures were taken. Unfortunately, it had not been possible to perform serologic screening tests for the HCWs.

Outbreak started on March 13, 2013 with the admission of a medical secretary to our clinic. As she had been sick for three days and continued working, she had already contacted directly 47 of them HCWs, total 408 people. 21 HCWs had previous history of measles and 2 had previous positive serology. The rest of the staff was offered for vaccination in the first 72 hours. But none of them accepted vaccination. At the end of the mean expected prodrome duration from the index case, in five days, 11 more cases were diagnosed to be measles (9 of them were HCWs and two were patients). As the number of measles cases increased, vaccination was recommended to the HCWs again. In the following 72 hours, 1495 HCWs vaccinated. Informed consent was obtained from those refused vaccination. None of the cases diagnosed with measles had adverse reactions/complications including death and all were cured. No further cases were reported after all.

This outbreak highlights the potential for measles transmission in health-care settings. In order to decrease transmission, clinicians should know the signs and symptoms of measles, and isolate the infected patients. HCWs should be screened for measles immunity, and those without evidence of measles immunity should be recommended vaccination.