

Rubella

This month, two clusters of fever-and-rash syndrome among school children in North West Province (NWP) and Gauteng Province (GP) were reported as suspected measles outbreaks for further investigation. A medical practitioner in Koster (NWP) reported seeing approximately 20 children during one week, all of whom attend a local school. The children, mostly aged 13 to 16 years, presented with a variety of symptoms including cough, coryza, conjunctivitis, rash and fever. Severity of illness in most cases was mild to moderate, and none required hospital admission. Most children had previously received measles vaccination. The suspected measles outbreak in GP was amongst primary school children who presented with fever-and-rash syndrome over a period of two weeks.

Three blood specimens from the NWP outbreak were tested at Ampath Laboratories and all were found to be rubella IgM positive and measles IgM negative; 16 of 20 blood specimens submitted from patients in the GP outbreak tested positive/equivocal for rubella and negative for measles. These outbreaks are therefore highly likely to have been rubella.

Although rubella cases occur throughout the year, an annual increase in rubella transmission is usually

seen at the end of winter and beginning of spring. These rubella outbreaks vary in size as they are dependent on the build-up of susceptible persons in the community. Rubella vaccination is not included in the Expanded Programme on Immunisation, which impacts on the pool of susceptible individuals. Since the onset of case-based surveillance for measles in 1998, up to 50% of specimens submitted have been positive for rubella IgM, with the median age of cases being 7 years. Please ensure that case investigation forms for suspected measles cases are always completed accurately and thoroughly, including the symptoms, vaccination history and dates of illness onset and specimen collection. No routine rubella surveillance is performed at NICD-NHLS; diagnostic rubella testing, if required, can be performed at routine NHLS virology/immunology laboratories. However, blood specimens for any case of suspected congenital rubella infection/syndrome or suspected rubella infection in a pregnant woman should still be referred to the NICD-NHLS for testing.

Source: Centre for Vaccines and Immunology, and Department of Public Health Surveillance and Response, NICD-NHLS; Department of Health, North West and Gauteng provinces; Ampath Laboratories