# Measles verification

- Measles eradication: worldwide interruption of measles virus transmission in the presence of a surveillance system that has been verified to be performing well.
- Measles elimination: the absence of endemic measles virus transmission in a defined geographical area (e.g. region or country) for ≥12 months in the presence of a wellperforming surveillance system.

- Endemic measles virus transmission: the existence of continuous transmission of indigenous or imported measles virus that persists for ≥12 months in any defined geographical area.
- Reestablishment of endemic transmission occurs when epidemiological and laboratory evidence indicates the presence of a chain of a virus strain that continue uninterrupted for >12 months in a defined geographical area where measles had previously eliminated

- Measles outbreak in an elimination goal: a single laboratory-confirmed case of measles
- Suspected case of measles: a patient in whom a health-care worker suspects measles infection, or a patient with fever and maculopapular (non-vesicular) rash.

- Laboratory-confirmed measles case: a suspected case of measles that has been confirmed by a proficient laboratory.
- An epidemiologically-linked confirmed measles case: a suspected case of measles that has not been confirmed by a laboratory but was 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 a chain of transmission, to another epidemiologically-confirmed measles case

 Clinically measles compatible: a case with fever and maculopapular (non-vesicular) rash and at least one of cough, coryza or conjunctivitis, for which no adequate clinical specimen was taken and which has not been linked epidemiologically to a laboratoryconfirmed case of measles or another laboratory-confirmed communicable disease.

Non-measles non-rubella case: a suspected
case that has been investigated and discarded
as a non-measles and non-rubella case using
(a) laboratory testing in a proficient laboratory
or (b) epidemiological linkage to a laboratoryconfirmed outbreak of another communicable
disease that is neither measles nor rubella.

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- Measles vaccine-associated illness: a suspected case that meets with all five of the following criteria: (i) the patient had a rash illness, with or without fever, but did not have cough or other respiratory symptoms related to the rash; (ii) the rash began 7 to 14 days after vaccination with a measles-containing vaccine; (iii) the blood specimen, which was positive for measles (IgM), was collected 8 to 56 days after vaccination; (iv) thorough field investigation did not identify any secondary cases; and (v) field and laboratory investigations fail to identify other causes.
- Or in a suspected case where virology is performed and genotyping results indicating a vaccine strain would also confirm vaccine-associated measles

 Imported case of measles: a case exposed to measles outside the region or country during the seven to 21 days (12–23 days for rubella) prior to rash onset and supported by epidemiological or virological evidence or both

Note: For cases that were outside the region or country for only a part of the seven to 21 day (12–23 days for rubella). interval prior to rash onset, additional evidence including a thorough investigation of contacts of the case is needed to exclude a local source of infection.

- Import-related measles case: a locally acquired infection occurring as part of a chain of transmission originating from an imported case as supported by epidemiological or virological evidence, or both.
- Unknown source measles case: a confirmed case for which an epidemiological or virological link to importation or to endemic transmission cannot be established after a thorough investigation.

Table 1. Source and method of measles case confirmation

SOURCE OF INFECTION	Method of Confirmation	
	Laboratory	Epidemiological Linkage
Endemic	А	В
Unknown	С	D
Imported	E	F
Import-Related	G	Н