



January 1 – May 6, 2017

Epidemiology Bureau
Public Health Surveillance Division

Classification of Suspect Measles-Rubella Cases

A total of 1,102 suspect measles-rubella cases were reported nationwide from January 1 to May 6, 2017. Of these, 773 (70.14%) were tested. Among the suspect cases, **14 cases (1.27%)** were classified as **laboratory confirmed measles**, while **204 cases (18.51%)** were classified as **laboratory confirmed or epidemiologically-linked confirmed rubella**. Measles cases are **64.10% lower** while rubella cases are **195.65% higher** than the previous year of the same time period (see Table 2). Currently, there were no reported deaths among the confirmed measles-rubella cases.

FIGURE 1. CLASSIFICATION OF SUSPECT MEASLES-RUBELLA CASES, PHILIPPINES, JANUARY 1 –MAY 6, 2017 (N=1,102)

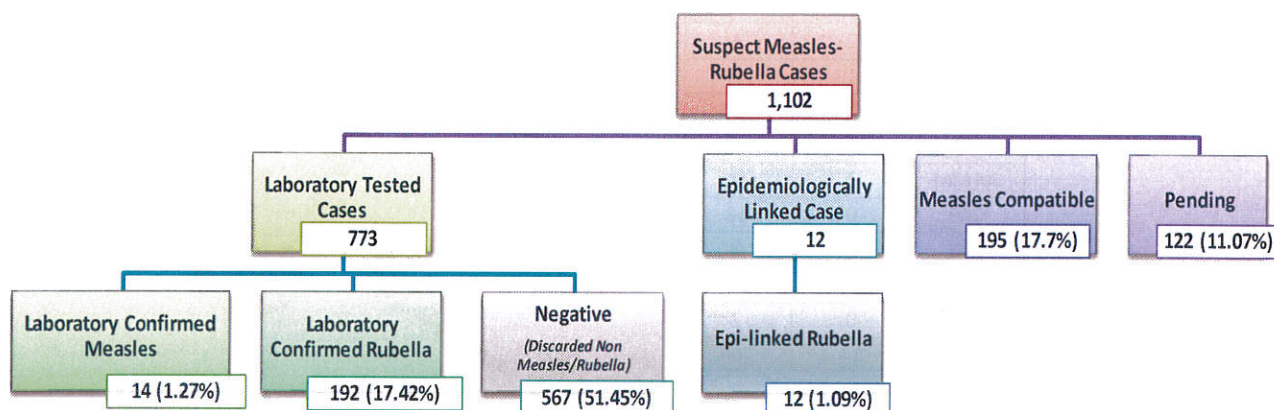


TABLE 1. MEASLES AND RUBELLA CASES BY REGION PHILIPPINES, JANUARY 1 – MAY 6, 2017 (N=1,102)

REGION	REPORTED	CONFIRMED MEASLES		MEASLES COMPATIBLE	CONFIRMED RUBELLA		DISCARDED AS NON-MEASLES/RUBELLA	PENDING CLASSIFICATION
		LABORATORY CONFIRMED	EPI-LINKED CONFIRMED		LABORATORY CONFIRMED	EPI-LINKED CONFIRMED		
I	130	2	0	22	19	0	72	15
II	21	0	0	7	1	0	10	3
III	106	1	0	7	23	0	70	5
IVA	262	3	0	44	57	2	136	20
IVB	15	0	0	7	1	0	5	2
V	17	0	0	0	2	0	12	3
VI	40	0	0	1	13	0	25	1
VII	24	0	0	0	3	0	17	4
VIII	77	0	0	8	30	9	9	21
IX	23	2	0	10	3	0	7	1
X	55	1	0	17	3	0	22	12
XI	33	1	0	2	1	0	25	4
XII	30	0	0	1	0	0	26	3
ARMM	25	2	0	20	0	0	1	2
CAR	48	0	0	13	12	0	18	5
CRG	13	0	0	4	0	0	6	3
NCR	161	2	0	32	22	1	93	11
NIR*	22	0	0	0	2	0	13	7
PHL	1,102	14	0	195	192	12	567	122

*NIR based on FHSIS Projected Population for 2017
see Annex A for confirmed measles cases by barangay

Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.



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FIGURE 2. GEOGRAPHICAL DISTRIBUTION OF CONFIRMED CASES*,
 PHILIPPINES, JANUARY 1 – MAY 6, 2017

Region	Measles	Rubella
I	2	19
II	0	1
III	1	23
IVA	3	59
IVB	0	1
V	0	2
VI	0	13
VII	0	3
VIII	0	39
IX	2	3
X	1	3
XI	1	1
XII	0	0
ARMM	2	0
CAR	0	12
CRG	0	0
NCR	2	23
NIR	0	2
PHL	14	204

*lab confirmed and
 epi-linked confirmed
 cases

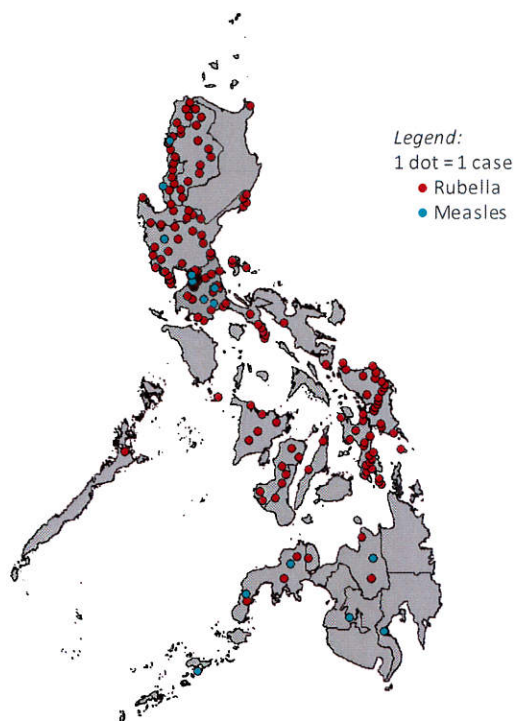


Figure 2 shows the distribution of cases among regions. For confirmed measles, Region IVA has the most number of cases with 3 (21.43%) cases.

Meanwhile, confirmed rubella cases, also in Region IVA is the highest in number, with 59 (28.92%) cases followed by Region VIII (39, 19.12%) and Regions III and NCR (23 per region, 11.27%).

TABLE 2. CONFIRMED MEASLES AND RUBELLA CASES BY REGION
 PHILIPPINES, 2016 vs. 2017

REGION	CONFIRMED MEASLES CASES			CONFIRMED RUBELLA CASES		
	2017	2016	% CHANGE	2017	2016	% CHANGE
I	2	2	→ 0.00	19	1	↑ 1800.00
II	0	0	→ 0.00	1	0	↑ 100.00
III	1	1	→ 0.00	23	1	↑ 2200.00
IVA	3	2	↑ 50.00	59	5	↑ 1080.00
IVB	0	0	→ 0.00	1	1	→ 0.00
V	0	2	↓ -200.00	2	0	↑ 200.00
VI	0	2	↓ -200.00	13	44	↓ -70.45
VII	0	9	↓ -900.00	3	2	↑ 50.00
VIII	0	2	↓ -200.00	39	2	↑ 900.00
IX	2	10	↓ -80.00	3	0	↑ 300.00
X	1	0	↑ 100.00	3	2	↑ 50.00
XI	1	0	↑ 100.00	1	3	↓ -66.67
XII	0	1	↓ -100.00	0	1	↓ -100.00
ARMM	2	0	↑ 200.00	0	0	→ 0.00
CAR	0	3	↓ -300.00	12	1	↑ 1100.00
CRG	0	2	↓ -200.00	0	0	→ 0.00
NCR	2	3	↓ -33.33	23	6	↑ 283.33
NIR	0	-	-	2	0	-
PHL	14	39	↓ -64.10	204	69	↑ 195.65

Case counts reported here do NOT represent the final number and are subject to change after inclusion of delayed reports and review of cases.



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**FIGURE 3. CONFIRMED RUBELLA ALERT AND EPIDEMIC THRESHOLD
PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=204)**

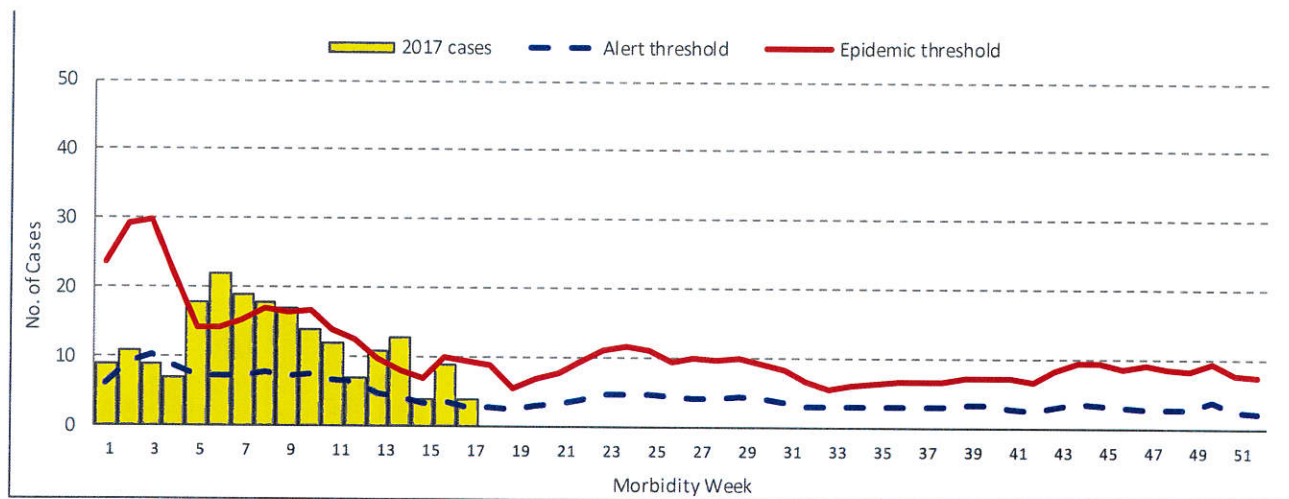
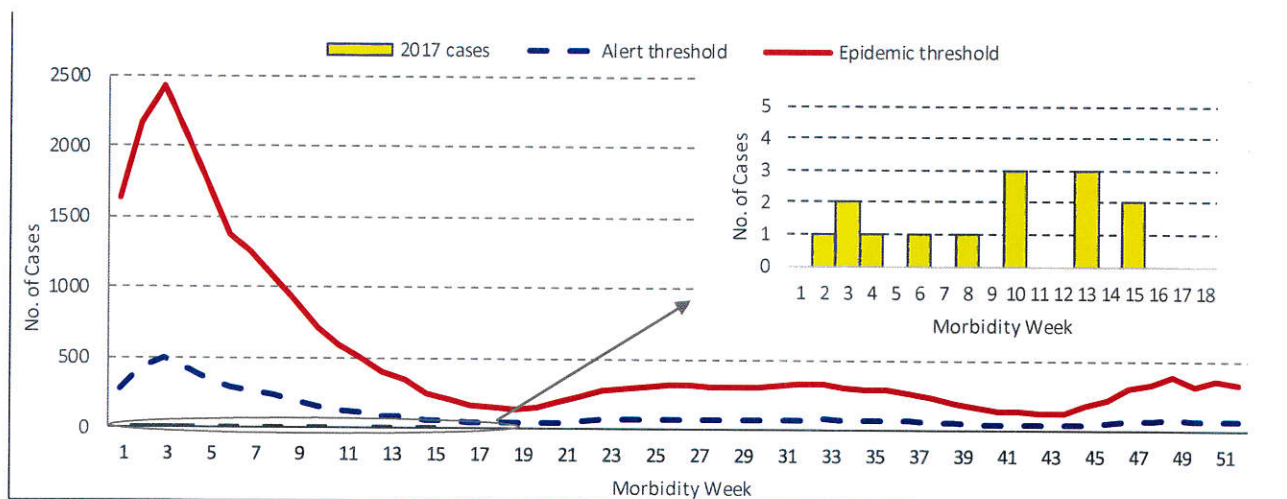


Figure 3 reflects the confirmed rubella cases in relation to the rubella alert and epidemic thresholds. It can be noted that the weekly number of rubella cases have almost consistently exceeded the alert threshold from weeks 1 to 17 except for weeks 3, 4 and 18. It reached the epidemic threshold in morbidity weeks 5 to 9, 13, 14 and 16. As of morbidity week 18, rubella incidence rate is 1.94 per 1,000,000 population.

The current number of confirmed measles cases is still way below the alert threshold as shown in Figure 4. Measles incidence rate is 0.13 per 1,000,000 population.

Note: Target incidence rate for measles and rubella elimination is <1 per 1,000,000 population

**FIGURE 4. CONFIRMED MEASLES ALERT AND EPIDEMIC THRESHOLD
PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=14)**



PCR Testing and Genotyping

There were 41 oropharyngeal/nasopharyngeal swabs submitted and tested by PCR for the current year. Among these, only 3 cases had rubella virus RNA detected. Of the 3 cases, only 1 case has undergone genotyping with a 2B genotype result. None of the samples detected measles virus.



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Profile of Cases: RUBELLA

FIGURE 4. CONFIRMED RUBELLA CASES BY SEX, PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=204)

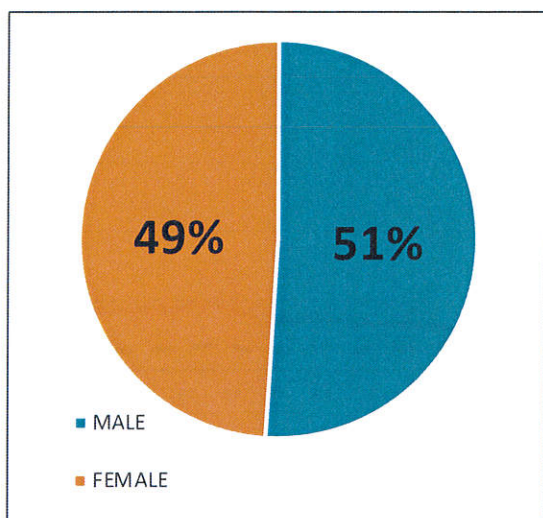
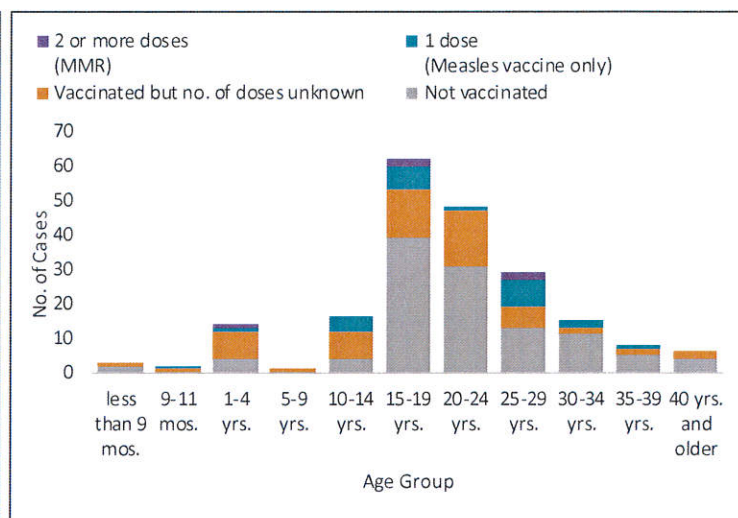


FIGURE 5. VACCINATION STATUS OF CONFIRMED RUBELLA CASES BY AGE GROUP, PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=204)



Of the confirmed rubella cases, 104 cases or 51% were male (Figure 4). Majority of the confirmed rubella cases belonged to the 15-19 years old age group (30.39%), followed by the 20-24 years old age group (23.53%). Most (55.39%) of the cases were not vaccinated as shown in Figure 5. Basis of vaccination status is the number of measles-containing vaccine received.

Among the female confirmed rubella cases, 3 (3%) were reported as pregnant. These cases were from Pasay City, Sasmuan, Pampanga and Itogon, Benguet. The case from Pasay City was lost to follow up while the other 2 cases are recurrently being monitored by their respective Epidemiology and Surveillance Units (ESUs) and Maternal, Newborn and Child Health and Nutrition (MNCHN) program managers.

Profile of Cases: MEASLES

FIGURE 6. CONFIRMED MEASLES CASES BY SEX, PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=14)

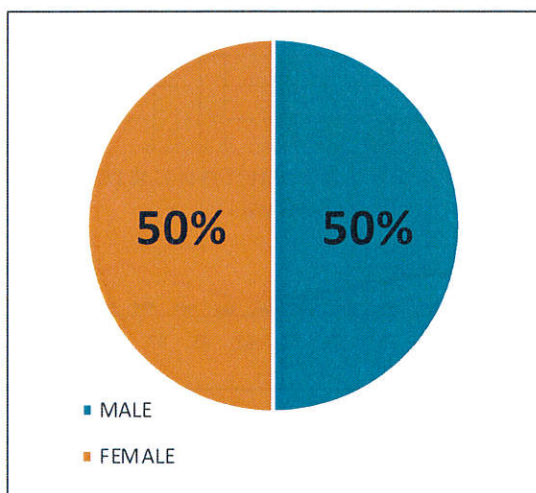
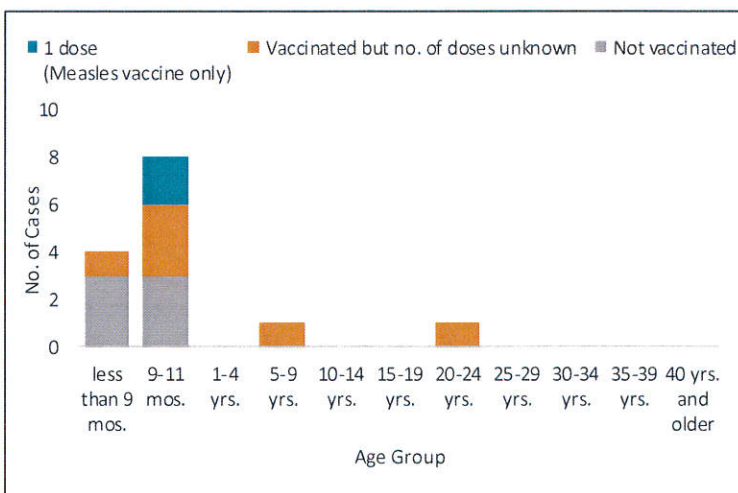


FIGURE 7. VACCINATION STATUS OF CONFIRMED MEASLES CASES BY AGE GROUP, PHILIPPINES, JANUARY 1 – MAY 6, 2017 (n=14)



There is an equal distribution of male and female confirmed measles cases (Figure 6). Majority of the confirmed measles cases belonged to the 9-11 month old age group (57.14%). Six (42.86%) of the cases were vaccinated but with unknown number of doses while 2 (14.29%) cases received 1 dose of measles vaccine as shown in Figure 7.



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Clustering of Measles-Rubella Cases

One new rubella cluster identified for morbidity week 18. No measles clusters and 9 rubella clusters were detected to date for year 2017. These cases were related in terms of place of residences and onset of symptoms, located in the same barangay or identified place of transmission (e.g. school in Northern Samar) and occurred within 4 consecutive weeks. Table 3 lists the rubella clusters identified since January 2017.

TABLE 3. CLUSTERS OF CONFIRMED RUBELLA CASES
PHILIPPINES, JANUARY 1 – MAY 6, 2017 (N=9)

MW	Region	Province	Muncity	Barangay	Place of Transmission	No. of Confirmed Cases	No. of Suspect Cases
3	V	Camarines Norte	Labo	Malatap	Home/ Dormitory	2	0
3-7	NCR	Metro Manila	San Juan City	West Crame	Barangay/ Community	4	0
5-11	VIII	Northern Samar	San Antonio	Dalupirit Manraya Pilar San Nicolas Vinisitahan	School	35	19
7-10	IVA	Batangas	Batangas City	Kumintang Ilaya	School/ Barangay	2	0
8-16	IVA	Batangas	Batangas City	Pallocon Kanluran	Workplace/ Barangay	4	0
9	III	Pampanga	Mabalacat	Airforce City	Unknown	3	0
9-10	NCR	Metro Manila	Quezon City	Project 4	Unknown	2	0
10-11	IVA	Cavite	Dasmariñas City	Salawag	Unknown	2	0
16-17	VI	Aklan	Buruanga	Tag-osip	Barangay/ Community	9	0

Actions Taken for Measles-Rubella Clusters and Cases:

1. Validation and provision of recommendations to the regions concerned
2. DOH coordination meetings between Disease Prevention and Control Bureau (DPCB) specifically Family Health Office (FHO) and Infectious Disease Office (IDO), Epidemiology Bureau (EB), Health Promotion and Communication Services (HPCS) and Research Institute for Tropical Medicine (RITM) to discuss the VPD data, response to outbreaks (FHO and IDO), preventive measures and next steps
3. Dissemination of weekly disease surveillance reports providing updates on current status of measles-rubella cases

Measles Surveillance Performance Indicators:

Table 4 presents the surveillance performance of regions based on the indicators for measles surveillance. Countrywide incidence rate of 0.32 per 1,000,000 population has been achieved, reaching the target of <1 per 1,000,000 population. Regions IX and ARMM did not meet the target which implies increased occurrence of measles in these regions.

Surveillance performance on adequate blood collection, adequate case investigation, suspect measles reporting, non-measles/non-rubella reporting and reducing measles compatible cases are all still below the target. These surveillance indicators gauge the capacity of the country in achieving the measles elimination goal. Development of strategies and towards a highly functional surveillance system is vital towards attainment of measles control and eventually, towards elimination. Strategies may include intensification of active surveillance across the country through enhanced case reporting, specimen collection and case investigation.

see Annex B for measles surveillance performance indicators dictionary



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TABLE 4. MEASLES SURVEILLANCE PERFORMANCE INDICATORS BY REGION
PHILIPPINES, 2016 vs. 2017

REGION	POPULATION 2017	ANNUALIZED MEASLES INCIDENCE RATE		ADEQUATE BLOOD COLLECTION RATE		ADEQUATE CASE INVESTIGATION RATE		ANNUALIZED SUSPECT MEASLES REPORTING RATE		ANNUALIZED NON- MEASLES/ NON- RUBELLA REPORTING		PERCENTAGE OF MEASLES COMPATIBLE	
		Target: <1/1,000,000 Pop.		Target: ≥80%		Target: ≥80%		Target: ≥2/100,000 Pop.		Target: ≥2/100,000 Pop.		Target: <10%	
		2016	2017	2016	2017	2016	2017	2016	2017	2016	2017	2016	2017
1	5,263,258	1.56	0.91	44	82	40	75	3.97	5.93	1.51	3.28	55	17
2	3,595,623	0.57	0.00	80	67	75	67	1.68	1.40	1.28	0.67	20	33
3	11,427,139	0.17	0.21	81	93	77	88	1.25	2.23	0.93	1.47	19	7
4A	14,659,353	0.86	0.49	74	80	61	72	2.08	4.29	1.32	2.23	23	17
4B	3,216,466	0.00	0.00	47	47	42	47	1.86	1.12	0.88	0.37	49	47
5	6,266,652	0.68	0.00	76	82	75	82	1.00	0.65	0.59	0.46	24	0
6	4,665,482	0.52	0.00	95	90	90	70	3.91	2.06	2.93	1.29	5	3
7	6,245,285	1.32	0.00	96	96	93	96	1.28	0.92	1.03	0.65	4	0
8	4,704,894	0.45	0.00	35	35	33	57	1.76	3.93	0.45	0.46	65	10
9	3,896,152	3.15	1.23	53	57	47	52	1.91	1.42	0.84	0.43	40	43
10	4,857,342	0.41	0.49	43	69	38	65	6.00	2.72	2.47	1.09	56	31
11	5,153,130	0.40	0.47	88	94	86	91	1.97	1.54	1.59	1.16	12	6
12	4,780,211	0.21	0.00	84	97	81	93	1.53	1.51	1.22	1.31	16	3
ARMM	3,896,848	0.56	1.23	26	20	26	12	0.53	1.54	0.08	0.06	74	80
CAR	1,847,347	1.67	0.00	84	69	84	65	4.46	6.24	3.18	2.34	13	27
CRG	2,828,583	1.13	0.00	67	62	67	62	2.30	1.10	1.39	0.51	34	31
NCR	12,918,977	0.45	0.37	76	78	70	73	1.76	2.99	1.11	1.73	19	20
NIR	4,698,855	-	0.00	-	95	-	91	-	1.12	-	0.66	-	0
PHL	104,921,597	0.73	0.32	70	77	65	72	-	1.12	-	0.66	29	18
LEGEND:		<1	≥1	≥80%	<80%	≥80%	<80%	≥2/100,000 Pop.	<2/100,000 Pop.	≥2/100,000 Pop.	<2/100,000 Pop.	<10%	
												≤50%	
													>50%

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ANNEX A. CONFIRMED MEASLES AND RUBELLA CASES BY BARANGAY

CONFIRMED MEASLES CASES PHILIPPINES, JANUARY 1 - MAY 6, 2017 (n=14)					
REGION	PROVINCE	MUNCITY	BARANGAY	NO. OF CASES as of MW1-17	NO. OF NEW CASES (MW18)
01	LA UNION	AGOO	SANTA ANA	1	0
01	PANGASINAN	DAGUPAN CITY	MAYOMBO	1	0
03	PAMPANGA	LUBAO	SANTA CRUZ	1	0
04A	CAVITE	TANZA	SANJA MAYOR	1	0
	QUEZON	TAYABAS	BAGUIO	0	1
	RIZAL	ANTIPOLO CITY	SAN JOSE	1	0
09	ZAMBOANGA DEL SUR	ZAMBOANGA CITY	AYALA	1	0
			TUMAGA	1	0
10	MISAMIS ORIENTAL	MANTICAO	POBLACION	1	0
11	DAVAO DEL NORTE	ISLAND GARDEN CITY OF SAMAL	SAN ISIDRO (BABAK)	1	0
ARMM	BASILAN	LAMITAN	MATATAG	1	0
			COLONIA	1	0
NCR	METRO MANILA	CALOOCAN CITY	BAGONG BARRIO	1	0
		MANILA CITY	TONDO	1	0
PHILIPPINES				13	1



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CONFIRMED RUBELLA CASES PHILIPPINES, JANUARY 1 - MAY 6, 2017 (n=204)					
REGION	PROVINCE	MUNCITY	BARANGAY	NO. OF CASES as of MW1-17	NO. OF NEW CASES (MW18)
01	ILOCOS SUR	SAN VICENTE	SAN SEBASTIAN	1	0
		SANTA	BANAOANG	1	0
		VIGAN CITY	NAGSANGALAN	1	0
	LA UNION	ARINGAY	SANTA RITA EAST	1	0
		BANGAR	CADAPLI	1	0
		BAUANG	PAYOCPOC NORTE ESTE	1	0
			PAYOCPOC SUR	1	0
			BARANGAY I (POB.)	1	0
		SAN FERNANDO CITY	LINGSAT	1	0
			GAYAMAN	0	1
	PANGASINAN	BINMALEY	BONUAN BOQUIG	1	0
		DAGUPAN CITY	BONUAN GUESET	1	0
			LUCAO	1	0
			MANGIN	1	0
			NAGUILAYAN	1	0
		MANAOAG	BABASIT	1	0
		MANGATAREM	MACARANG	1	0
		SANTA BARBARA	TULIAO	1	0
		URDANETA CITY	NANCAMALIRAN WEST	1	0
02	ISABELA	SANTIAGO CITY	SAGANA	1	0
03	BATAAN	MARIVELES	BALON-ANITO	1	0
			CAMAYA	2	0
		ORION	ARELLANO (POB.)	1	0
			GENERAL LIM (KAPUT)	1	0
	BULACAN	BALIUG	SABANG	1	0
		CALUMPIT	PALIMBANG	1	0
		MALOLOS CITY	SANTO ROSARIO	1	0
		MARILAO	CAMANSI PRENZA III	1	0
			LAMBAKIN	1	0
		SANTA MARIA	SAN GABRIEL	1	0
	NUEVA ECIJA	SAN ANTONIO	PAPAYA	1	0
	PAMPANGA	MABALACAT CITY	AIRFORCE CITY	3	0
		SANTA ANA	SANTA MARIA	1	0
		SASMUAN	SAN PEDRO	1	0
	TARLAC	LA PAZ	DUMARAIS	1	0
	ZAMBALES	BOTOLAN	PORAC	1	0
		CANDELARIA	MALABON	1	0
		IBA	PALANGINAN	1	0
		SANTA CRUZ	NAULO	1	0
		SUBIC	ILWAS (POB.)	1	0
04A	BATANGAS	BATANGAS CITY	BARANGAY 15 (POB.)	1	0
			BARANGAY 18 (POB.)	1	0
			BARANGAY 19	1	0
			BARANGAY 20 (POB.)	1	0
			CONCEPCION	1	0
			KUMINTANG ILAYA	2	0
			PALLOCAN KANLURAN	3	1
			PINAMUCAN IBABA	1	0
			SAN ISIDRO	1	0
			SAN MIGUEL	1	0
			SANTO DOMINGO	1	0
			SIMLONG	1	0
			TABANGAO DAO	1	0



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REGION	PROVINCE	MUNCITY	BARANGAY	NO. OF CASES as of MW1-17	NO. OF NEW CASES (MW18)
04A	BATANGAS	BATANGAS CITY	TINGA LABAK	1	0
		LIPA CITY	MUNTING PULO	2	0
			POBLACION BARANGAY 2	1	0
			SAMPAGUITA	1	0
		SAN JOSE	BANAYBANAY II	1	0
			CALANSAYAN	1	0
			MAHABANG PARANG	1	0
		TAYSAN	MABAYABAS	1	0
	CAVITE	BACOR CITY	MOLINO III	1	0
		DASMARIÑAS CITY	BUROL I	1	0
			H-2	1	0
			MALAGASANG II-G	1	0
			MANGAS I	1	0
			MAYPAJO	1	0
			SALAWAG	2	0
			SAN ANTONIO DE PADUA I	1	0
			SAN DIONISIO (BARANGAY 1)	1	0
			SAN FRANCISCO I	1	0
			SAN ISIDRO LABRADOR I	1	0
			SAN JUAN (SAN JUAN I)	1	0
			SAN LORENZO RUIZ II	1	0
			SAN LUIS II	1	0
			SAN NICOLAS I	1	0
			SAN NICOLAS IV	1	0
			SANTA CRUZ I	1	0
			SANTA LUCIA (SAN JUAN II)	1	0
			SANTA MARIA (BARANGAY 20)	1	0
			VICTORIA REYES	2	0
		IMUS CITY	TANZANG LUMA II	1	0
		SILANG	BIGA I	1	0
			SAN VICENTE II	1	0
		TANZA	BIWAS	1	0
			CALIBUYO	1	0
	LAGUNA	SAN PEDRO	SAN VICENTE	1	0
	QUEZON	LOPEZ	UNSPECIFIED	1	0
	RIZAL	ANTIPOLO CITY	DELA PAZ (POB.)	1	0
			SAN ISIDRO (POB.)	1	0
		TAYTAY	SAN JUAN	1	0
		TERESA	PRINZA	1	0
04B	PALAWAN	PUERTO PRINCESA CITY	SAN MIGUEL	1	0
05	CAMARINES NORTE	LABO	MALATAP	2	0
06	AKLAN	BURUANGA	HABANA	0	1
			TAG-OSIP	0	9
	CAPIZ	TAPAZ	POBLACION	1	0
	ILOILO	PASSI CITY	MAN-IT	1	0
		SAN ENRIQUE	CAMIRI	1	0
07	CEBU	CEBU CITY	PUNTA PRINCESA	1	0
		COMPOSTELA	LUPA	1	0
		MANDAUE CITY	TABOK	1	0



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REGION	PROVINCE	MUNCITY	BARANGAY	NO. OF CASES as of MW1-17	NO. OF NEW CASES (MW18)
08	NORTHERN SAMAR	SAN ANTONIO	DALUPIRIT	18	0
			MANRAYA	9	0
			PILAR	5	0
			SAN NICOLAS	4	0
			VINISITAHAN	2	0
	SAMAR	CATBALOGAN	MAULONG	1	0
09	ZAMBOANGA DEL NORTE	DIPOLOG CITY	MIPUTAK (POB.)	1	0
	ZAMBOANGA DEL SUR	ZAMBOANGA CITY	BALIWASAN	1	0
			TALON-TALON	1	0
10	MISAMIS OCCIDENTAL	OZAMIS CITY	MALAUABANG	1	0
		TANGUB CITY	BARANGAY VII - UPPER POLAO (POB.)	1	0
	MISAMIS ORIENTAL	CAGAYAN DE ORO CITY	PATAG	1	0
11	DAVAO DEL NORTE	KAPALONG	GUPITAN	1	0
CAR	BENGUET	ATOK	ABIANG	1	0
		BAGUIO CITY	AURORA HILL	1	0
			CABINET HILL-TEACHER'S CAMP	1	0
			CAMP 7	1	0
			CAMP ALLEN	1	0
			POLIWES	1	0
			SAN CARLOS HEIGHTS	1	0
			SANITARY CAMP, NORTH	1	0
			SANTO TOMAS PROPER	1	0
		ITOGON	LOACAN	0	1
		LA TRINIDAD	AMBIONG	1	0
			PICO	1	0
NCR	METRO MANILA	CALOOCAN CITY	BARANGAY 170	1	0
			BARANGAY 179	1	0
		MAKATI CITY	PITOGO	1	0
		MALABON CITY	TONSUYA	1	0
		MANDALUYONG CITY	PAG-ASA	1	0
		MANILA CITY	BARANGAY 399	1	0
			BINONDO	1	0
			BRGY. 33	1	0
			OLD SITE BASECO	1	0
			PACO	1	0
			SAMPALOC	1	0
			SANTA CRUZ	1	0
			PARAÑAQUE CITY	DON GALO	1
			SAN DIONISIO	1	0
		PASAY CITY	BRGY. 145	1	0
		QUEZON CITY	MARIANA	1	0
			PROJECT 4	2	0
		SAN JUAN CITY	ONSE	1	1
			WEST CRAME	3	0
		NIR	NEGROS OCCIDENTAL	ENRIQUE B. MAGALONA	POBLACION II (BARANGAY 2)
VALLADOLID				1	0
DOLDOL					
PHILIPPINES				190	14



January 1 – May 6, 2017

Epidemiology Bureau
Public Health Surveillance Division

ANNEX B. MEASLES SURVEILLANCE PERFORMANCE INDICATORS

- **Measles incidence rate:** target: $<1/1,000,000$ of the total population. It measures the progress of a country towards measles elimination. High incidence rate indicates persistence of measles transmission in some areas.
- **Adequate blood collection rate:** target: $\geq 80\%$ adequate specimen collected within 28 days from rash onset. This will facilitate the specificity (ability to determine measles virus as the cause of illness) of reported measles cases. With adequate specimen collection, there will be an access to identify the circulating measles virus in the community.
- **Timeliness and adequacy of investigation:** target: $\geq 80\%$ adequate investigation within 48 hours of notification, with collection of all 10 core variables. This provides venue to prevent further transmission of measles cases in the community, furthermore, provides immediate response to prevent potential outbreaks.
- **Suspect Measles Reporting Rate:** target: ≥ 2 per 100,000 of the total population. It measures the ability to detect suspect measles cases. Reporting an adequate number of suspected cases provides confidence that the system is sensitive to detect measles cases.
- **Non-Measles Reporting Rate:** target: ≥ 2 per 100,000 of the total population. If non-measles reporting rate is equal or proportion to the number of suspect measles cases in all regions, it gives us higher chance in attaining our goal of measles elimination. However, symptoms similar to that of measles may be attributed to another organism causing the illness.

ANNEX C. DEFINITION OF TERMS

Laboratory confirmed measles case	A suspect measles case with a positive laboratory test result for measles-specific IgM antibodies or other approved laboratory test method
Laboratory confirmed rubella case	A suspect measles case with a positive laboratory test result for rubella-specific IgM antibodies or other approved laboratory test method
Measles compatible case	A case that meets the suspect case definition for measles but for which no adequate blood specimen was taken and which has not been linked epidemiologically to another case positive for measles IgM or another laboratory-confirmed communicable disease
Confirmed Measles cases	Laboratory confirmed + Epidemiologically-linked measles cases
Epidemiologically-linked measles (or rubella) case	A suspect measles case that has not been confirmed by laboratory but that is 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 an outbreak) to another epidemiologically confirmed measles case.
Discarded non-measles/rubella	A case that meets the clinical case definition for measles and tested negative for both measles and rubella testing.
Pending Classification	Cases with blood specimen collected and pending laboratory results.
Alert threshold	Refers to the level of occurrence of disease that serves as an early warning for epidemics. An increase in the number of cases above the threshold level should trigger an investigation, epidemic preparedness and implement appropriate prevention and control measures.
Epidemic threshold	Refers to the level of occurrence of disease above which an urgent response is required. The threshold is specific to each disease and depends on the infectiousness, other determinants of transmission and local endemicity levels.
Cluster of cases	2 or more cases with temporal (occurring in a span of 4 weeks) and geographical association (within the same barangay)

