



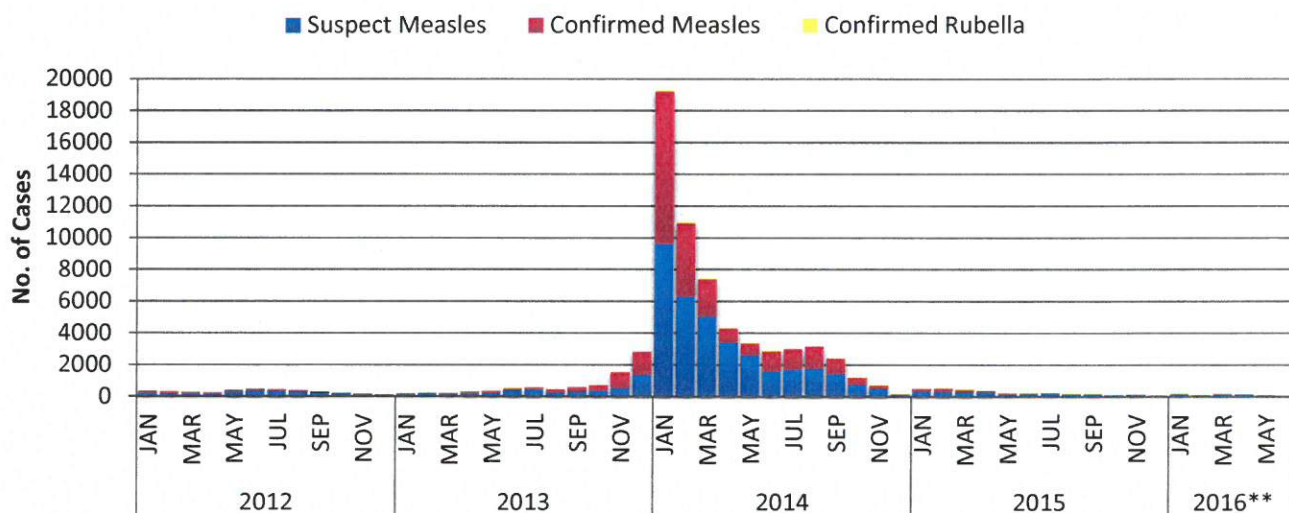
Morbidity Week 25: January 1 - June 25, 2016

Epidemiology Bureau
Public Health Surveillance Division

Measles Elimination Goal in the Philippines

Measles elimination goal, as set by the World Health Organization, is the absence of endemic measles virus transmission in a defined geographical area (e.g. region or country) for at least 12 months in the presence of a surveillance system that has been verified to be performing well. This report is being generated to provide data and updates on measles and rubella surveillance which may be utilized for program implementation targeting measles elimination.

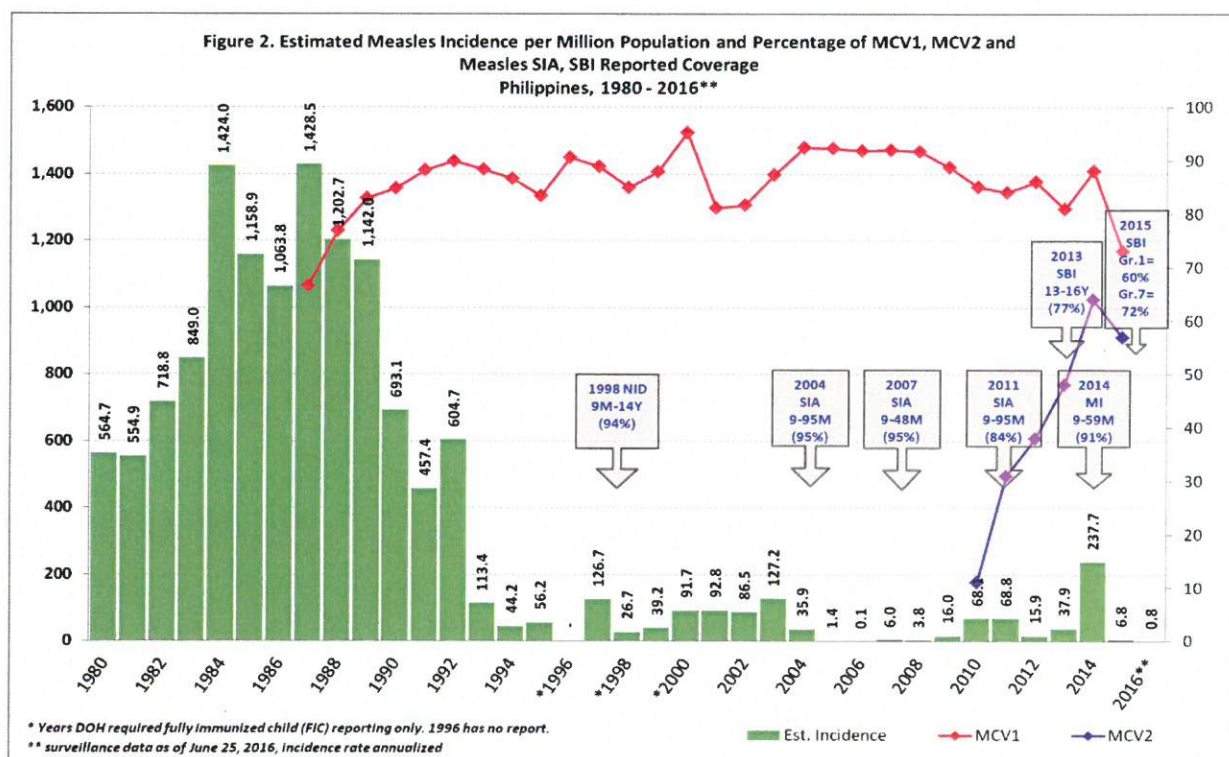
FIGURE 1. TREND OF MEASLES AND RUBELLA* CASES, PHILIPPINES, 2012-2016**



Final Classification	2012	2013	2014	2015	2016**
Suspect Measles	2902	4989	35105	2848	801
Confirmed Measles	697	3711	23743	697	44
Confirmed Rubella	-	276	343	163	74
Total	3599	8976	59191	3708	919

*Rubella classification integrated in 2013

**partial data as of June 25, 2016





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Following the trend of measles incidence in the Philippines, experts have observed that increase in measles incidence occurs every two years. The country has experienced an outbreak in the year 2014 and the probability of a shoot up in the number of measles cases this year is high.

A total of 919 suspect measles cases were reported nationwide from January 1 to June 25, 2016. Of these, 44 (5%) were classified as confirmed measles cases, may it be laboratory confirmed measles or epi-linked confirmed measles and 74 (8%) were classified as laboratory confirmed rubella (see Figure 3).

FIGURE 3. DISTRIBUTION OF REPORTED MEASLES-RUBELLA CASES, PHILIPPINES, JANUARY 1 - JUNE 25, 2016 (N=919)

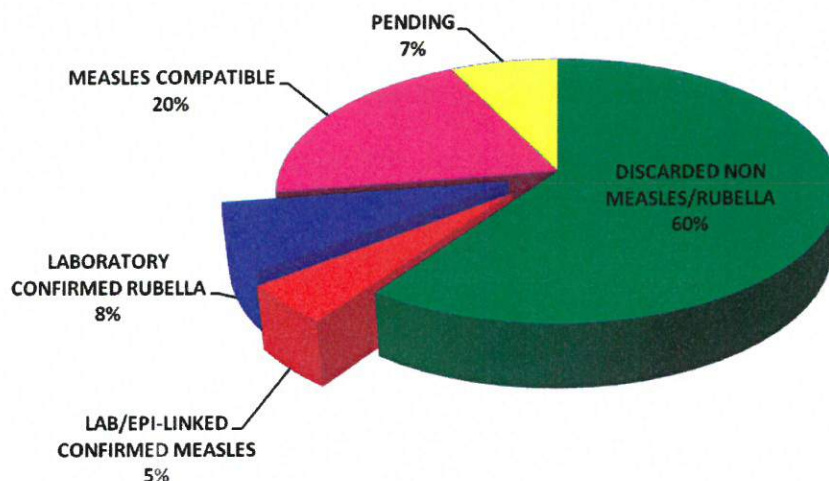


TABLE 1. MEASLES AND RUBELLA CASES BY REGION
PHILIPPINES, JANUARY 1 – JUNE 25, 2016 (N=919)

REGION	REPORTED	TESTED	CONFIRMED MEASLES	CONFIRMED RUBELLA	DISCARDED	MEASLES COMPATIBLE	PENDING
1	68	38	3	3	32	29	1
2	37	26	1	0	26	5	5
3	55	45	2	2	41	7	3
4A	91	68	4	5	58	19	5
4B	25	11	0	1	9	11	4
5	13	13	2	0	10	1	0
6	173	166	2	44	119	7	1
7	47	45	9	2	34	1	1
8	39	2	0	0	2	32	5
9	50	32	11	0	22	9	8
10	71	28	1	2	25	23	20
11	41	31	0	4	26	6	5
12	39	38	1	1	36	1	0
ARMM	6	1	0	0	1	2	3
CAR	44	38	3	2	33	6	0
CRG	20	12	2	0	10	8	0
NCR	100	77	3	8	65	19	5
PHL	919	671	44	74	549	186	66

Identified Clusters of Confirmed Measles and Rubella Among Regions

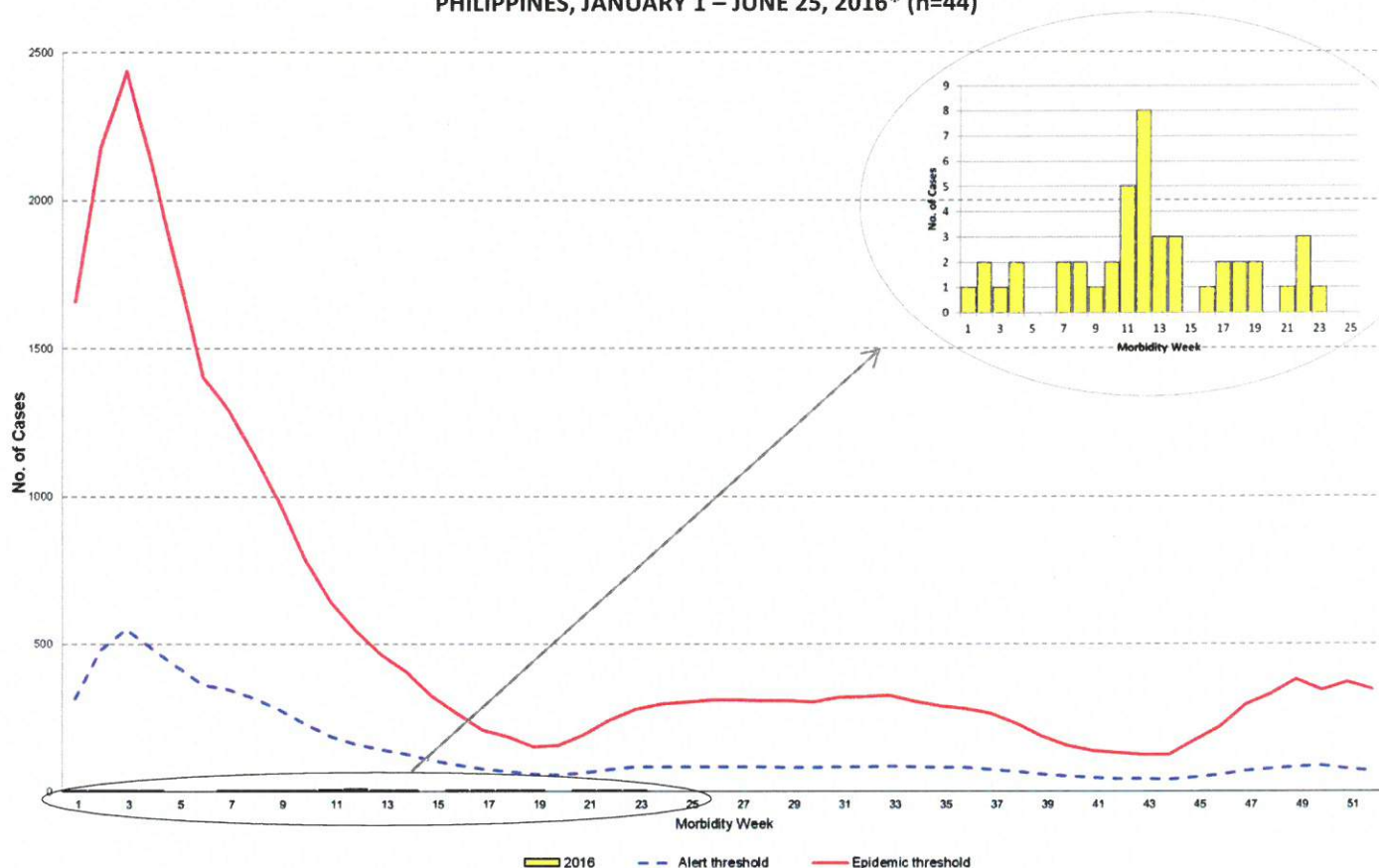
Morbidity Week	Disease	Region	Province	Muncity	Barangay	Place of Transmission	No. of Cases
12	Measles	Region 9	Zamboanga del Norte	Kalawit	Palalian	Community	6
2-5	Rubella	Region 6	Antique	Tobias Fornier	-	School	13
9-13							7



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**FIGURE 4. CONFIRMED MEASLES ALERT AND EPIDEMIC THRESHOLD
PHILIPPINES, JANUARY 1 – JUNE 25, 2016* (n=44)**

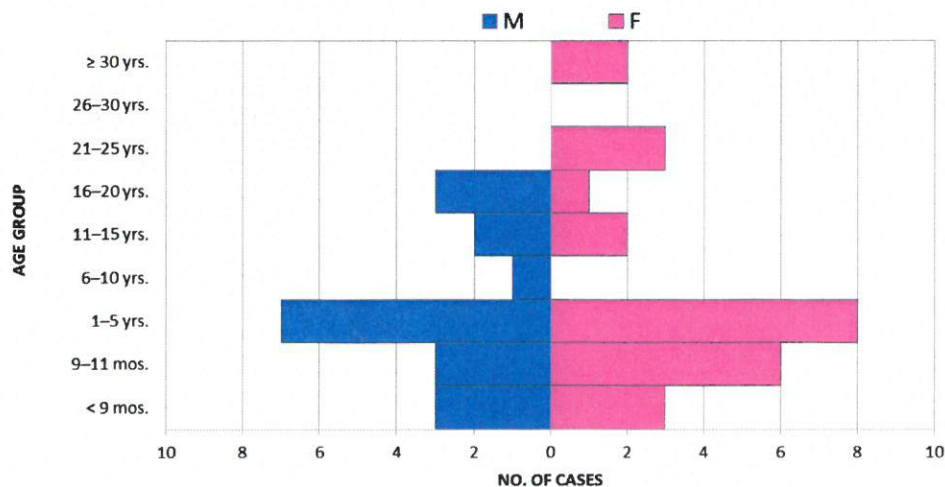


Profile of Cases

Measles

Fifty seven percent (57%) of the confirmed measles cases were female. Majority of the confirmed cases belonged to children aged 1 to 5 years old (34%) as shown in Figure 5. Among the confirmed measles cases, 22 (50%) were not vaccinated, 18 (41%) were vaccinated and 4 (9%) have an unknown vaccination status (Figure 6).

**FIGURE 5. CONFIRMED MEASLES CASES BY AGE GROUP AND SEX
PHILIPPINES, JANUARY 1- JUNE 25, 2016 (n=44)**

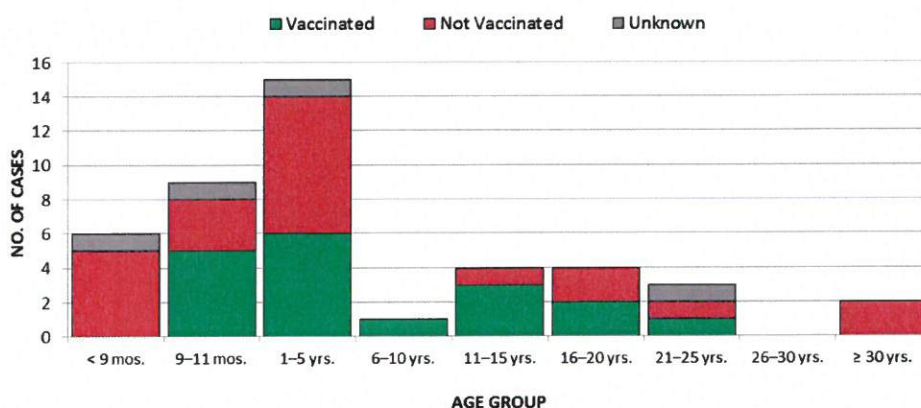




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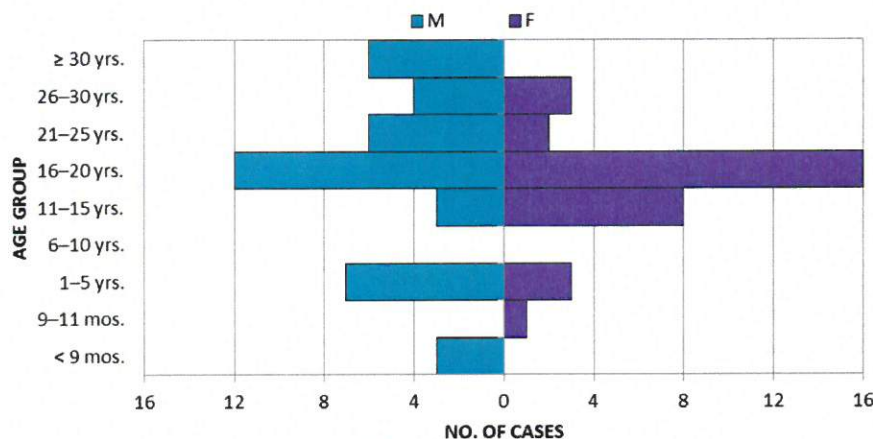
**FIGURE 6. IMMUNIZATION STATUS OF CONFIRMED MEASLES CASES BY AGE GROUP
PHILIPPINES, JANUARY 1-JUNE 25, 2016 (n=44)**



Rubella

Fifty five percent (55%) of the confirmed rubella cases were male. Majority of the confirmed cases belonged to the young adult age group ranging from 16 to 20 years old (38%) as shown in Figure 7. Among the female confirmed rubella cases, one case was 17-18 weeks pregnant and tested negative for both measles and rubella IgM. (Pregnancy data source: CIF encoded by RITM)

**FIGURE 7. CONFIRMED RUBELLA CASES BY AGE GROUP AND SEX
PHILIPPINES, JANUARY 1- JUNE 25, 2016 (n=74)**



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

Actions Taken in Regions with Identified Clusters of Confirmed Measles and Rubella:

Region 9:

1. Mop-up immunization in the affected barangay and in neighboring barangays (April)
2. Active case finding and continuous monitoring

Region 6:

1. Coordination from municipal to regional levels
2. Immunization of close contacts and community catch-up immunization (March)
3. Contact tracing and continuous monitoring

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