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January 25, 2024

## **RE: Measles in Saskatoon**

Measles is a highly contagious, acute viral infection that is spread by direct and airborne routes. Through the use of vaccines, Canada eliminated measles in 1998 (SK CD Manual, 2019), however, due to travel and importation, sporadic cases still arise. Immunization is the best defense and in order to achieve community immunity,  $\geq 95\%$  of the community would need to receive two doses of a measles containing vaccine. If community immunity has not been met, susceptible individuals and communities remain at risk of acquiring the disease. This is not a theoretical concern as we know that many children missed some or all of their vaccinations during the pandemic, and not all have been caught up.

As you may be aware, a case of measles has been recently reported in Saskatoon. The measles case is related to international travel. The following is some general information about measles and immunization to assist in responding to any questions or concerns from community members or leadership.

### **Current Situation:**

A confirmed case of travel-related measles has been reported in Saskatoon last week. People who were at any of the following locations in Saskatoon during these time periods should monitor for measles symptoms:

- **Sunday, Jan. 7** from 3:30 p.m. to 7 p.m. at:
  - Reitmans in Stonebridge (3011 Clarence Ave. S.).
  - Dollarama in Stonebridge (3011 Clarence Ave. S.).
  - Walmart in Stonebridge (3035 Clarence Ave. S.).
- **Tuesday, Jan. 9** from 1:30 p.m. to 4:30 p.m. at:
  - University of Saskatchewan first floor Arts building café (9 Campus Dr.).
- **Tuesday, Jan. 16** from 7 a.m. to 9:30 a.m. at:
  - Royal University Hospital adult emergency waiting room.

### **Measles Signs & Symptoms:**

Signs and Symptoms include:

- Cough, coryza (runny nose) or conjunctivitis (red, watery eyes).
- Koplik spots (white spots) on the buccal mucosa (mouth and throat) appear about 1-2 days before rash.
- Fever which often rises as the rash appears.
- Generalized maculopapular rash (small red spots) for at least 3 days. Begins behind the ears and on the face, gradually spreading downwards to the trunk and then the extremities.

Note that the time from exposure to symptom onset (incubation period) is about 10 days, but can be up to 21 days.



### Management of Suspected or Confirmed Measles Cases:

Please notify the FNIHB-SK/NITHA MHOs or CD Coordinators **immediately** if any cases of measles are suspected in your community. The MHO and CD Coordinator will support the CHN with follow-up of the client by providing:

- Direction on the immediate exclusion and isolation of the client up to and including 4 days from onset of rash
- Support for referrals to a primary care provider for assessment and testing
- Notification to any healthcare facility where the client may present so that infection control measures can be implemented
- Direction on administration of post-exposure prophylaxis (immunization or immunoglobulin)
- Direction on contact tracing and management of contacts.

### Measles Immunization Recommendations:

Routine immunization for measles should continue to be offered according to the immunization schedule in the Saskatchewan Immunization Manual (SIM), with measles containing vaccines being provided to infants at 12 months and 18 months of age. Please refer to the SIM Routine Immunization Schedules for further information.

Parents should be reminded that vaccinated infants may not be protected against measles until at least 2 weeks post-immunization. The measles vaccine is very effective – after 1 dose, 95% of people are protected, and after 2 doses, 99% of people are protected.

For more information or questions related to measles immunization, please contact:

- Northern Inter-Tribal Health Authority: Pauline (Sunshine) Dreaver, Public Health Nurse by phone 306-953-5039 or email [sdreaver@nitha.com](mailto:sdreaver@nitha.com)
- Indigenous Services Canada: Michelle Allard-Johnson, Regional Immunization Coordinator by phone 306-201-9673 or email [michelle-allard.johnson@sac-isc.gc.ca](mailto:michelle-allard.johnson@sac-isc.gc.ca)

For more information or questions related to management and prevention of measles cases, please contact:

- Northern Inter-Tribal Health Authority: James Piad, CDC Nurse by phone 306-953-5025 or email [jpiad@nitha.com](mailto:jpiad@nitha.com)
- Indigenous Services Canada: Valerie Skiba, A/Regional Communicable Disease Manager by phone 639-560-4532 or by email [valerie.skiba@sac-isc.gc.ca](mailto:valerie.skiba@sac-isc.gc.ca).

Respectfully,

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