MEASLES OUTBREAK NEW YORK CITY, 2018-19

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1

Disclosures

Jennifer Rosen has nothing to disclose with regard to commercial relationships



BACKGROUND: 2018-2019 MEASLES OUTBREAK

- Began Oct 2018 with an unvaccinated child from Brooklyn who acquired measles in Israel, where a large outbreak was occurring
- 649 cases (onsets Sept 30, 2018 to July 15, 2019)
- Declared over Sept 3, 2019
- Largest U.S. outbreak since 1992*
- Multiple importations from Israel, UK, Ukraine, NY (outside of NYC) and NJ



*CDC. Measles-United States, 1992. MMWR 1993

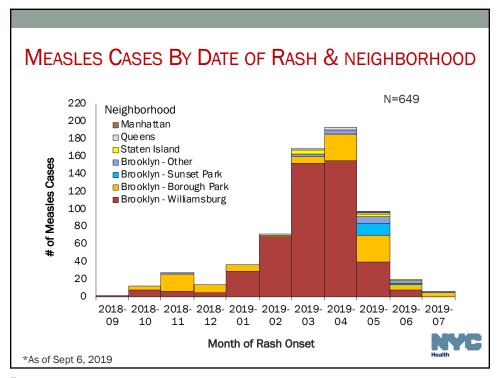
3

Focus in Orthodox Jewish neighborhoods Williamsburg and Borough Park, Brooklyn

93% Orthodox Jewish







5

Vaccination Status of Cases

- # Unvaccinated: 477 (86%)*
 - Age <12 months: 100
- Age ≥12 months: 377Preventable Cases
- # Vaccinated: 78 (14%)*
- 1 prior MMR: 47
- 2 prior MMR: 31
- # Unknown Vaccination History: 94 (primarily adults)

*% among cases with known vaccination status *As of Sept 6, 2019



NEW YORK CITY DEPARTMENT OF HEALTH RESPONSE





7

Revised MMR Recommendations During Outbreak (No longer apply)

- For persons residing or regularly spending time in areas with ongoing measles transmission*
- Same as international travel recommendations
- Children aged 6 to 11 months: early, extra dose of MMR**
- Children ages 1 to 4 years: early 2nd MMR**
- Children and adults aged <u>></u>4 years: 2 MMRs (or proof of immunity)



^{*}Consider early, extra dose for Orthodox Jewish infants ages 6-11 months living anywhere in NYC

^{**}Maintain 28 days between doses of live vaccines: MMR, varicella, intranasal flu

Survey of Infection Control Practices

- Population: Outpatient practices that reported suspect measles cases from Sept--Dec, 2018 (15 of 17 responded)
- Avoided use of private exam for 2 hours (93%)
- Screening for measles by phone (87%)
- Posted signs about measles symptoms (100%)
- Written protocols for measles (60%)
- Alternative isolation practices
- Seeing patients outdoors (60%)
- Using entrances/exits of different buildings (40%)
- Evaluating patients after hours (27%)
- Home visits (27%)

Source: Alroy et al. Interventions to reduce measles virus exposures in outpatient health care facilities—NYC, 2018. MMWR. 2019. 68(36)791-2.



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Provider Outreach

- Multiple health alerts and presentations to clinicians
- Reminders to recall unvaccinated patients
- Clinical and infection control technical assistance
- Distribute posters and pamphlets in English and Yiddish to medical facilities
- Ensure providers have enough MMR vaccine on hand
- Guidance for post-exposure prophylaxis and home quarantine for exposed persons



Community Engagement

- Meetings with local religious, community and elected officials
- Collaborated with key community partners
- Letters sent to parents through schools
- Letters sent to households with unvaccinated children
- Robocalls (multiple times, ~75,000 contacts)
- · Immunization hotline



11

Media and Community Education

- · Focused on print and digital media serving the community
 - English and Yiddish
 - Measles symptoms and travel warning, MMR vaccination
 - Co-branded
 - WhatsApp
- Distribution of materials, Tzim Gezint booklet and Slice of PIE, through providers and local community-based organizations
 - Mailing to 29,000 households



School & Child Care Outreach

- Policy change on December 7, 2018 required exclusion of unvaccinated students with medical/religious exemptions in impacted zip codes (no longer applies)
- DOHMH audits to ensure compliance with immunization requirements (n=101 facilities)
- Commissioner's Orders and Notices of Violation to noncompliant facilities
- 12 schools closed temporarily for failing to provide access to medical and attendance records or for having students without required documentation of MMR in attendance*



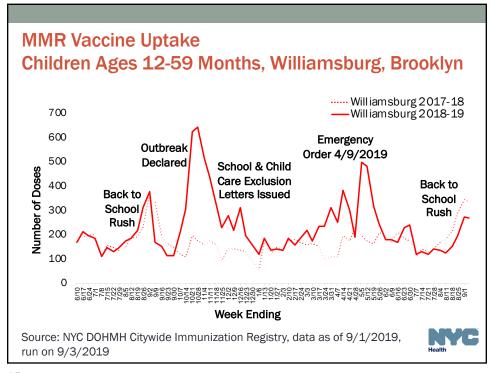
13

April 9: Public Health Emergency Declared Commissioner's Order (no longer applies)

- Every adult and child who lives, works or resides in Williamsburg (4 zips*) and has not received the MMR vaccine must be vaccinated
- Exemption: People who demonstrate they are immune from measles or should be medically exempt
- 232 individual summonses issued since 4/9/19
 - Many cancelled based on vaccination or proof of immunity
- \$1,000 fine if summons is upheld

*Zips: 11205, 11206, 11211, 11249





15

Increases in Vaccination in Children*

- NYC, Citywide
 - 188,635 MMR doses administered
 - Represents a 14% increase (23,320 additional doses) vs. the same period last year
- Williamsburg, Brooklyn
- 11,964 MMR doses administered
- Represents a 54% increase (4,216 additional doses) vs. the same period last year
- Proportion of children with ≥1 dose of MMR increased from 80% to 91%**

*Oct 1, 2018 through Sept 1, 2019; ages 12 to 59 months **2019 population estimates



Challenges

- Need to rapidly ramp-up audits of schools and child cares
- Need to identify unvaccinated persons for individual summons in quick time-frame
- Measles "parties" to intentionally expose children
- Possible mistrust of DOHMH given school exclusions and mandatory vaccinations
- Religious exemptions to school-required immunizations had been allowed in NY and were steadily increasing in private schools
- 1,420 (0.5%) in 2012-2013 to 3.914 (1.5%) in 2018-19
- Orthodox Jewish schools: 678 (0.7%, range 0-14%) in
 2012-13 to 2,869 (2.7%, range 0%-28.5%) in 2018-19

17

The New York Times

Measles Outbreak: N.Y. Eliminates Religious Exemptions for Vaccinations

New York, where measles has spread in ultra-Orthodox Jewish communities, joins California and a handful of other states in revoking religious exemptions.



NYC Health

June 13, 2019

