



ALERT FOR ED CLINICIANS

Increase in travel-associated communicable disease

KEY POINTS

- **Increased numbers of overseas-acquired typhoid, paratyphoid and hepatitis A infection are being reported in Western Australia, particularly among those staying with family in endemic countries.**
- **Many regions of the world are currently experiencing measles outbreaks and overseas-acquired measles cases are being reported interstate.**
- **Emergency department clinicians should:**
 - ask about recent travel when assessing acute illness**
 - identify persons with measles-compatible illness at triage, provide a mask, and isolate immediately**
 - consider testing returned travellers presenting with fever and rash for measles (collect a throat swab, urine sample and blood)**
 - consider faecal pathogen testing for returned travellers with gastrointestinal symptoms and advise to abstain from high-risk activities (e.g. food handling) while the diagnostic work-up is underway.**

Measles

- Typical prodromal symptoms of measles include fever, coryza, conjunctivitis and cough, followed around 3-5 days later by a maculopapular rash. About 10% of measles cases involve complications such as pneumonia and encephalitis, and many people with measles will end up hospitalised.
- Measles is highly infectious and can be transmitted via airborne droplets to those sharing the same airspace (e.g. in waiting rooms). Returned travellers with a [measles](#)-compatible illness should be identified at triage, fitted with a mask, and isolated immediately.
- Definitive laboratory evidence should be sought for all suspected measles cases, especially for individuals born since 1965 without documentation of receiving two doses of measles-containing vaccine or a history of lab-proven measles infection. The recommended laboratory tests for diagnosis of acute measles include: a throat swab (or nasopharyngeal aspirate); first catch urine; serum samples for serology +/- PCR (SST and EDTA tubes, respectively).
- If you suspect measles, contact your local [Public Health Unit](#) for guidance, even if laboratory results are still pending.

Enteric diseases

- Typical symptoms of commonly overseas-acquired enteric diseases such as typhoid, paratyphoid, and hepatitis A, include fever, lethargy, jaundice, abdominal pain, nausea and vomiting, constipation or diarrhoea.
- Consider faecal pathogen testing for symptomatic returned travellers and advise to abstain from high-risk activities (e.g. food handling) while the diagnostic work-up is underway.

Notification of cases

- On first suspicion of diagnosis of a case of measles, typhoid, paratyphoid or hepatitis A, notify your local [Public Health Unit](#) by telephone (8am-5pm Mon-Fri, excluding public holidays) or 08 9328 0553 (after hours on-call).

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