Revised Measles, Rubella, CRS elimination targets: September 2015

Measles, Rubella, CRS elimination programmes

Epidemiology Unit, Ministry of Health revised Measles, Rubella, CRS elimination targets in September 2015

Revised Elimination targets are as follows

- < 1 Measles case per / million population by 2020
- <1 Rubella case/ million population by 2020
- Zero CRS cases/ 100,000 Live births by 2020

Case identification should be based on laboratory confirmation and it is identified the essential laboratory testing (measles/ rubella IgM antibodies) of all suspected measles, Rubella and CRS cases.

The strategies to achieve Measles, Rubella and CRS are as follows:

- Maintain high immunization coverage [>95% in each district] (at the age of 9m & 3 years)
- Active surveillance : case based surveillance: Laboratory confirmation of all cases
- Outbreak prevention and adequate investigation of outbreaks
- Effective case management and prevention of complications & mortality

The case based investigation should include following components to achieve elimination targets

- Routine notification (H-544) to Medical Officer of Health: on early suspected
- Community based identification of Measles/Rubella cases
- Measles/Rubella patient information form:EPID/151/1/2013 (Blue Form) to be sent to Epidemiology Unit for all clinical cases
- Maintain Measles/Rubella Register & CRS register in hospitals
- Weekly AFP,Measles,Rubella/CRS return (Sentinel site reporting) to Epidemiology Unit, & Monthly reporting By the Regional Epidemiologist to Epidemiology Unit
- Laboratory confirmation of all cases (Measles/Rubella IgM: serum samples to be collected and sent to the virology laboratory with the request; sample to be collected between 3rd to 28days of the onset of rash) & virus isolation of all possible cases: from Hospitals&from the field
- Special field level investigation of all patients by the Medical Officer of Health and send duly completed Special Investigation Form to Epidemiology Unit