

Measles: Key Information and Q&A with ISC-AB Medical Officers of Health

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Outline

- Measles: Current Status & Key Information
- COVID-19 Changes to Vaccination Eligibility/Approach
- Lessons Learned
- Interactive Questions & Answers
- Open Question Period

Measles is Returning

Measles spread trending down as Alberta kids head back to the classroom. Will it last?

Canada could lose its measles elimination status by the fall if the disease keeps spreading — here's what you need to know

Alberta's measles outbreaks surpass case counts reported for entire U.S.

Europe had worst measles outbreak since 1997 – new data

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LIVE VACCINE

How Canada became the centre of a measles outbreak in North America

What happened in 1997-98?

What happened in 1997-98?



Canada gained measles elimination status!

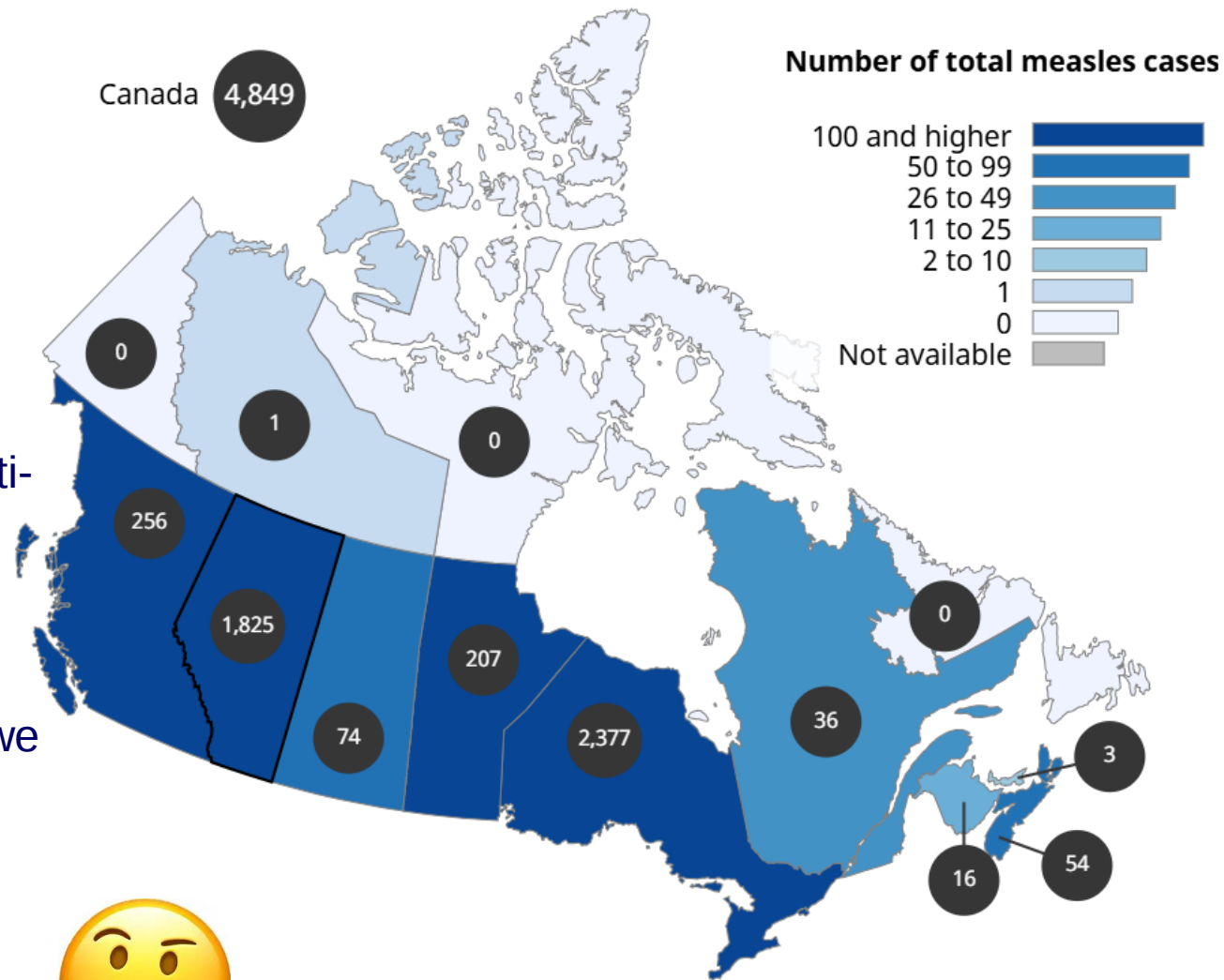
However, we are **at risk of losing this status** by
October.

This is due to **declining vaccination rates and
increased cases.**

**If measles keeps spreading, Canada may lose 30-
year elimination status: PHAC**

Measles Cases at a glance

- As of August 30, there were more than 4,849 cases in Canada.
- In the USA, there has been 1,454 cases. This is interesting! Consider:
 - Institutionalized anti-public health actions.
 - Does this mean Canada is more impacted? Or are we just finding most of our cases?



Top 10 countries with measles outbreaks

Country	Number of Cases
Yemen	20,622
Pakistan	13,582
India	10,688
Kyrgyzstan	8,125
Afghanistan	7,143
Ethiopia	4,974
Romania	4,058
Nigeria	5,870
Canada	3,621
Russian Federation	4,195

Source: World Health Organization

Updated public health risk assessment: Measles in Canada

- The **overall risk** of measles for the population in Canada remains **moderate**.
- The **likelihood of prolonged transmission** (up to mid-October 2025) is **high (low uncertainty)**, given that the outbreak continues to spread in communities with low immunity to measles across multiple provinces.
- Continued transmission places Canada at risk of losing its measles elimination status.

Alberta: Measles case numbers

- Visit [Measles | Alberta.ca](https://measles.alberta.ca) for most up-to-date numbers.

Table 1. Confirmed cases as of 12 pm, September 10, 2025

Geography	Cases since last update	Total cases reported since March 2025	Cases no longer communicable*	Cases currently known to be communicable (active)**
North	6	673	671	2
Edmonton	0	34	34	0
Central	0	118	118	0
Calgary	0	51	51	0
South	4	984	984	0
Alberta	10	1,860	1,858	2

Alberta: Measles cases by age group

- Visit [Measles | Alberta.ca](https://measles.alberta.ca) for most up-to-date numbers

Table 2. Cases by age group as of 12 pm, September 10, 2025

Age group	Count
<5 years	527
5 to 17 years	821
18 to 54 years	503
55 years and older	9
Total	1,860

Measles severity: hospitalizations, ICU admissions, deaths

Table 6. Cumulative counts of hospitalizations, ICU admissions and deaths among confirmed measles cases between January 1 and August 30, 2025

	Count
Cases	1,825
Hospitalizations	153
ICU Admissions	15
Death	0

- Counts are cumulative and not limited to those currently in hospital or ICU
- ICU admissions are included in the total count of hospitalizations
- Hospitalizations, ICU admissions and deaths are only included if the outcome was related to their measles infection.

Measles Outbreak prompts Standing Exposure Advisory for areas of North Zone

June 12, 2025

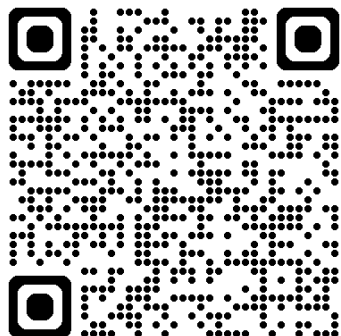
NORTH ZONE - Alberta Health Services (AHS) continues to manage a high number of measles cases within the North Zone, particularly in communities located in the northwest region, such as La Crete, Fort Vermilion and High Level. This includes cases in individuals with no known exposure source, suggesting underreporting and a broader potential risk of measles transmission across the region.

In response, AHS is issuing a standing measles exposure advisory for the following locations within the North Zone, effective immediately and until further notice:

- The Hamlet of La Crete
- St. Theresa General Hospital in Fort Vermilion
- Northwest Health Centre in High Level

This standing advisory replaces previously issued site-specific exposure notifications, which no longer reflect the full scope of potential measles risk in these areas and locations.

All individuals who live, work, attend school in, or are travelling to these areas are strongly advised to be aware of the increased risk for measles and to ensure their immunizations are up to date.



For general exposure information

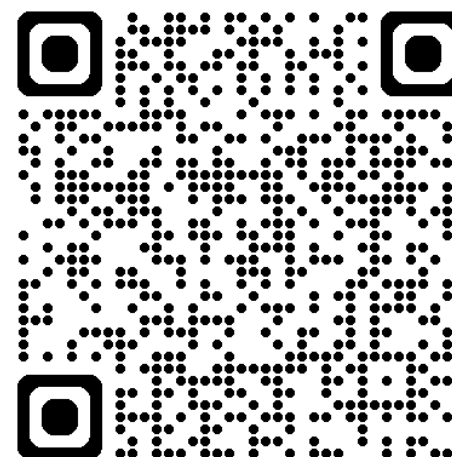


Figure 2a. Measles containing immunization doses administered by week and geography, 2023-2025 for Alberta

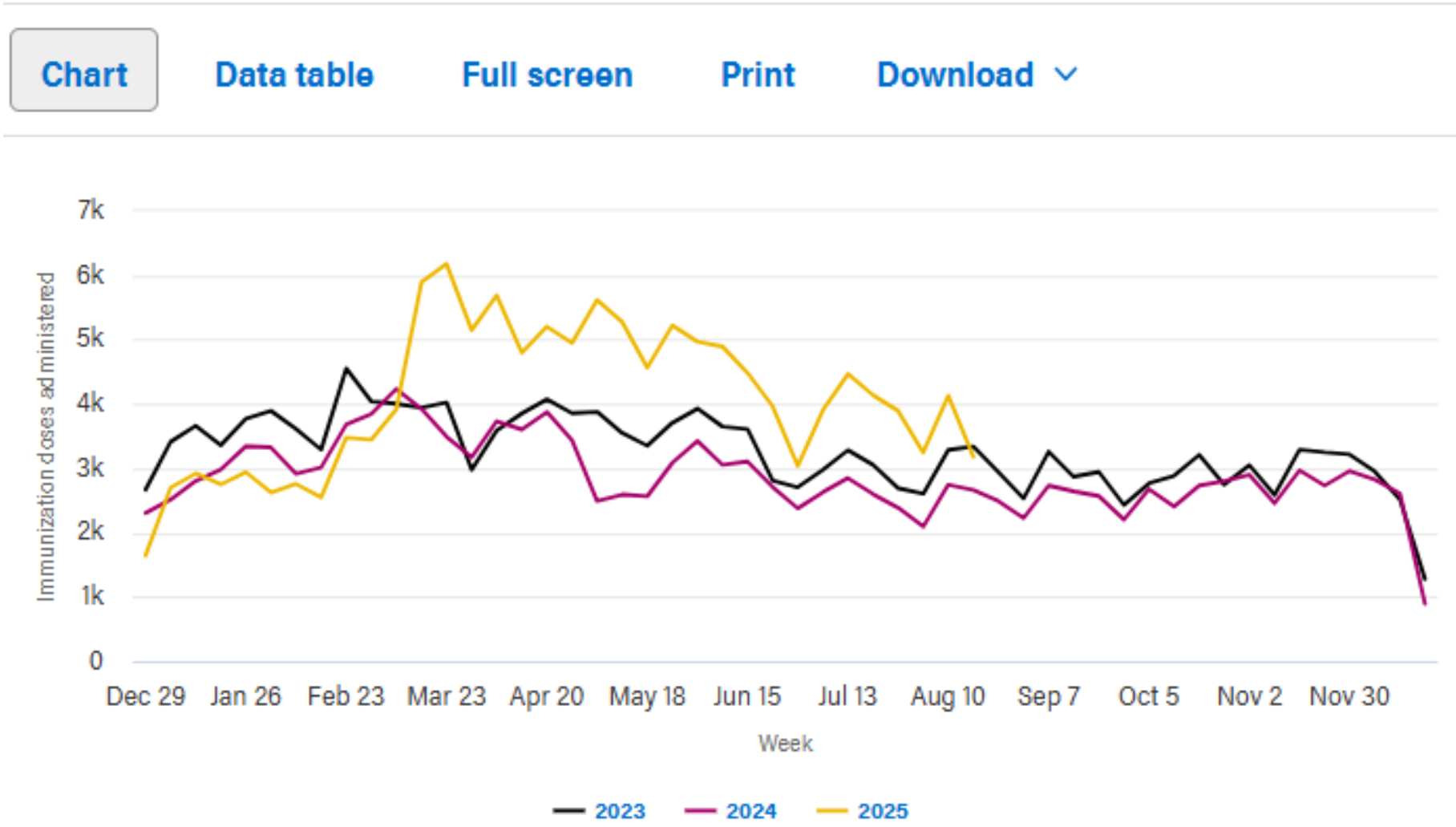
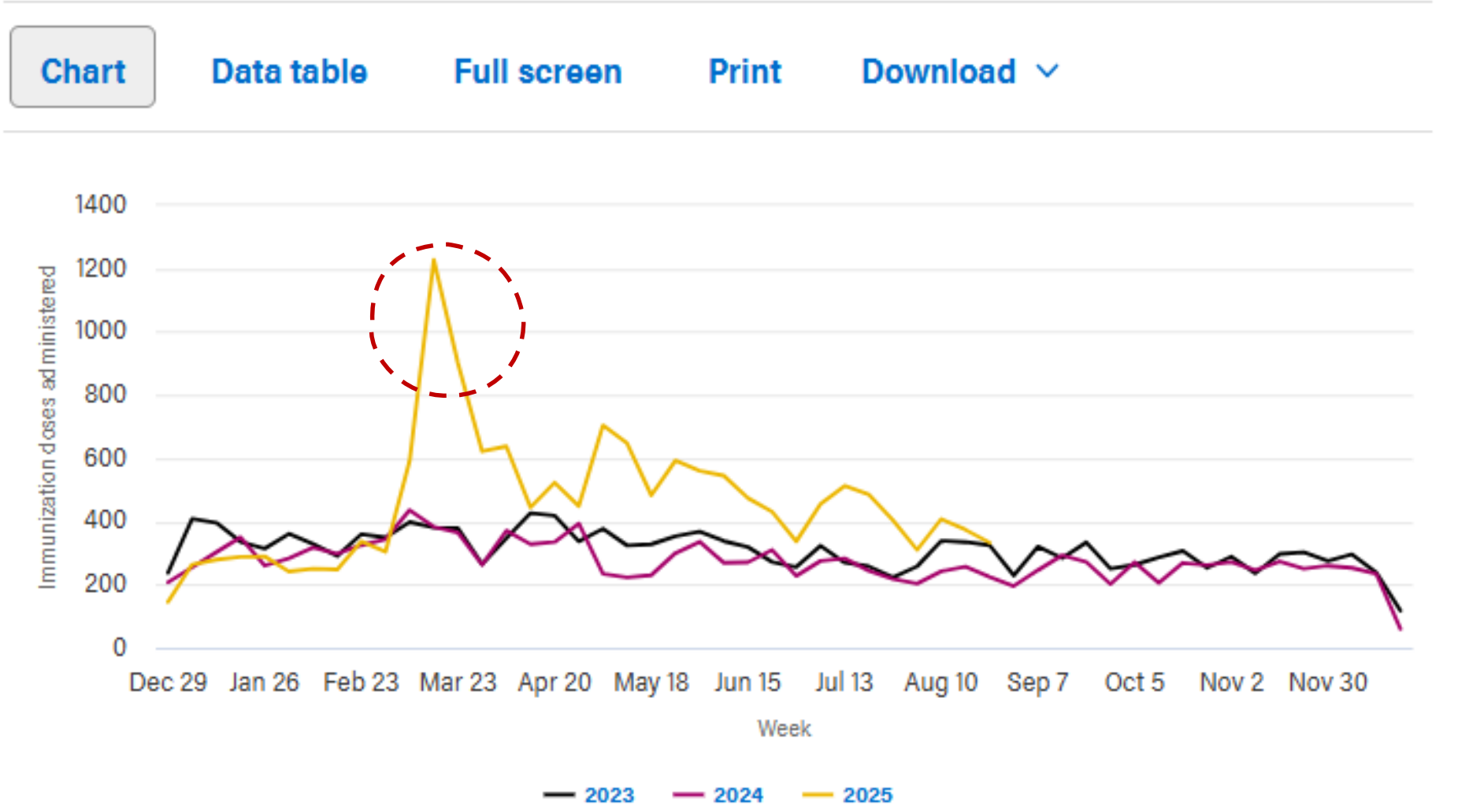


Figure 2e. Measles containing immunization doses administered by week and geography, 2023-2025 for North zone



Measles: Additional Key Information

Dr. Lauren Bilinsky, Deputy Medical Officer of Health, ISC-AB



Measles cases: First Nations living on-reserve

- As of September 9, there have been 24 cases in 4 Nations in 2025.
- There has only been one measles outbreak on reserve.
- It has been three weeks since a measles case was last identified.
- Multiple measles exposures, primarily in northwestern Alberta.
- Tremendous effort in communities to mitigate measles risk.

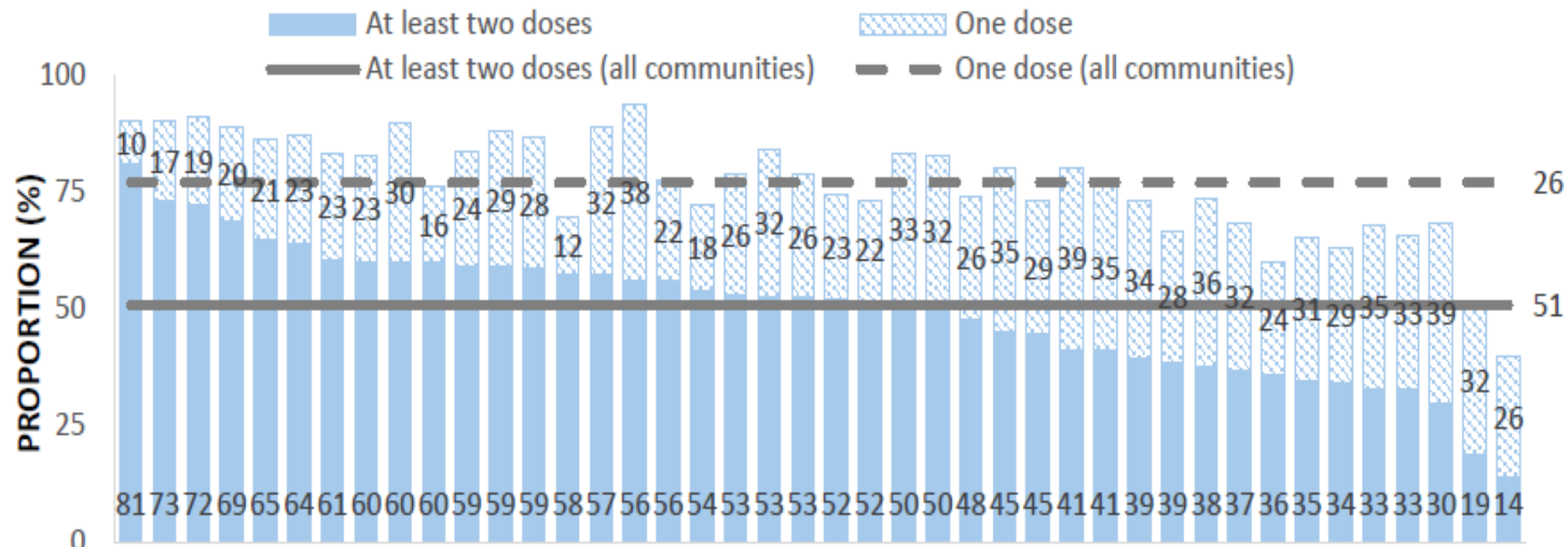
Measles cases: First Nations living on-reserve

Age group	Count
< 5 years	8
5-17 years	10
18-54 years	6
55 years and older	0
Total	24

Immunization status	Count
Unimmunized	17
1 or more dose(s)	7
Total	24

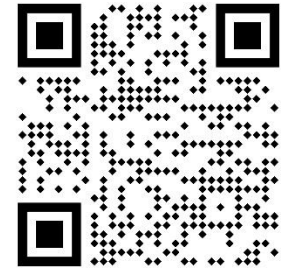
- 88% of First Nations cases were in people who were **unimmunized or under-immunized**.
- 75% of all First Nations cases were in **children** and 25% in people **over the age of 18**.
- There have been no measles cases in First Nations people over 55 years old.

Immunization doses administered for measles by community among 1-5 years



Measles symptoms

- **First symptoms:** Fever, cough, red eyes, runny nose
- **Rash:** Starts about three days after other symptoms
 - Flat red/purple area with small bumps (or appears purple or darker than the surrounding skin in darker skin tones)
 - Not itchy
 - Begins on the face behind the ears
 - Within 24 to 36 hours, it spreads over the trunk and extremities (including palms and soles)



Measles Images



Complications Of Measles

- Ear infections, diarrhea, and pneumonia are the most common complications.
- Ten to 20% of people who get measles need hospital care.
- Measles weakens the immune system and puts people at risk of other infections. The immune system can take years to recover.
- About 1 in 1000 cases experience brain inflammation, which can lead to blindness, hearing loss, brain damage, or other serious problems.
- About 1 to 3 in 1000 cases are fatal.
- Rare fatal late-onset brain disease several years after infection.

Focus for the Fall

- Nations have received updated measles immunization reports.
- Updated back-to-school letters has been shared with school staff and parents.
- Supporting nurses with vaccination catch-up.
- Monitoring the prevalence of measles closely, will continue to respond swiftly to any cases in community/schools.

COVID-19 Vaccination: Changes to Eligibility & Provincial Approach

Dr. Lauren Bilinsky, Deputy Medical Officer of Health, ISC-AB



COVID-19 Vaccination: Changes to Eligibility and Provincial Approach

- Province is supplying COVID-19 vaccines to First Nation health centres. Health centres can order vaccine when the AVI ordering system is open.
- Alberta Primary Care vaccine clinics will be charging individuals who are not eligible for free vaccine a \$100 administration fee.
- Eligibility criteria includes multiple medical conditions and health care workers.
- Most First Nations will likely be eligible for free vaccine.
- For the few instances where someone might not meet the provincial criteria for free vaccine, ISC MOHs have heard from Nation staff and Leadership that it is not feasible or acceptable to charge individuals a fee in health centres.

Lessons Learned

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Close Contact Analysis

Analysis: Contacts born in 1970 or later by immunization status at time of exposure to measles and contact type

	Total Contacts born in 1970 or later	Contacts that became a case	Proportion who became a case
Unimmunized	50	11	22.0%
1 dose	45	3	6.7%
2 or more doses	128	2	1.6%
Unknown	1	1	100%
Null dose	2	0	0%
Total	226*	17	7.5%

Lesson Learned:
Vaccine has a strong
protective effect

Close Contact Analysis

Analysis: Unimmunized contacts by case type

	Total Contacts	Contacts that became a case	Proportion who became a case
Unimmunized -PEP (IMlg) received	12	0	0%
Unimmunized -born before 1970	16	0	0%
Unimmunized- born after 1970 with no PEP(IMlg)	38	11	29%
Total	66	11	16.7%

Lesson Learned:

**IMIG is an important tool
to protect those that can't
be immunized**

Null Doses

- A null dose is an extra dose of measles-containing vaccine for infants
- Infants 6 months up to and including 11 months of age living in [Central, North and South Zones](#) are eligible currently
- Early protection for babies aged 6-12 months (higher risk age) is key
- Null doses can also help prevent the need to provide Intramuscular immunoglobulin

Lesson Learned:
Receiving a null dose can
help an infant avoid
isolating for 21 days

Measles Risk in Healthcare Settings

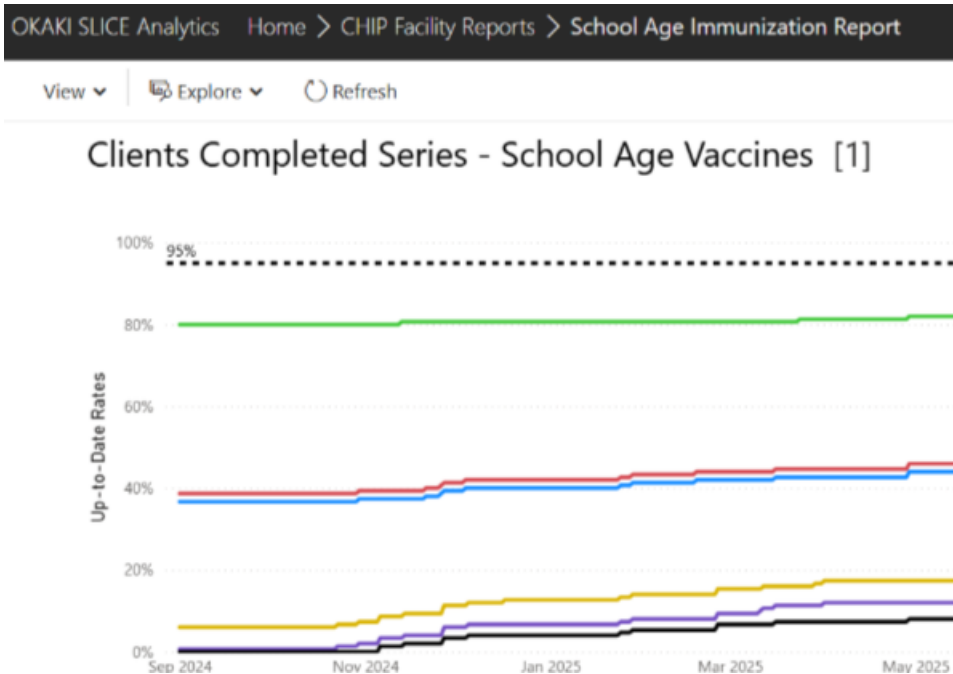
- We are aware that some individuals are avoiding seeking medical attention at certain hospitals due to fear of contracting measles.
- When seeking medical care, there are additional ways you can protect yourself, such as:
 - Limit the number of visitors/supports you bring with you when you seek medical care,
 - Stay up to date on vaccinations,
 - Follow the infection protection advice of your local healthcare setting,
 - Wear a mask,
 - Wash your hands often.

Lesson Learned:

**Seek medical attention
when you need it!**

**There are many ways to protect
yourself from measles.**

Electronic Records



↑

This is a random example of a School Age immunization report within SLICE, but you can access other ages using the Search Tool Window in CHIP.

- CHIP is an electronic health record platform designed for community health, communicable disease control and immunization services in First Nations, Metis and Inuit communities.
- For Nurses, you can use CHIP to access up-to-date immunization rates.
- There are How-To resources available on OneHealth.
- For support, contact helpdesk@okaki.com.

Lesson Learned: Electronic records promote accurate care!

- When someone's full immunization history is in CHIP and uploaded to Netcare it has helped people receive accurate care when they present to ER
- Can help promote accurate diagnosis
- Immunization history can lead to avoiding isolation and unnecessary immunoglobulin

Questions & Answers

From ISC-AB Medical Officers of Health



Please scan to participate in the Q&A with Mentimeter!

