## Abstract

# Analysis of the Occurrence of Measles in Korea, 2019 

Choi Siwon, Cho Eun Hee

Division of VPD control \& NIP, Center for Infectious Disease Surveillance \& Response, KCDC
Shin Na-Ri
Division of Resource Management, Center for Public Health Emergency Preparedness and Response, KCDC

Measles is a highly contagious infectious disease caused by the measles virus within the family Paramixoviridae manifesting as a febrile rash illness.

Korea became certified as measles-eliminated by the World Health Organization-Western Pacific Regional Office (WPRO) in March 2014. The country manages measles cases and contacts promptly, maintains high childhood immunization coverage and conducts disease surveillance. Nevertheless, imported individual cases and small outbreaks in medical institutions have occurred.

This report aimed to serve as basic data for the prevention and management of measles by identifying the status and epidemiological characteristics of measles in Korea in 2019.

A total of 194 measles cases were reported in 2019. Seventy-seven percent of the total cases in 2019 occurred from January to April. Among them, 190 cases ( $97.9 \%$ ) were classified as imported or import-related. Twelve outbreaks (105 persons) were included, eight outbreaks ( 42 persons) transmitted by an index case with international travel history and four outbreaks (63 persons) of which genetic types were import-related. Eighty-nine cases were sporadic cases, 77 cases were imported ( $86.5 \%$ ) and eight cases were import related (9.0\%).

Fifty-four cases (27.8\%) were females in their 20s which accounted for the highest proportion compared to other age groups and gender, and $21.6 \%$ of the measles cases were non-Koreans. Twelve (6.2\%) measles cases had a history of more than two doses of MMR vaccination. Seven outbreaks (73 cases) were associated with nosocomial infections.
As indicated, this report found that the measles cases reported in 2019 were imported or import-related. Therefore, it is important to strengthen monitoring at the quarantine stage and promote MMR vaccination for travelers from Korea to countries with active measles transmission. Also, community infection control measures need to take place through prompt response to community cases by early recognition, patient isolation and contact management, and prevention efforts in medical institutions. The high number of measles susceptible people in a community can increase the chance of measles prevalence. Therefore, high immunization coverage should be maintained through conducting national immunization programs for children and the school entry requirement program for preschool aged children.

Keywords: Measles, Outbreak, Sporadic cases, KCDC, Surveillance, Vaccination
Table 1. Number of outbreak-associated and sporadic measles cases in 2019

|  | Overall | Outbreak-associated cases by region |  |  |  |  |  |  |  |  |  |  |  |  | Sporadic cases |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | Total | Daegu | Gyeonggi <br> (Ansan) | Gyeonggi (Uijeongbu) | Incheon | Gyeongbuk (Gyeongsan) | Gyeonggi (Anyang) | Daejeon | Seoul | Jeonnam (Jangseong) | Jeonnam (Muan) | Daegu (Dalseo) | Gyeongbuk (Gimcheon) |  |
| Number of cases | 194 | 105 | 13 | 22 | 4 | 3 | 4 | 26 | 20 | 3 | 3 | 2 | 3 | 2 | 89 |
| Clinically compatible (Import-related) | 1 | 1 | - | 1 | - | - | - | - | - | - | - | - | - | - | - |
| Confirmed (Imported) | 86 | 9 | - | - | 1 | 2 | 1 | - | 1 | 1 | 1 | - | 1 | 1 | 77 |
| Confirmed (Import-related) | 103 | 95 | 13 | 21 | 3 | 1 | 3 | 26 | 19 | 2 | 2 | 2 | 2 | 1 | 8 |
| Confirmed (Unknown) | 4 | - | - | - | - | - | - | - | - | - | - | - | - | - | 4 |



Figure 1. Number of outbreak-associated and sporadic measles cases by month in 2019


Figure 2. Number of reported outbreak-associated and sporadic measles cases by province

Table 2. Demographic characteristics of measles cases
Unit: no. (\%)

|  |  | Total | Female | Male |
| :---: | :---: | :---: | :---: | :---: |
|  | Total | 194 (100.0) | 110 (56.7) | 84 (43.3) |
| Age group | < 9Y | 48 (24.7) | 27 | 21 |
|  | 0-11M | 28 (14.5) | 18 | 10 |
|  | 12M-3Y | 18 (9.3) | 8 | 10 |
|  | 4-9Y | 2 (1.0) | 1 | 1 |
|  | 10-19Y | 12 (6.2) | 5 | 7 |
|  | 20-29Y | 82 (42.3) | 54 | 28 |
|  | 30-39Y | 38 (19.6) | 20 | 18 |
|  | 40-49Y | 11 (5.7) | 3 | 8 |
|  | 50-59Y | 3 (1.5) | 1 | 2 |
| Nationality | Koreans | 152 (78.4) | 90 (46.4) | 62 (32.0) |
|  | Non-Koreans | 42 (21.6) | 20 (10.3) | 22 (11.3) |

Table 3. Number of non-Korean measles cases by nationality

| Nationality | Total | Vietnam | USA | Thailand | Uzbekistan | Philippines | Madagascar | Algeria | Ukraine | China | Kazakhstan | Cambodia |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| No. of cases (persons) | 42 | 18 | 6 | 6 | 4 | 2 | 1 | 1 | 1 | 1 | 1 | 1 |



Figure 3. Percentage of manifested clinical symptoms of reported measles cases


Figure 4. Number of measles cases by age group and history of MMR vaccination
Table 4. Number of measles cases by infection site


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Table 5. Number of measles cases by country visited

| Unit: no (\%) |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Country visited | Total | Vietnam | Philippines | Thailand | Uzbekistan | Ukraine | Singapore | Cambodia | Europe | Taiwan | Madagascar | Kyrgyzstan |
| No. of cases (\%) | $\begin{gathered} 86 \\ (100.0) \end{gathered}$ | $\begin{gathered} 47 \\ (54.6) \end{gathered}$ | $\begin{gathered} 16 \\ (18.6) \end{gathered}$ | $\begin{gathered} 10 \\ (11.6) \end{gathered}$ | $\begin{gathered} 2 \\ (2.3) \end{gathered}$ | $\begin{gathered} 2 \\ (2.3) \end{gathered}$ | $\begin{gathered} 2 \\ (2.3) \end{gathered}$ | $\begin{gathered} 2 \\ (2.3) \end{gathered}$ | $\begin{gathered} 2 \\ (2.3) \end{gathered}$ | $\begin{gathered} 1 \\ (1.1) \end{gathered}$ | $\begin{gathered} 1 \\ (1.1) \end{gathered}$ | $\begin{gathered} 1 \\ (1.1) \end{gathered}$ |

