

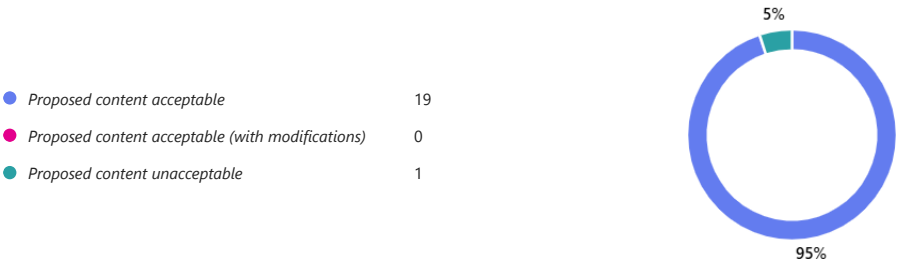
Responses Overview Active

Responses

20

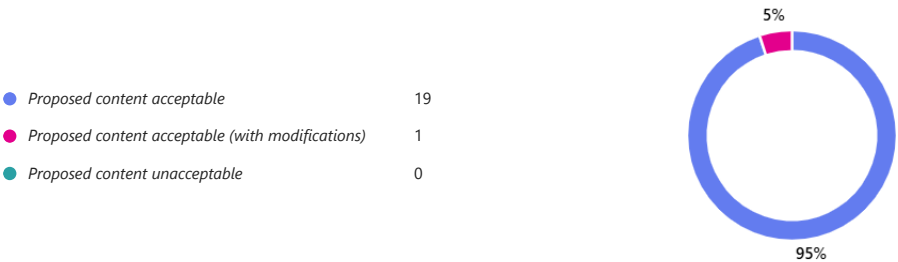
1. **UPDATED Content**

Section 1.1 Measles vaccine effectiveness
Updated content adopted from NIAC guidelines. Refer to Working draft Section 1.1 Measles vaccine effectiveness to review updated content.



2. **UPDATED Content**

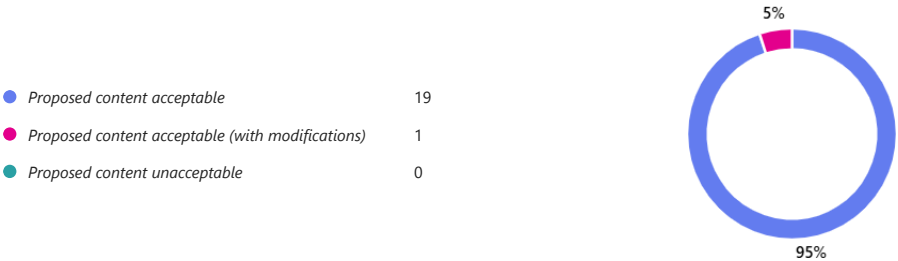
Section 2.0 Rationale for public health action
Content updated in this section incorporating material from HPSC website and measles interim report to reflect process in Ireland. Refer to [Working draft 2.0 Rationale for public health action](#) to review updated content.



3. **NEW Content**

"In the absence of a rash the period of infectiousness should be taken from 24 hours before reported prodromal symptom onset". Refer to Working draft [3.1 Epidemiological parameters](#)

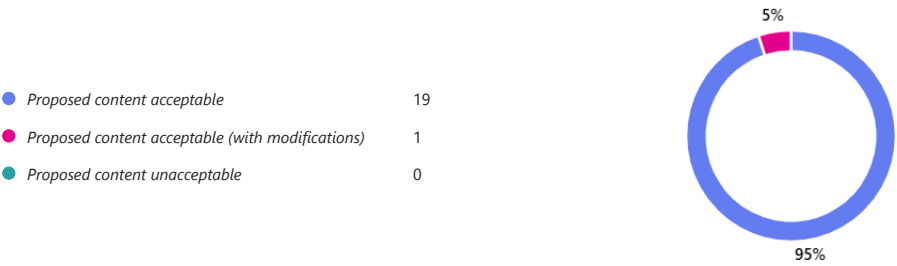
Rationale: Adopted from *The Communicable Diseases Network Australia* - "Cases are considered to be infectious from 24hours prior to onset of prodromal symptoms until 4 days after the onset of rash."



4. NEW Content

"Immunosuppressed individuals may be infectious for longer and may not display typical symptoms, and so timings should be adjusted as appropriate in consultation with clinicians managing the case's immunosuppression" Refer to Working draft [3.1 Epidemiological parameters](#)

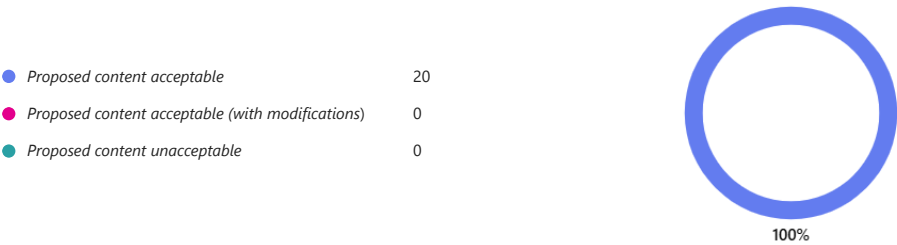
Rationale: Adopted from section in Chapter 2 UKHSA National Measles guidelines, 2.1.3 Exclusion of the index case.



5. Updated content

"Section 3.3 on Complications of primary measles infection.

Updated content adopted from NIAC guidelines ((SSPE information from the NIAC guidelines Measles chapter). Refer to [Working draft 3.3 Complications of primary measles infection](#) to review updated content.



6. Updated content

Section 3.4 on Transmission of primary Measles.

Updated content adopted from NIAC guidelines Chapter section 12.6. Refer to Working draft [3.4 Transmission of Primary Measles](#) to review updated content.

