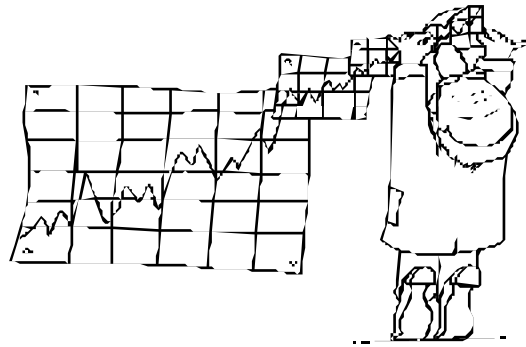




health

Department:
Health
REPUBLIC OF SOUTH AFRICA



STATISTICAL NOTES

October 2005

Welcome to this edition of Statistical Notes!

This month's focus is Measles

1. Measles-Global View

Measles, also called **rubeola**, is one of the most infectious, highly contagious viral diseases known to man and remains the leading cause of vaccine preventable deaths in children worldwide. It accounts for about 875 000 deaths a year, this represents 50-60% of the estimated 1.6 million deaths attributed to vaccine-preventable diseases of childhood (1). Of the deaths attributed to measles, 98% occur in developing countries. Case fatality rates in these countries are estimated to be in the range of 1-5% but may reach 10-30% in some situations (2).

2. Measles in South Africa

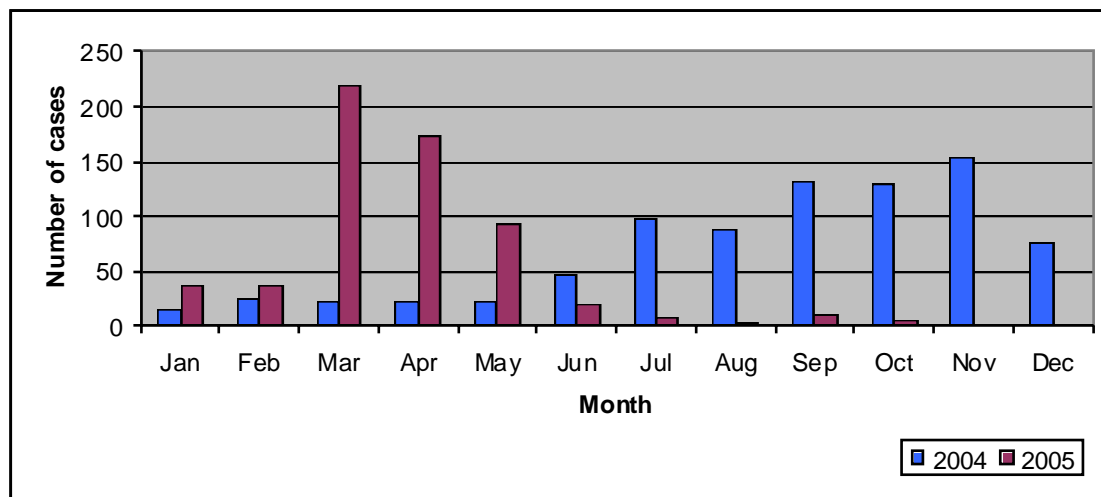
Measles has been a notifiable disease in South Africa since 1979. During the 1980's, 15 000 to 20 000 measles cases and 250 to 500 deaths reported each year. During the 1990's, measles remained endemic and epidemics continued to occur periodically, but the case fatality ratio decreased sharply at the beginning of the decade (3). Since 1995, seven southern African nations including South Africa, have launched measles elimination initiatives in accordance with the

recommendations of the World Health Organization (WHO) Regional Office for Africa.

3. Distribution by month

There was a small decline in the number of measles cases reported this year (608) than in 2004 (830). The bulk of the cases for 2005 occurred between March and May (Figure. 1).

Figure 1. : Notified measles cases by month, South Africa, 2004 – October 2005

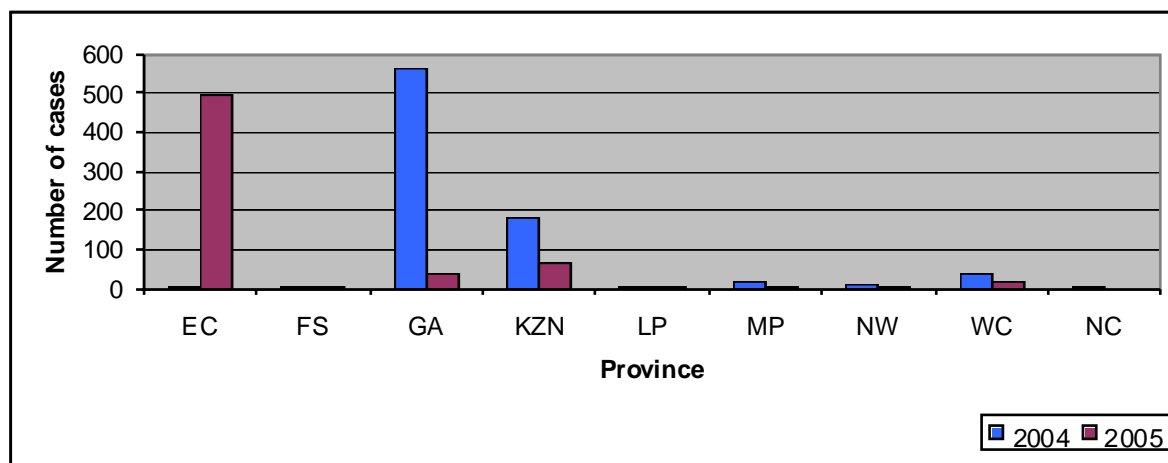


Source: Epidemiology and Surveillance Directorate, NDOH

4. Distribution by province

Ten children died in an outbreak of measles in the Eastern Cape in March/April 2005. A total of 496 cases were reported and the districts that were mostly affected were O Tambo and Amatole (Figure 3). Gauteng on the other hand, saw a considerable drop in the number of cases reported this year than last year (cases dropped from 566 to 35) Free State and North West reported the least number of cases accounting for only 0.2% of all reported cases (Figure 2).

Figure 2.: Notified measles cases by province, South Africa, 2004 – October 2005



Source: Epidemiology and Surveillance Directorate, NDOH

Table 1: Notified measles cases by district, Eastern Cape, March/April 2005

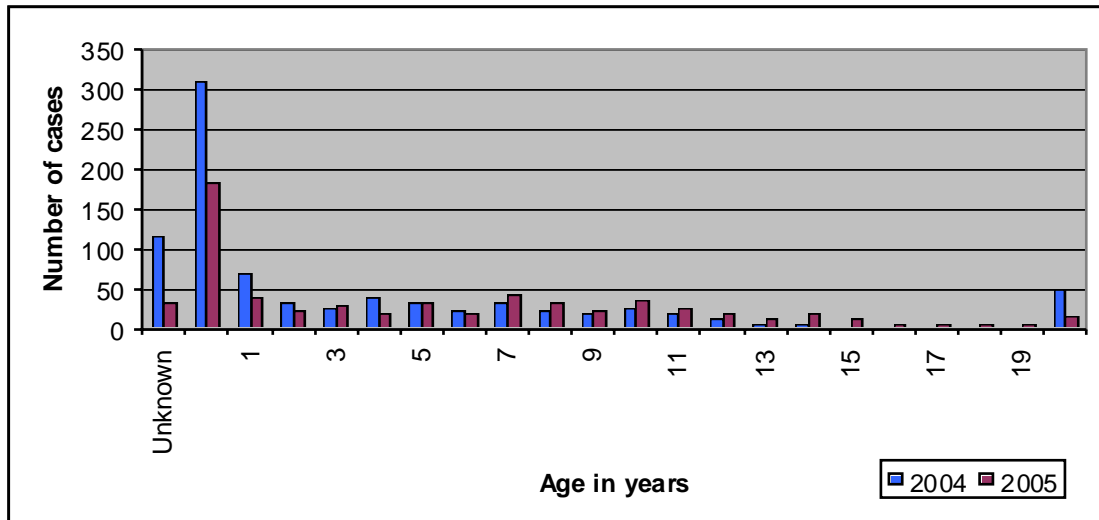
District	Number of cases
Alfred Nzo	4
Amatole	139
Chris Hani	4
Oliver Tabmo	348
Ukhahlamba	1
Total	496

Source: Epidemiology and Surveillance Directorate, NDOH

Distributing by age group

The highest prevalence of measles for both 2004 and 2005 was seen among children less than one year, the prevalence diminished with increasing age. The ages of the majority of the cases were not known (Figure 4).

Figure 4.: Notified measles cases by age, South Africa, 2004 - October 2005



Source: Epidemiology and Surveillance Directorate, NDOH

References

1. The World Health Report 1999: Making a difference. Geneva, World Health Organization, 1999.
2. Guidelines for epidemic preparedness and response to measles outbreaks. Geneva, World Health Organization, 1999.
3. Uzicanin, A, Eggers, R., Webb, E., Harris, B., Durrhei, D., Ogunbanjo, G., Isaacs, V., Hawkrige, A, Beillik, R. and Strebel, Peter (2002). Impact of the 1996-1997 supplementary measles vaccination campaigns in South Africa. *International Journal of Epidemiology*, **31**: 968-976.1

