



## **2006 World Soccer Cup in Germany and Risk of Measles Virus Importation into the Americas**

Recent measles outbreaks have been reported in several European countries: Denmark, Germany, Greece, Spain, Sweden, and Ukraine. Since January 2006, the German region of North Rhine-Westphalia has reported 1,106 cases.\* This is the largest measles outbreak recorded in Germany since mandatory notification was introduced in 2001. <sup>(1,2)</sup>

Three cities located in the region of North Rhine-Westphalia (Cologne, Dortmund, and Gelsenkirchen) will be hosting soccer games of the 2006 World Cup. Six of the eight teams representing countries of the Americas are scheduled to play in Dortmund and Gelsenkirchen. Both cities as well as Cologne will also host games in further World Cup rounds. Recent media reports quote a representative of the *Robert Koch Institute*, the federal institution responsible for disease control and prevention in Germany, appealing to soccer fans around the world to get vaccinated before traveling to Germany.

There is a real possibility that residents of the Americas traveling to Germany will be exposed to measles virus. The Pan American Health Organization recommends that every country in the Region adopt the following measures to prevent importation of measles virus to the Americas from overseas:

1. Any resident of the Americas traveling outside the Western Hemisphere should be immune to measles **before** departure; and
2. Health care workers in the **public and private** sectors should be alerted to the possibility of measles importations.

Travelers can be considered immune to measles if:

- They have **written proof of receipt of a measles-containing vaccine** (preferably two doses, the first received after the first birthday and the second dose at least four weeks later). However, countries should establish an upper age limit beyond which the vacci-

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\* Data as of 10 May.



nation requirement does not apply. This age limit should be based on the year of measles vaccine introduction, measles vaccine coverage thereafter, and occurrence of measles epidemics.

- They have **laboratory evidence of measles immunity** (measles-specific IgG antibodies).

Travelers (over the age of 6 months) who cannot provide the above documents should be advised to receive measles-containing vaccines, preferably as measles-mumps-rubella (MMR) or measles-rubella (MR), ideally at least two weeks **before** departure. Exceptions include travelers with medical contraindications to measles-containing vaccines, such as severe immunosuppression and pregnancy. Infants aged less than 6 months should not be vaccinated. Infants who receive MMR before their first birthday must be re-vaccinated following the country's schedule.

The importance of **including the private health care sector and facilities providing health care to tourists in the surveillance system** needs to be emphasized. In many countries, people who can afford intercontinental travel are more likely to seek care in private health facilities.

In addition to the measures mentioned above, **proof of measles immunity should be a requirement for employment in the health care sector** (medical, administrative, and security personnel alike). It is further advised that personnel from the tourism and transportation industries be also immune to measles.

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#### **References:**

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- 2) van Treeck, U van (2006). Measles outbreak in Germany: over 1000 cases now reported in Nordrhein Westfalen. Available online at: <http://www.eurosurveillance.org/ew/2006/060511.asp#1>. Euro Surveillance 2006;11(5):E060511.1. Last accessed on 22 May 2006.
- 3) United States Centers for Disease Control and Prevention website: [http://www.cdc.gov/travel/other/measles\\_intl\\_travel\\_2005.htm](http://www.cdc.gov/travel/other/measles_intl_travel_2005.htm). Last accessed on 23 May 2006.
- 4) PAHO (Pan American Health Organization). Measles/Rubella Weekly Bull 2006;12(19). Available online at: <http://www.paho.org/English/AD/FCH/IM/sme1219.pdf>. Last accessed on 24 May 2006.