

Event	For Awareness. Measles case confirmed in Auckland with links to international travel
Notified by	Clinical Team, Protection, NPHS.
Authorised by	Dr Susan Jack, National Clinical Director, Protection, NPHS.
To	Emergency Departments, Primary Care providers, Urgent Care providers, Chief Medical Officers, Hospital Specialists, After-Hours Centres, Pharmacists, regional Infection Prevention and Control teams, regional Occupational Health teams, HealthPathways, Healthline, Ka Ora, Healthify, NPHS national and regional services, Medical Officers of Health, regional Comms Leads including Hauora Māori & Pacific Health, Office of the Director of Public Health (Manatū Hauora).

Please share this public health advisory with your kaimahi networks for their information.

Public health advisory – Measles case confirmed in Auckland with links to international travel

Summary

A measles case identified in Auckland on 10 May 2025 had recently returned from Southeast Asia, where there have been ongoing outbreaks of measles. While infectious, the case (who is an Auckland Fullers360 ferry crew member) travelled on a number of Auckland Fullers360 ferries and visited a Woolworths supermarket in Kelston and other locations [see [here](#) for a list of locations of interest]. The National Public Health Service (NPHS) is working at pace to trace contacts and identify any further locations of interest.

While this process continues, we urge all healthcare professionals to please remain vigilant for people presenting with measles symptoms and to take precautions – particularly if seeing anyone who may have travelled overseas recently. Please also continue to encourage or offer vaccinations for anyone who may not be immune, including those born between 1969 and 2004 (now aged between 21 and 56 years) who may have only ever received one Measles Mumps and Rubella (MMR) vaccine dose, as well as anyone intending to travel internationally.

Aotearoa New Zealand remains at high risk from measles

- Aotearoa continues to remain at high risk from measles because our current childhood MMR immunisation rates are well below the 95% population coverage required to provide enough immunity within communities to prevent an outbreak. Of great concern, is that current immunisation rates are substantially lower than what they were during our last major outbreak in 2019.

- There continues to be significant immunity gaps in older children and adults. As travel in and out of Aotearoa continues, measles can enter Aotearoa at any time, as it has with this current case.
- Measles cases have continued to increase globally. High-risk countries for measles currently include Australia, the United States, Canada, the United Kingdom, Vietnam, Thailand and India. People travelling to these countries and others, if not fully protected, are at high risk of catching measles and bringing it back to our shores.

Key messages for healthcare professionals

- Have a high index of suspicion for measles in anyone presenting with measles-like symptoms – including those presenting within 21 days of international travel, particularly if they are unvaccinated or are uncertain if they are fully vaccinated.
- Notify your local public health service immediately of all suspected cases – do not wait for test results. Early notification increases our ability to prevent an outbreak. Please check your local [HealthPathways](#) page for details.
- Do not send suspected measles cases to a laboratory collection site for a PCR swab to diagnose measles or for other tests to rule out other causes of their symptoms. These must be completed by the health care provider assessing the patient.
- Advise all suspected cases to isolate at home until their PCR result is known. If they need to access healthcare while waiting for their result, they should be advised to phone ahead and wear a mask.
- Promote MMR vaccination to all staff and patients and advise those who are not immune or have uncertain vaccination status to get immunised.
- Advise parents that babies from 4-12 months old can receive an early dose of the MMR vaccine ([MMR0](#)) before overseas travel which will provide temporary protection until they complete their MMR vaccinations at ages 12 and 15 months old according to the usual schedule. Please note that MMR0 given as a travel vaccine consultation is unfunded and there may be a charge associated with this.
- Continue to focus on delivering on-time MMR vaccination of children aged <2 years and any other children who have missed out on MMR.
- Vaccinations are recommended for those born between 1969 and 2004 (now aged between 21 and 56 years-old) who may not be fully immune.

Key actions for healthcare professionals**Identify**

- Measles symptoms include fever, cough, runny nose, conjunctivitis and rash (fever must be present at time of rash onset). See [Measles | Info.Health](#) and [Measles | Healthify](#) for more information.

- Consider measles in anyone presenting with measles-like symptoms, particularly if they have had recent overseas travel or contact with unwell overseas visitors.

Isolate

- Ensure patients presenting with fever and rash are provided a mask and immediately isolated in a room away from other patients. Keep the door closed.
- Ensure all staff who enter the room are immune to measles and wearing a seal checked N95/P2 face mask.
- After the consultation, leave the room vacant with the door closed and windows open where possible for at least an hour (or timeframe directed by the local Infection Prevention and Control team).

Communicate

- Notify suspected cases of measles to your local Medical Officer of Health (MOoH).
- Discuss patients with a high index of suspicion with the MOoH – this will enable public health services to do a rapid risk assessment to determine if immediate action is required to prevent an outbreak.
- See here for [contact details for local public health services](#) and visit your local HealthPathways for local notification processes.

Test

- Test all suspected cases of measles using a nasopharyngeal or throat swab for PCR. If you are unsure how to take samples safely, visit [Health Pathways](#) for guidance.
- Do not send patients to laboratory collection centres for any other tests if they are showing symptoms consistent with measles infection (fever, rash, with cough/runny nose/conjunctivitis).
- Do not take a measles serology sample for suspected cases unless specifically advised by the MOoH.
- Ensure you include relevant clinical details, travel history, the date of rash onset and known measles vaccination history on the laboratory request form.
- Inform patients they will receive a phone call from the NPHS if their swab tests positive for measles.

Prevent

- Offer MMR to anyone without confirmed immunity to measles (if no contraindications). There are no concerns with receiving MMR if already immune.
- MMR vaccination is free for anyone under 18 years, and adults aged 18 and older who are eligible for free New Zealand healthcare. It is also currently free for Recognised Seasonal Employer workers.
- See the [Immunisation Handbook - Measles](#), [checking measles immunity](#) and [Immunisation Advisory Centre - Measles resources](#) pages for more information.

Further information

- [Health Pathways](#)
- [Measles | Info.Health](#)
- [Measles | Healthify](#)
- Immunisation Advisory Centre – [Measles Resources](#)
- Downloadable immunisation collateral for providers about measles is available from the following sources:
 - [Dropbox – National Immunisation Programme – vaccine resources](#)
 - [HealthEd](#)
 - [Bluestar portal](#)