Measles and rubella elimination country profile
Czech Republic

Measles elimination status

2016 eliminated
2017 eliminated ✓

Source:European Regional Verification Commission for Measles and Rubella Elimination (RVC)
meeting report: www.euro.who.int/7thrvc

Rubella elimination status

2016 eliminated
2017 eliminated ✓

Source:European Regional Verification Commission for Measles and Rubella Elimination (RVC)
meeting report: www.euro.who.int/7thrvc

Measles and rubella surveillance

National case-based surveillance for measles, rubella and CRS

Lab confirmation for diagnosis of measles, rubella and CRS

Source: WHO/UNICEF Joint Reporting Form on Immunization, 2017

Demographic information, 2017

Total population	10 618 303
< 1 year old	100 914
< 5 years old	529 114

Source: World Population Prospects: The 2017 Revision, New York, United Nations

Measles and rubella immunization schedule, 2017

	Vaccine	Schedule	Year of introduction	
MCV1	MMR	15 months	MCV2	1975
MCV2	MMR	5 years	RCV	1982
Measles vaccination in school			No	

Source: Immunization schedule, WHO, Data and Statistics, Immunization Monitoring and Surveillance
(http://www.who.int/immunization/monitoring_surveillance/data/en/)
MMR = measles-mumps-rubella vaccine; MCV1 = first dose measles-containing vaccine;
MCV2 = second dose measles-containing vaccine; RCV = rubella-containing vaccine

Definition used for an outbreak

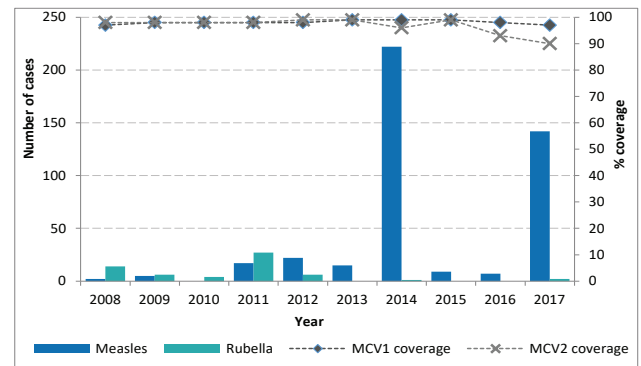At least two measles or rubella cases including cases with epidemiological links

Source: Measles and rubella elimination Annual Status Update report, 2017

Measles and rubella cases and immunization coverage, 2008–2017
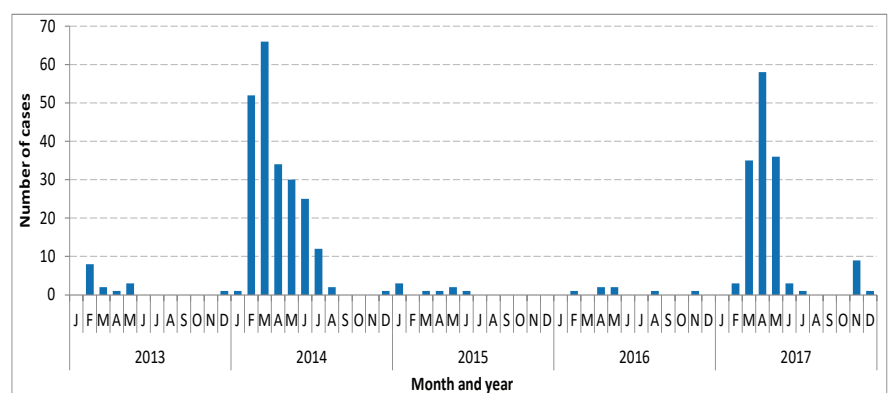

Source: Disease incidence and immunization coverage (WUENIC), WHO, Data and Statistics,
Immunization Monitoring and Surveillance
(http://www.who.int/immunization/monitoring_surveillance/data/en/)
MCV1 = first dose of measles-containing vaccine
MCV2= second dose of measles-containing vaccine

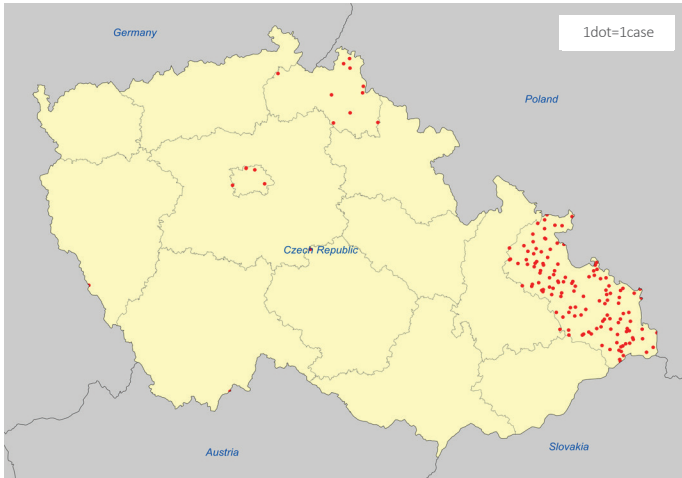## Confirmed measles cases by month of onset, 2013-2017

Source: CISID 2017

World Health Organization
REGIONAL OFFICE FOR **Europe**

Measles cases by first subnational level, 2017

1dot=1case

Germany
Poland
Czech Republic
Austria
Slovakia

Source: Measles and rubella elimination Annual Status Update report, 2017

Measles genotypes by first subnational level, 2017

● B3
● D8
● H1
● D4

Germany
Poland
Czech Republic
Austria
Slovakia
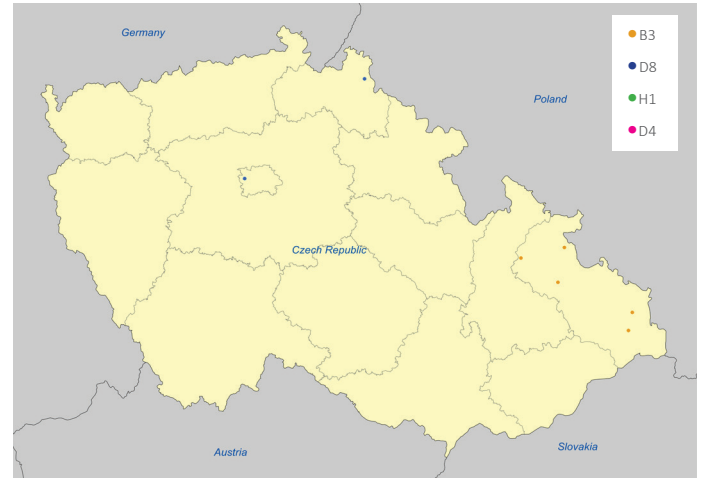
Source: MeaNS 2017

Note: The dots in the maps are placed randomly within the administrative regions.
Map disclaimer: The boundaries and names shown and the designations used on the maps do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Measles cases by age group and vaccination status, 2017

% of cases (y-axis: 0, 20, 40, 60, 80, 100)

Age group (years): < 1, 1-4, 5-9, 10-14, 15-19, 20-29, 30 +

■ 0 doses ■ 1 dose ■ 2 or more doses ■ Unknown
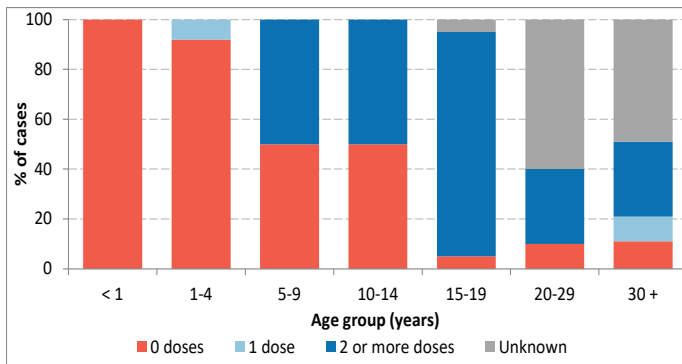
Source: Measles and rubella elimination Annual Status Update report, 2017
Note: Excludes imported cases

Sources of infection, 2017

	Measles	Rubella
Imported	4	1
Import-related	9	1
Unknown/ Not reported	7	0
Endemic	126	0

Source: Measles and rubella elimination Annual Status Update report, 2017

Information on CRS, 2017

No cases reported
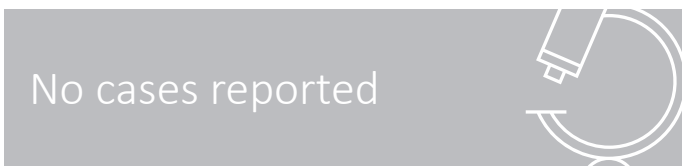
Source: Measles and rubella elimination Annual Status Update report, 2017
CRS = congenital rubella syndrome

Measles and rubella elimination country profile
Czech Republic

World Health Organization
REGIONAL OFFICE FOR **Europe**

Measles incidence, epidemiologic and virologic characteristics, 2013-2017

	Suspected measles cases	Confirmed measles cases				Discarded as non-measles	Measles incidence	Genotypes detected
		Laboratory	Epi- linked	Clinically	Total			
2013	31	15	0	0	15	16	0.4	ND
2014	305	221	1	0	222	83	20.8	B3,D8
2015	35	9	0	0	9	9	0.6	D8
2016	2	7	0	0	7	0	0.2	B3
2017	248	135	4	7	146	102	13.4	B3

Source: Measles and rubella elimination Annual Status Update report, 2013-2017
Incidence calculated per 1 million population
ND = Data not available; NA= Not applicable

Measles surveillance and laboratory performance indicators, 2013-2017

	Discarded non-measles rate	% 1st sub-national unit with ≥ 2 discarded cases	% cases with adequate laboratory investigation	% origin of infection known	# specimen tested for measles	% positive for measles	Rate of viral detection	% WHO and proficient labs
2013	51.6	ND	100%	80%	ND	ND	ND	ND
2014	32.6	ND	100%	91%	ND	ND	35.3%	ND
2015	0.1	ND	100%	55.6%	35	25.7%	20%	100%
2016	NA	NA	100%	85.7%	22	45.5%	25%	100%
2017	41.1%	NA	100%	91%	248	58.9%	26.7%	100%

Source: ASU 2013-2017
ND = Data not available; NA= Not applicable
A proficient laboratory is WHO accredited and/or has an established quality assurance programme with oversight by a WHO accredited laboratory

Rubella incidence, epidemiologic and virologic characteristics, 2013-2017

	Suspected rubella cases	Confirmed rubella cases				Discarded as non-rubella	Rubella incidence	Genotypes detected
		Laboratory	Epi- linked	Clinically	Total			
2013	0	0	0	0	0	0	0	NA
2014	2	1	0	0	1	1	0.1	ND
2015	0	0	0	0	0	0	0	NA
2016	1	0	0	0	0	1	0	NA
2017	2	2	0	0	2	0	0.1	ND

Source: Measles and rubella elimination Annual Status Update report, 2013-2017
Incidence calculated per 1 million population
ND = Data not available; NA= Not applicable

Rubella surveillance and laboratory performance indicators, 2013-2017

	Discarded non-rubella rate	% 1st sub-national unit with ≥ 2 discarded cases	% cases with adequate laboratory investigtion	% origin of infection known	# specimen tested for rubella	% positive for rubella	Rate of viral detection	% WHO and proficient labs
2013	NA	NA	NA	NA	ND	0%	NA	ND
2014	50%	NA	100%	100%	ND	ND	0	ND
2015	NA	NA	NA	NA	ND	0%	NA	100%
2016	ND	NA	NA	NA	1	0%	NA	100%
2017	0	NA	100%	100%	2	100%	50%	100%

Source: ASU 2013-2017
ND = Data not available; NA= Not applicable
A proficient laboratory is WHO accredited and/or has an established quality assurance programme with oversight by a WHO accredited laboratory

RVC comments, based on 2017 reporting

The Regional Verification Commission for Measles and Rubella Elimination (RVC) concluded that endemic transmission of both measles and rubella remained interrupted in Czech Republic in 2017 and confirmed that measles and rubella elimination has been sustained. Surveillance performance and sensitivity need to be strengthened and better documented. The RVC also requests that information on MRCV immunization coverage in 2017 be submitted in the following ASU.

Source:European Regional Verification Commission for Measles and Rubella Elimination (RVC) meeting report: www.euro.who.int/7thrvc

Surveillance performance indicators and targets

a. Rate of discarded cases: at least 2 discarded measles or rubella cases per 100 000 population

b. % cases with adequate laboratory investigation: ≥ 80%

c. % origin of infection known: ≥ 80%

d. Rate of viral detection: ≥ 80%