### Table 1. Measles case classification and incidence by country and area, WHO Western Pacific Region, 2008–2013

<table>
<thead>
<tr>
<th>Country</th>
<th>Total confirmed cases</th>
<th>Confirmed measles cases</th>
<th>Lab Epi-linked cases</th>
<th>Deaths due to measles</th>
<th>Measles case classification</th>
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</tr>
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<td>0</td>
<td>0</td>
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</tr>
<tr>
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<td>38</td>
<td>38</td>
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<td>1</td>
</tr>
<tr>
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<td>52 461</td>
<td>28 159</td>
<td>28 159</td>
<td>193</td>
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</tr>
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<td>22</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Pending</td>
</tr>
<tr>
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<td>0</td>
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<td>Pending</td>
</tr>
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<td>Japan</td>
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<td>326</td>
<td>237</td>
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</tr>
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<td>0</td>
<td>0</td>
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<td>Singapore</td>
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<tr>
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<td>909</td>
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### Table 2. Measles surveillance performance indicators by country and area, WHO Western Pacific Region, 2012–2013

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<th>Country</th>
<th>2012</th>
<th>2013</th>
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<tr>
<td></td>
<td>Confirmed cases</td>
<td>Confirmed cases</td>
</tr>
<tr>
<td></td>
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<td>≥ 80%</td>
</tr>
<tr>
<td></td>
<td>≥ 80%</td>
<td>≥ 88%</td>
</tr>
<tr>
<td></td>
<td>≥ 88%</td>
<td>≥ 89%</td>
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<tr>
<td></td>
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</tr>
<tr>
<td>Australia</td>
<td>Insufficient data</td>
<td>Insufficient data</td>
</tr>
<tr>
<td>Brunei Darussalam</td>
<td>1.00%</td>
<td>71.4%</td>
</tr>
<tr>
<td>Cambodia</td>
<td>58.3%</td>
<td>56.1%</td>
</tr>
<tr>
<td>China</td>
<td>71.0%</td>
<td>99.0%</td>
</tr>
<tr>
<td>Hong Kong (China)</td>
<td>100.0%</td>
<td>92.0%</td>
</tr>
<tr>
<td>Macao (China)</td>
<td>100.0%</td>
<td>95.7%</td>
</tr>
<tr>
<td>Japan</td>
<td>0.0%</td>
<td>Insufficient data</td>
</tr>
<tr>
<td>Lao People's Democratic Republic</td>
<td>64.7%</td>
<td>49.3%</td>
</tr>
<tr>
<td>Malaysia</td>
<td>93.8%</td>
<td>74.4%</td>
</tr>
<tr>
<td>Mongolia</td>
<td>40.9%</td>
<td>64.2%</td>
</tr>
<tr>
<td>New Zealand</td>
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<td>Insufficient data</td>
</tr>
<tr>
<td>Papua New Guinea</td>
<td>10.0%</td>
<td>61.9%</td>
</tr>
<tr>
<td>Philippines</td>
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<td>55.6%</td>
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<td>6.2%</td>
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<tr>
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<td>Insufficient data</td>
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<td>Viet Nam</td>
<td>25.0%</td>
<td>44.3%</td>
</tr>
<tr>
<td>Pacific island countries and areas</td>
<td>35.1%</td>
<td>88.8%</td>
</tr>
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1. Includes all cases reported to the Western Pacific Regional Office by 20 May 2013.
2. Includes laboratory-confirmed, epidemiologically linked cases.
3. Reports only confirmed cases.
4. Classification is provisional based on laboratory data only.
5. Includes laboratory-confirmed, epidemiologically linked cases for 2009 only.
6. Lab Epi-linked Total: Includes laboratory-confirmed cases reported only by laboratory.
7. Includes laboratory-confirmed, epidemiologically linked cases for 2010 only.
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<tr>
<th>Country</th>
<th>Measles and rubella laboratory performance, WHO Western Pacific Region, 2012&lt;sup&gt;1&lt;/sup&gt;</th>
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<td>Samples tested for measles IgM</td>
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<tr>
<td>Cambodia</td>
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</tr>
<tr>
<td>China</td>
<td>489</td>
</tr>
<tr>
<td>Macao (China)</td>
<td>58</td>
</tr>
<tr>
<td>Japan&lt;sup&gt;2&lt;/sup&gt;</td>
<td>362</td>
</tr>
<tr>
<td>Lao People’s Democratic Republic</td>
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<tr>
<td>Malaysia</td>
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<tr>
<td>Mongolia</td>
<td>627</td>
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<td>New Zealand</td>
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<td>Papua New Guinea</td>
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<td>Republic of Korea</td>
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<td>Singapore</td>
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<tr>
<td>Viet Nam (northern)</td>
<td>563</td>
</tr>
<tr>
<td>Viet Nam (southern)</td>
<td>349</td>
</tr>
<tr>
<td>Fiji</td>
<td>182</td>
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<tr>
<td>Samoa&lt;sup&gt;3&lt;/sup&gt;</td>
<td>10</td>
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<tr>
<td>Solomon Islands&lt;sup&gt;3&lt;/sup&gt;</td>
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<tr>
<td>Total</td>
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</table>

<sup>1</sup> National measles laboratory monthly reports received in the Western Pacific Regional Office by 20th of January 2013

<sup>2</sup> Data from the national measles surveillance report received in the Western Pacific Regional Office by 20th of January 2013

<sup>3</sup> Specimens were tested in Victorian Infectious Diseases Reference Laboratory, Australia
<table>
<thead>
<tr>
<th>Country</th>
<th>Total number of cases tested</th>
<th>Total number of samples received</th>
<th>Samples tested for measles IgM</th>
<th>Measles IgM (+)</th>
<th>Measles IgM equiv</th>
<th>Measles IgM (-)</th>
<th>Measles IgM pending</th>
<th>Virus detection</th>
<th>No. of isolates</th>
<th>No. of samples tested</th>
<th>Measles virus isolation/detection (swab, urine and others)</th>
<th>Measles Reverse Transcription-Polymerase Chain Reaction</th>
<th>No. of (+)</th>
<th>No. of samples tested</th>
<th>Measles Rubella</th>
<th>Rubella Virus detection</th>
<th>Rubella Virus isolation/detection (swab, urine and others)</th>
<th>Rubella Reverse Transcription-Polymerase Chain Reaction</th>
<th>Rubella Virus detection</th>
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<td>96</td>
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<td>-</td>
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<td>0</td>
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<tr>
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<td><strong>5 731</strong></td>
<td><strong>4 674</strong></td>
<td><strong>335</strong></td>
<td><strong>79</strong></td>
<td><strong>4 238</strong></td>
<td><strong>91%</strong></td>
<td><strong>16</strong></td>
<td><strong>25</strong></td>
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<td><strong>35</strong></td>
<td><strong>54</strong></td>
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<td><strong>344</strong></td>
<td><strong>4 373</strong></td>
<td><strong>526</strong></td>
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</table>
Figure 1. Measles genotype distribution of cases with onset in 2012 and 2013, WHO Western Pacific Region

2012

2013

Sources: National and regional measles reference laboratory monthly reports from April 2013 and the Measles Nucleotide Sequence online database (MeaNS).

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 lines on maps represent approximate border lines for which there may not yet be full agreement.

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Figure 2. Rubella genotype distribution of cases with onset in 2012 and 2013, WHO Western Pacific Region

Sources: National and regional measles reference laboratory monthly reports from April 2013 and the Measles Nucleotide Sequence online database (MeaNS).

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 lines on maps represent approximate border lines for which there may not yet be full agreement.

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### Table 4A. Completeness and timeliness of epidemiologic reporting, WHO Western Pacific Region, 2011–2013

<table>
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<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
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<td>100% 100%</td>
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<td></td>
<td></td>
</tr>
<tr>
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<td>100% 100%</td>
<td>100% 100%</td>
<td>10 Feb 09 Mar 08 Apr 07 May 100% 100%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>100% 92%</td>
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</tr>
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<td>China</td>
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</tr>
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<td>Japan</td>
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1. National measles surveillance monthly reports from April 2013.
2. Completeness is defined as the number of reports received by the end of the reporting month divided by the number of expected reports for the year.
3. Countries and areas should submit reports by the 10th (or the next working day) of the following month; Pacific island countries and areas and China may report to the Regional Office by the 15th (or the next working day) of the following month.

### Table 4B. Completeness and timeliness of laboratory reporting, WHO Western Pacific Region, 2011–2013

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1. National measles laboratory monthly reports from April 2013.
2. Completeness is defined as the number of reports received by the end of the reporting month divided by the number of expected reports for the year.
3. National measles and rubella laboratories should submit monthly reports by the 10th (or the next working day) of the following month.
4. Brunei Darussalam joined WHO accreditation programme from April 2013.