Questions and answers about measles
1 I am two months pregnant. Is it safe for me to have my 15-month-old child vaccinated with the MMR vaccine?

Measles, mumps, and rubella vaccine viruses are not transmitted from the vaccinated person, so MMR does not pose a risk to a pregnant household member.

2 I am breast feeding my 2-month-old baby. Is it safe for me to receive the MMR vaccine?

Breast feeding does not interfere with the response to MMR vaccine, and your baby will not be affected by the vaccine through your breast milk. If you were identified as having no immunity to rubella during pregnancy, it is important that you have 2 doses a month apart as soon as you have had your baby.

3 My 15-month-old child was exposed to chickenpox yesterday. Is it safe for him to receive the MMR vaccine today?

Disease exposure, including chickenpox, should not delay anyone from receiving the benefits of the MMR or any other vaccine.

4 What is the most common reaction following MMR vaccine?

Most people have no reaction. However, 5-10 percent of the people receiving the MMR vaccine experience a low-grade fever and a mild rash.

5  Can patients with egg allergy receive the MMR vaccine?

The ‘Green Book’ sets out that all children with egg allergy should receive the MMR vaccine see the measles chapter of the Green Book for more information.


6  Are there any situations where MMR should definitely not be given?

The following groups of people should not receive MMR vaccine:

- Pregnant women should not have the MMR.
- Women planning to become pregnant within the next month. Pregnancy should be avoided for one month post vaccination.
- People with untreated malignant disease or altered immunity and those receiving immunosuppressive drugs or radiotherapy, or high dose corticosteroids (patients who use steroid inhalers for asthma can be receive MMR).
- People who have received another live vaccine (for example BCG, Yellow Fever, Varicella Zoster) within the last four weeks. MMR should either be given on the same day as other live vaccines or a four week gap should be left between them.
- People who have had an anaphylactic reaction to the vaccine or component of the vaccine should not receive it.
- People with an acute febrile illness. In these people, vaccination should be postponed until well.
- People who have had an immunoglobulin injection within three months.
- Patients with known ITP (Idiopathic Thrombocytopenic Purpura) reaction should seek advice from their haematologist
7 What is measles?

Measles is a serious disease caused by a virus. It spreads easily through coughing and sneezing. In rare cases, it can be fatal. The measles, mumps, rubella (MMR) vaccine protects against measles, as well as mumps and rubella (German Measles).

8 What are the symptoms?

Measles usually starts with a fever, which can get very high. Soon after, it causes a cough, runny nose, and red eyes. About four days after infection a rash of tiny, red or brown spots breaks out. It starts at the head and spreads to the rest of the body. The rash can last for a week, and coughing can last for 10 days. Some children who get measles also get diarrhoea or ear infections. Young people who get measles can be off school/college for 10 days or more and some people may need to be admitted to hospital.

9 What complications are possible from catching measles?

Complications are quite common, even in the UK. They include a severe cough and breathing difficulties (croup), ear infections, viral and bacterial lung infections (pneumonia), and eye infections (conjunctivitis). Most can be treated with antibiotics.

In one in every 1,000 cases, inflammation of the brain can occur between two and six days after the rash begins. When this happens, one in four cases are left brain damaged.

Measles during pregnancy can result in the loss or early birth of the baby. Sub-acute sclerosing pan-encephalitis (SSPE) is a rare complication but unfortunately results in death. It is estimated that the incidence in the UK is approximately 1:1,000,000. The incidence is lower in countries where the use of measles vaccine is more widely enforced¹.

¹ http://www.gosh.nhs.uk/medical-conditions/search-for-medical-conditions/subacute-sclerosing-panencephalitis/subacute-sclerosing-panencephalitis-information/?utm_source=google-
10 How do you catch measles?

Measles is transmitted through direct contact with an infected person, or through the air by coughs or sneezes. You can catch measles just by being in a room where a person with measles has been. You can catch measles from an infected person even before they have measles rash. A person with measles is usually infectious to others from four days before to four days after the onset of the rash.

If you or your child that have not been immunised or have not had measles before, you have a 90 per cent chance of catching measles if you come into contact with a case. It is most infectious before the rash appears and only minor contact may be needed for the virus to spread.

11 Who catches measles?

Measles was previously rare in the UK because of the high levels of immunisation, but outbreaks of the disease are becoming more common. Anyone who has not had the MMR vaccine or measles itself can catch measles.

It is most common in children aged between one and four who have not been immunised, and school children who missed out on the MMR when they were preschool. Outbreaks often coincide with school terms when there is much more close contact between children. You only need one or two people who haven’t had the vaccination to put at risk babies, toddlers and anyone else who is vulnerable, such as children with leukaemia who cannot have the vaccination and pregnant women who may not have been vaccinated.

12 What is the treatment?

There is no specific treatment for measles. Patients should drink lots of clear fluid to replace body water lost through the fever. Paracetamol/Ibuprofen can be used to reduce the fever.

Because measles is caused by a virus, antibiotics are ineffective, although they may be prescribed if a secondary bacterial infection develops.
13 What should I do if I think someone in my family has measles?

If measles is suspected contact your GP surgery and inform them you or your child has a rash illness before attending, so that arrangements can be made to minimise contact with other vulnerable patients.

Anyone with measles should be closely monitored for complications. Hospital treatment may be required if serious complications develop. One to three out of every 5,000 children in the UK who get measles will die from the disease, even with the best care. The MMR vaccine is the most effective and safest way to protect children against measles.

14 I have measles, how long should I be off work or school?

Measles is most infectious from four days before the rash appears until four days afterwards. A child should be kept off school and adult from work for four days after the onset of the rash.

15 How do I avoid catching measles?

Measles can be prevented by getting the safe and highly effective measles-mumps-rubella (MMR) vaccine/jab. Two doses of the MMR immunisation are required - a first dose at 12-13 months of age and the second at three years and four months of age. If your child (one to 18 years of age) is unvaccinated, make immediate arrangements with your GP for them to receive the MMR jab. This is even more important if your child has had contact with someone with measles.

16 Where can I find more information, are there any useful websites?

Information on the 2013/14 MMR catch up programme is available on the PHE website:
The site includes links to the CMO letter, the Green Book, useful Q&As and various other information resources for health care workers as well as template letters and measles flyers.

**Clinicians should always refer to the online Green Book.**

There are specific FAQs about the temporary MMR catch up programme on the PHE website which are being updated regularly.

http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Measles/MMRCatchupProgramme/

There are some additional Q&As on NHS Choices:
http://www.nhs.uk/Conditions/vaccinations/Pages/mmr-questions-answers.aspx

Public Health England also has some useful epidemiological information (currently hosted on the former HPA website):
http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Measles/

The US Centre for Disease Control (CDC) web site also has useful information but note schedules do vary in the US: