Measles Frequently Asked Questions

1. **What are the signs and symptoms of measles? How is it spread?**

Measles is an acute viral respiratory illness characterized by a high fever, cough, runny nose, and/or conjunctivitis (red watery eyes). A rash typically appears 2-4 days after the initial symptoms, usually starting around the hairline and face and then spreading downward to the neck, trunk, arms, legs and feet. The symptoms of measles usually appear about 7 to 14 days after a person is infected. Other symptoms might include small white spots in the mouth, swollen lymph glands, and fatigue. Patients are contagious from 4 days before to 4 days after the rash appears. It is important that people who have measles or might have measles stay home while they are contagious so that they don’t expose others. Measles is very infectious and spreads through the air when an infected person coughs or sneezes. It can remain in the air for up to 2 hours.

2. **What are the complications of measles?**

Measles can be a serious in all age groups. However, children younger than 5 years of age and adults older than 20 years of age are more likely to suffer from measles complications.

Common measles complications include ear infections and diarrhea.

Some people may suffer from severe complications, such as pneumonia (infection of the lungs) and encephalitis (swelling of the brain). They may need to be hospitalized and could die. Measles may cause pregnant woman to give birth prematurely, or have a low-birth-weight baby.

3. **Who should be vaccinated?**

Measles can be prevented with Measles, Mumps, and Rubella (MMR) vaccine. The Centers for Disease Control and Prevention (CDC) recommends that children get two doses of MMR vaccine. The first dose is routinely given at 12 – 15 months of age, and the second dose at 4 – 6 years of age. Teens and adults should also be up-to-date on the MMR vaccinations. The MMR vaccine is very safe and effective. Two doses of MMR vaccine are about 97% effective at preventing measles; one dose is about 93% effective.
4. **Who should not get the MMR vaccine?**

There are some people who should NOT get this vaccine or who should talk to their medical provider before getting vaccinated. These include persons who:

- Have any severe, life threatening allergies to a prior dose of MMR vaccine or have a severe allergy to any part of this vaccine
- Is pregnant, thinks she might be pregnant, or is planning to become pregnant in the next month
- Have a weakened immune system due to disease or medical treatment
- Have immediate family members with a history of congenital or hereditary immunodeficiency
- Have a condition that makes them bruise or bleed easily
- Have recently had a blood transfusion or received other blood products
- Have tuberculosis
- Have gotten some other vaccines in the past 4 weeks
- Have a moderate or severe illness

5. **What are the recommendations if a person is unable to get vaccinated against measles?**

Vaccination is the best way to prevent measles. If you are not already vaccinated, and are unable to get the MMR vaccine because of a contraindication, you should be aware of where measles outbreaks are occurring. Check the CDC website at [https://www.cdc.gov/measles/cases-outbreaks.html](https://www.cdc.gov/measles/cases-outbreaks.html) for up-to-date information. If you are considering travel to any of these areas, discuss with your healthcare provider.

6. **Are “titers” to check immunity to measles recommended for people who have been vaccinated?**

If you have documentation of receiving 2 doses of MMR vaccine, you generally do not need to have titers checked.

If you have only 1 dose of MMR vaccine, you can get a second dose without checking titers first, as long as it has been 28 days since the first dose.

7. **Should people who received MMR vaccination in the 1960s be revaccinated?**

Between 1963 and 1967, some people received the killed measles vaccine (an earlier formulation of measles vaccine that is no longer used). People who know they got the killed measles vaccine should talk to their doctor about getting revaccinated with the current, live MMR vaccine.

According to the CDC, not many people fall into this group; the killed vaccine was given to less than 1 million people between 1963 and 1967. Also, most people don’t know if they got the killed vaccine during this time. If you’re unsure whether you fall into this group, you should first try to find your vaccination records or documentation of measles immunity. If you do not have written documentation of measles immunity, you should get vaccinated with MMR vaccine. There is no harm in getting another dose of MMR vaccine if you may already
be immune to measles (or mumps or rubella). Another option is to have a doctor test your blood to determine whether you’re immune, but this is not recommended.

8. **Is preventive treatment recommended for people exposed to measles?**

If you think you have been exposed to measles, immediately call your doctor and let him or her know that you have been exposed to someone who has measles. Your doctor can determine if you are immune to measles based on your vaccination record, age, or laboratory evidence, and make special arrangements to evaluate you, if needed, without putting other patients and medical office staff at risk.

If you are not immune to measles, MMR vaccine or a medicine called immune globulin may help reduce your risk of developing measles. Your doctor can help to advise you, and monitor you for signs and symptoms of measles.

No preventive treatment (also called post-exposure prophylaxis) is recommended for exposed healthy persons who have documentation of two doses of MMR vaccine administered on or after the first birthday and given at least 28 days apart.

9. **Is a third dose of MMR vaccine recommended for people exposed to measles?**

A third dose of MMR to protect against measles is NOT recommended for anyone who has documentation of two doses of MMR administered on or after the first birthday and given at least 28 days apart.

10. **Are there any other recommendations regarding measles vaccination in special situations?**

People who might be at increased risk of measles exposure should discuss measles vaccination with their healthcare provider for consideration of adjustment to the routine vaccine recommendations, including earlier MMR vaccination for infants and young children.

People who might be at increased risk of measles exposure include people planning to travel to areas with measles outbreaks (see list of measles outbreaks reported to CDC here: [https://www.cdc.gov/measles/cases-outbreaks.html](https://www.cdc.gov/measles/cases-outbreaks.html)); and people who might have contact with visitors from these areas.

11. **How can pregnant women prevent measles?**

Most pregnant women have been vaccinated with two doses of MMR prior to pregnancy. The effectiveness of two doses of MMR vaccine is approximately 97%.

Pregnant women who have not received two doses of vaccine should not get the MMR vaccine during pregnancy. Pregnant women who need the vaccine should wait until after giving birth. Women should avoid getting pregnant for four weeks after getting the MMR vaccine.

If you are pregnant or planning to become pregnant and unsure of whether you have received two doses of MMR vaccine, talk to your healthcare provider.
If you are pregnant and exposed to measles, and haven't had two doses of MMR vaccine, call your healthcare provider right away because you might need a medication called immune globulin.

12. Should new parents and caregivers get vaccinated?

If parents or caregivers haven’t gotten the MMR vaccine or had measles in the past, they should get vaccinated. It’s important to make sure people who are around your new baby do not expose your baby to measles – and other diseases like whooping cough – that your baby is too young to be vaccinated against. This includes siblings, who should also be up-to-date on all their childhood vaccines for their own protection and to protect the baby.

13. How do I get the MMR vaccine?

If you or your family member needs MMR vaccine, first check with your health care provider. If your health care provider does not have MMR vaccine available, you can reach out to your pharmacist to see if they carry it. In Maryland, a pharmacist may administer any vaccines included in the CDC’s recommended Immunization Schedule to individuals ages 11 to 17 who have a prescription. For those age 18 years or older, prescriptions are not required to administer vaccines as long as they are one of the adult vaccines listed by the CDC. For information about pricing and insurance reimbursement, check with your pharmacist and insurance provider.

You can also check with your local health department if you are unable to be vaccinated by your provider or at a pharmacy.

14. What should I do if I have been notified that I might have been exposed to measles?

- If you are healthy and know you have had 2 doses of MMR vaccine, you do not need to take any additional actions.

- If your immune system is currently weakened by disease or medications, even if you have received two doses of MMR vaccine, call your doctor right away and tell them you might have been exposed to measles. Even if you have received 2 doses of MMR vaccine, you might need an additional medication called immune globulin.

- If you know you have NOT received 2 doses of MMR vaccine, or if you aren’t sure whether or not you have received 2 doses of MMR vaccine, call your doctor right away to determine what to do next. You might need a dose of MMR vaccine or a medication called immune globulin. Pregnant women can’t receive MMR vaccine, but might need immune globulin.

- Monitor for possible symptoms of measles, such as fever, cough, runny nose, red eyes, and rash for 21 days after your last possible exposure to measles. If you develop any of these symptoms, stay home and check in with your doctor. Call ahead to tell the doctor’s
office that you might have measles so they can make special arrangements to evaluate you, if needed, without putting other patients and medical office staff at risk.

For more information see MDH Instructions for People Who Might Have Been Exposed to Measles

15. Do I have to stay home if I have been exposed to measles?

No, as long as you are feeling well and do not have any symptoms of measles. However, it is very important that you monitor for possible symptoms of measles, such as fever, cough, runny nose, red eyes, and rash. If you develop any of these symptoms, stay home and check in with your doctor. Call ahead to tell the doctor’s office that you might have measles so they can make special arrangements to evaluate you, if needed, without putting other patients and medical office staff at risk.

16. My family member was diagnosed with measles. Do I have to stay home?

It is not required that family members or other contacts of measles cases restrict their movement if they are not ill.

17. Where can I find up-to-date information about measles in Maryland?

Measles case counts are posted on the MDH website at https://health.maryland.gov/measles
Also check with your local health department for additional resources on measles.

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