Measles: Make Sure Your Child Is Fully Immunized

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Most adults born before 1957 had measles as children. They might remember being sick for a few days with a rash and fever. And they might recall that other children in their school or neighborhood had measles at the same time. What they might not remember is that some children developed severe complications, like pneumonia or encephalitis (swelling of the brain), or even died from measles.

Today, thanks to vaccines, very few children in the United States get measles. Since a measles vaccine was licensed in 1963, measles cases in the United States have decreased by more than 99%. In 2009, only 71 cases of measles were reported in the United States. And most of the recent U.S. cases have been among or linked to travelers returning from or visiting from other countries.

The United States has benefited from the success of its measles vaccination program. But for this benefit to continue, we must maintain a high level of vaccination in the community. Measles is still common in many countries and can easily be carried into the United States by travelers. Measles virus is highly contagious and can spread rapidly in areas and communities where vaccination is not widespread.

Complications from measles are still dangerous and occur more commonly in children younger than 5 years of age and adults 20 years of age or older. For every 1,000 children who get measles, one or two will die from it. In fact, worldwide, measles is still a significant cause of vaccine-preventable death among children. It is estimated that in 2008 there were 164,000 measles deaths worldwide—that equals about 450 deaths every day or about 18 deaths every hour.

The Best Protection against Measles—the MMR or MMRV Vaccine

Measles vaccine is usually administered as MMR, a combination vaccine that provides protection against three viral diseases: measles, mumps, and rubella. The MMR vaccine is strongly endorsed by medical and public health experts as safe and effective. Two doses are recommended for children—the first dose at 12 to 15 months of age and the second dose before entering school at 4 to 6 years of age.
Your child’s healthcare provider may also offer the MMRV vaccine, a combination vaccine that provides protection against measles, mumps, rubella, and varicella (chickenpox). MMRV vaccine is licensed for children 12 months to 12 years of age and may be used in place of MMR vaccine if varicella vaccination is needed in addition to measles, mumps, and rubella vaccination. Your child’s healthcare provider can help you decide which vaccine to use.

Anyone who does not have evidence of measles immunity is at risk for measles during international travel. Check with your healthcare provider to see if you or your child (including children less than 12 months of age) should be vaccinated before traveling.

**To See If Your Child's Vaccine Is Due**
- Check your child's vaccination record,
- Contact his or her healthcare provider, or
- Visit the immunization scheduler for newborn to 6-year-old children.

One of the best ways to protect children from measles is to vaccinate them on time.

**Paying for Vaccine**
Most health insurance plans cover the cost of vaccines, but you may want to check with your insurance provider before going to the doctor. If you don't have insurance, or if it does not cover vaccines, the [Vaccines for Children Program](http://www.vfc.gov) may be able to help. The Vaccines for Children program helps families of eligible children who might not otherwise have access to vaccines. The program provides vaccines at no cost to doctors who serve eligible children.

**Some Adults Need MMR Vaccine Too!**
Anyone born during or after 1957 who has not had measles or been vaccinated is at risk and should get at least one dose of MMR vaccine. Two doses are recommended for adults who are at higher risk, such as college students, international travelers, and healthcare personnel.