

Bastrop County Public Health Department
Measles FAQ

Q: What should I do if I'm unsure whether I'm immune to measles?

If you don't know whether you're immune, check your vaccination records. If you don't have proof, it's safe to get another MMR shot. A doctor can also test your blood, but vaccination is usually the easiest option.

Q: How effective is the measles vaccine?

The measles vaccine (MMR) is very effective. One dose protects about 93% of people, while two doses protect about 97%. It takes about 2-3 weeks after vaccination for your body to be fully protected.

Q: How does the measles vaccine work?

When you get measles vaccine, your immune system makes protective virus-fighting antibodies against the weakened vaccine virus. Measles vaccine protects you from wild-type measles because if you have been vaccinated and then are exposed to someone with measles, your body remembers how to fight off the wild-type virus. That's because the vaccine trained your immune system.

Q: Can I get measles if I'm fully vaccinated?

The MMR vaccine works incredibly well—you're [35 times](#) less likely to get measles than someone with no immunity.

But nothing is perfect. A breakthrough case is rare but possible ([3 out of 100](#) fully vaccinated people will get infected). The disease does tend to be [milder](#).

We don't know *why* there are breakthrough cases, but there are two possibilities:

1. ***Waning immunity*** (see more below); or
2. ***Vaccine didn't work in the first place for whatever reason.*** [5%](#) of people do not get protection after the first dose, but 95% of those will be fully protected after a second dose.

Q: Are babies protected if their mom was fully vaccinated?

Anyone trying to conceive should have MMR titers checked, and if levels are low, MMR should be administered 28 or more days before conception.

Mothers who have been vaccinated or had measles in the past pass some immunity to their babies. However, this protection fades within 6-12 months, which is why babies need to get the MMR vaccine at 12 months.

Q: Why do we wait until 12 months to get children vaccinated?

We try to get to the “sweet spot” by balancing a few factors: maternal antibodies waning, maturity of the immune system, and the most common age of infection. For example, maternal antibodies can greatly reduce the infants response to the MMR vaccine. So we want to be sure these wane before getting a child vaccinated.

That said, if there is a measles outbreak, protection is needed ASAP for young children. Early vaccination is one provisional measure we can take.

Q: If I am exposed, can I transmit measles?

Transmission after vaccination, especially if you’re asymptomatic, is rare. While there have been some cases of transmission from vaccinated people, the risk is much lower than for those who are unvaccinated.

In 2011, there was a well-documented [outbreak in New York](#). This was the first documented measles outbreak where the index case had two doses of MMR. Out of 88 exposed contacts, 4 got infected and had symptoms. Those who got infected had more than 200 contacts, and none got measles. (Note: We would expect ~90% to get infected if this population didn't have immunity.)

Q: How long is a person infectious with measles?

A person with measles can spread it to others from four days before a rash appears until four days after the rash starts. The time between getting exposed and showing symptoms is usually 10-12 days, but it can range from 7 to 21 days.

Q: What are the vaccine recommendations for measles?

The Measles, Mumps, and Rubella (MMR) vaccine is recommended for the following groups:

- People (6 months and older) who have been exposed to measles who do not have evidence of immunity to measles – administer MMR within three days of exposure.

Bastrop County Public Health Department – Measles FAQ

- Preschool-aged children (1-4 years) or adults who have received one MMR dose with community-wide transmission – a second dose should be considered.
- Adults who were born before 1957 and are reasonably sure they have never been vaccinated or had measles.
- Healthcare workers, healthcare volunteers, or those with contact with children under the age of 5 with no vaccine documentation or lab evidence of disease/immunity.
- People (12 months and older) infected with HIV who do not have evidence of current severe immunosuppression.
- Perinatal HIV infected individuals who were vaccinated before the establishment of effective antiretroviral therapy (ART) with 2 appropriately spaced doses of MMR vaccine once effective ART has been established.

IG (IM) is recommended for the following potentially exposed groups:

- Infants 0-6mths – administer IG

IG (IV) is recommended for the following potentially exposed groups:

- Severely immunocompromised people
- Pregnant women without evidence of measles immunity who are exposed to measles

Q: What is the Advisory Committee on Immunization Practices (ACIP) recommended vaccine schedule for children and adults?

CHILDREN:

- Administer the 1st MMR dose at 12-15 months and the 2nd dose at 4-6 years (the second dose can be administered before 4 years, as long as there is a 4-week gap between first and second doses)
 - For internationally traveling children, administer 1 dose at 6-11 months of age before departure. These children should be revaccinated with 2 doses of MMR vaccine at 12-15 months, and the second dose at least 4 weeks later.
 - Catch-up vaccination: ensure that all school-aged children have had 2 doses of MMR vaccine.

ADULTS:

- One dose of MMR is recommended for adults not at high risk for exposure and transmission. A routine second dose of MMR vaccine, administered a minimum of 28 days after the first dose, is recommended for adults who are students in

Bastrop County Public Health Department – Measles FAQ

postsecondary educational institutions, work in a healthcare facility, or plan to travel internationally.

- Persons who received inactivated (killed) measles vaccine or measles vaccine of unknown type during 1963-1967 should be revaccinated with 2 doses of MMR vaccine.

Q: Am I protected against measles?

CDC considers you protected from measles if you have written documentation (records) showing at least **one** of the following:

- You received two doses of measles-containing vaccine, and you are:
 - A school-aged child (grades K-12)
 - An adult who will be in a setting that poses a high risk for measles transmission (including students at post-high school education institutions, healthcare personnel, and international travelers)
- You received one dose of measles-containing vaccine, and you are:
 - A preschool-aged child
 - An adult who will not be in a high-risk setting for measles transmission
- A laboratory confirmed that you had measles at some point in your life.
- A laboratory confirmed that you are immune to measles.
- You were born before 1957.

Q: Do I ever need a booster vaccine?

No. If you received two doses of the measles vaccine as a child, you are protected for life.

Q: I am an adult now but only got one dose of measles vaccine as a child. Do I need a second dose?

If you were born after 1957 one dose of measles vaccine is sufficient to be considered protected from measles. Certain adults may need 2 doses. Adults who are going to be in a setting that poses a high risk for measles transmission should make sure they have had two doses separated by at least 28 days. These adults include:

- Students at post-high school education institutions
- Healthcare personnel
- International travelers

Bastrop County Public Health Department – Measles FAQ

- People who public health authorities determine are at increased risk for getting measles during a measles outbreak

If you're not sure whether you are up to date on measles vaccine, talk with your healthcare provider.

Sources:

[Measles \(Rubeola\) | Texas DSHS](#)

[Questions About Measles | Measles \(Rubeola\) | CDC](#)

[I'm fully vaccinated against measles. What should I know?](#)