MEASLES:

Important considerations









- As of April, 2025, measles cases are increasing in the United States.
- Many International destinations are reporting an increased number of cases of measles.
- Measles was officially eliminated from the United States in 2000.

WHO'S AT RISK - INCUBATION





SYMPTOMS



- Babies who are too young for vaccine (<12 months)
- Immunocompromised people
- Pregnant women
- Unvaccinated people

Average: 14 days

(range 7-21 days)

- High fever (up to 104 F)
- Runny nose
- Cough
- Red, watery eyes
- Rash (spreads from head to toe)
- Koplik spots (sometimes)

Measles complications can include: pneumonia, encephalitis, and/or death

How infectious is measles? One person can infect 12-18 susceptible people



Travel to a place where measles is endemic or an outbreak is occurring

RISK FACTORS



Contact with someone who has measles



Not receiving a measles vaccine (MMR)



Visitors from areas where measles is occurring

SUSPECT



Evaluate signs and symptoms and risk factors to determine if measles is high on the suspicion list.

REPORT



Measles is immediately reportable to local public health. Reporting should not wait until lab results are available. If you suspect measles, report it ASAP.

CONFIRM



A diagnosis of measles is confirmed by prompt laboratory testing. The gold standard is PCR and can be performed as soon as possible following rash onset. This should be paired with a blood test that detects IgM antibody production.

PREVENT



The measles vaccine (MMR) is extremely effective against preventing the disease in those who are >12 months of age. Two doses of MMR are 97% effective.

For More Information, Visit www.siphidaho.org

