Measles cases and outbreaks are emerging in several states as vaccination rates drop.

* **More than 900 confirmed cases of measles have been reported in 30 states so far in 2025. 68% of cases are 19 or younger; 96% of cases were unvaccinated or had an unknown vaccination status. Overall, 121 cases have been hospitalized and three deaths are confirmed.**
* When measles vaccination rates in a community are at 95% or more, *herd immunity* safeguards vulnerable people who can’t receive vaccinations due to their age, health conditions, or compromised immune system.
* The statewide rate of kindergarteners immunized was 90.14% for the 2024-2025 school year. MMR vaccination remains the most important tool for preventing measles cases and outbreaks. There are individuals and communities in Missouri at increased risk for measles outbreaks due to lack of immunization or under immunization.

\*This is preliminary data self-reported by schools.

* + In our community . . . [speak to your county’s MMR vaccination rates and your religious exemption rates, if you wish to]
  + View your local county-level fact sheet at [www.health.mo.gov/measles](http://www.health.mo.gov/measles).
  + [Share information about what you are doing to increase vaccination rates (e.g. working with schools and providers, holding special vaccination clinics, extended hours, etc.)]

Vaccination offers the best protection against measles.

* The measles, mumps, and rubella (MMR) vaccine is safe and effective at preventing disease.
  + One dose of the MMR vaccine provides 93% protection against measles. The second dose increases protection to 97% for a lifetime.
  + Like medicines, vaccines can have side effects, but most people who are vaccinated have no side effects.
  + Side effects that do occur are usually mild, like a fever, rash, or soreness at the vaccination site or temporary joint pain and stiffness.
  + This vaccine has been used in the United State since the 1970s.

The current recommendation for MMR vaccination is as follows:

* Children 12 -15 months of age should have one dose of the MMR vaccine.
* Children 4-6 years of age should have two doses of the MMR vaccine.
* Adults who do not have evidence of immunity should receive one dose of the MMR vaccine.
  + Evidence of Immunity includes:
    - Born before 1957
    - Written documentation of vaccination with:
      * One or more doses of a measles-containing vaccine administered on or after 12 months of age for children and adults not at high risk.
      * Two or more doses of a measles-containing vaccine for school-age children, college students, adults at high risk or international travelers.
    - Laboratory evidence of immunity includes a positive measles titer or confirmed laboratory diagnosis of measles.
* Adults who received an inactivated measles vaccine between 1963 and 1967, or those who are unsure which type of measles vaccine they received, are recommended to receive a dose of the MMR vaccine.
* Individuals who are considered high risk, such as health care workers and students attending colleges or vocational schools, should receive two doses of MMR vaccine separated by 28 days.
* International Travelers should receive the following MMR vaccinations.
  + Infants 6-11 months of age should receive one dose of MMR vaccine.
  + Children 12 months and older should receive two doses of MMR vaccine separated by 28 days.
  + Adults with documentation of one dose of MMR vaccine should receive a second dose.
  + Adults with no documentation should receive two doses of MMR vaccine separated by 28 days.

Elderly individuals born before 1957 are not recommended to receive a dose of the MMR vaccine since they are presumed to be immune due to prior exposure to measles.

To qualify for the Section 317 vaccine, individuals must be 19 years of age or older and either uninsured or underinsured, meaning that their insurance does not cover the cost of the vaccine.

Currently, there are 2 licensed measles-containing vaccines on the market:

* MMR II since 1971
* Priorix since 2022

Measles can be very dangerous, especially for children under 5 years old and people with compromised immune systems.

* Pneumonia occurs in up to 6 percent of reported cases and amounts for 60% of deaths attributed to measles.
* Encephalitis (brain infection) may also occur, which can lead to brain damage.
* Other complications include middle ear infection and convulsions.
* There is no specific treatment for measles and some people may die, even with the best care.

Measles is a very contagious disease.

* One person with measles can easily pass it on to 9 out of 10 people who are unvaccinated or do not have natural immunity.
  + It spreads through the air when a person with measles coughs or sneezes.
  + Measles virus can live in the air for up to 2 hours.
* A person with measles is contagious from 4 days before the rash appears until 4 days after the rash appears.
* The virus can also be picked up by touching contaminated surfaces.

Most people think of measles as a childhood disease, but anyone can get measles if they are not protected.

* Most cases of measles are among preschool children, adolescents, and young adults.
* People who have not been vaccinated are at risk for measles.
* Children should be vaccinated against measles at 12 – 15 months old and again at 4 – 6 years old.

Measles symptoms usually appear in two stages, starting 1 – 2 weeks after a person has been exposed to the virus.

* The first stage starts with a runny nose, cough and a rising fever and the eyes may become red and sensitive to light.
* The second stage begins about 3 – 7 days later and includes a high temperature (103-105°F) and a red blotchy rash.
  + The rash usually begins on the face and then spreads over the entire body.
  + Little white spots may also appear on the gums and inside of the cheeks.
  + The rash lasts about 4 – 7 days.
* Some people may have serious complications like pneumonia or encephalitis (swelling of the brain). Some may even die.

MMR is a recommended childhood vaccination that is covered by most private insurance companies.

* Parents should check with their insurance provider if they have questions about coverage.
* Children without health insurance may be eligible to receive an MMR vaccine under the CDC’s Vaccine for Children Program.
* Ask the Health Department about your options for getting you and your child vaccinated against measles.