







The number of children catching measles is rising.

To be protected they need to be immunised with the MMR vaccine.

Children under the age of 18 years who have missed their MMR vaccination should have the vaccine to stop them getting measles.



#### Why is measles on the rise?

Low levels of immunisation uptake over the last decade have led to a significant increase in the number of children not protected against measles. And the more children that are not protected, the more rapidly measles will spread.

#### Is measles serious?

Measles is caused by a very infectious virus. Measles can be serious, causing a high fever and a rash. A child with measles will have to spend about five days in bed and may be off school for ten days. Adults are likely to be ill for longer.

About one in every 15 children with measles will develop more serious complications. These can include diarrhoea, chest infections, fits, encephalitis (infection of the brain), and brain damage. Measles can kill.





### Could my child die from measles?

Studies show that for every 5000 individuals with measles, one is very likely to die.

Sadly, a teenager died from measles in June 2008. Another young person died from measles in 2006.

#### Is my child at risk?

Measles is one of the most infectious diseases known. A cough or a sneeze can spread the measles virus over a wide area. Because it's so infectious, the chances are your child will get measles if he or she is not protected.

The risk is greatest in children who have received no MMR vaccine.

Children who have only received one dose of MMR vaccine need a second dose of the vaccine to ensure they are protected.







Some children cannot have MMR because they have conditions such as leukaemia. They can only be protected if enough healthy children are vaccinated so measles is eliminated.

### What should I do, then?

The safest and most effective way to prevent measles is to ensure your child is fully vaccinated with the MMR vaccine.

Your child should receive the MMR vaccinations at 13 months of age, and again at three years and four months or soon after – best before starting school.

If your child has missed one of their routine MMR vaccinations, your local health service such as your GP surgery may send you an appointment to bring your child for an MMR vaccination. This catch-up is being offered to all children and young people under 18 years of age.

It is never too late to have your child vaccinated.

# I can't remember whether my child has had an MMR vaccination or not.

Check your child's personal health record ('the Red Book'). This will tell you which vaccinations your child has had. If you are unsure, contact your GP surgery and ask their advice. If there is any doubt it is better to have the MMR vaccination because an additional dose poses no risk to your child's health if they've already had one or even two MMR vaccinations.

### I gave my child single measles, mumps and rubella vaccinations, can they still have MMR?

Unless your child has had six separate injections, we recommend at least one dose of MMR and preferably two.



## I'm still anxious about giving my child three vaccines in one injection.

It's understandable that parents are concerned about having their child immunised but their immune systems are well able to cope with childhood vaccinations.

Having the MMR vaccine will not only protect your child against measles but also mumps and rubella which can have particularly serious consequences in young adults.



# Does the MMR vaccination have any side effects?

All vaccinations can cause mild side effects, such as soreness at the site of injection. The three viruses in the MMR vaccine act at different times and may produce the following side effects after the first dose:

- six to ten days after the immunisation, about one in ten children may develop a mild fever and some develop a measleslike rash and go off their food. This can happen when the measles part of the vaccine starts to work, and is normal.
- about one in every 1000 immunised children may have a fit caused by a fever. This is called a 'febrile convulsion', and can be caused by any fever. However, if a child who has not been immunised gets measles, they are five times more likely to have a fit.
- rarely, children may get mumpslike symptoms (fever and swollen glands) about three weeks after their immunisation as the mumps part of the vaccine starts to work.



- very rarely, children may get a rash of small bruise-like spots in the six weeks after the vaccination. This is usually caused by the measles or rubella parts of the vaccine. If you see spots like these, take your child to the doctor to be checked. He or she will tell you how to deal with the rash.
- fewer than one child in a million develops encephalitis (swelling of the brain) after the MMR vaccine, and there is very little evidence that it is caused by the vaccine. However, if a child catches measles, the chance of developing encephalitis is between one in 200 and one in 5000.

Your doctor or practice nurse will be able to discuss these issues in more detail.

# What about reactions after the second MMR?

The same reactions as listed above can occur, but they are ten times less likely to happen.



#### I've heard that MMR can cause autism

There is no credible evidence to support the link between MMR vaccine and autism. MMR vaccine has been used widely and safely around the world for more than 30 years. Over 500 million doses have been given in over 100 countries.

# My child is allergic to eggs – can they have the MMR vaccine?

The MMR vaccine can safely be given to children who have had a severe allergy (anaphylactic reaction) to egg. If you have any concerns, talk to your practice nurse, health visitor or doctor.

MMR is the safest way to protect your child against measles and you'll be protecting them against mumps and rubella as well. You'll also be protecting children who can't have vaccinations for medical reasons.





© Crown copyright 2008 289422 1p 250k Jul08 (AHP)

Produced by COI for the Department of Health First published July 2008

The text of this document may be reproduced without formal permission or charge for personal or in-house use.

DH Publications Orderline Phone: 0300 123 1002 Email: dh@prolog.uk.com

Textphone: 0300 123 1003 (8am to 6pm, Mon-Fri)

For more information and advice visit: www.immunisation.nhs.uk