

# Answer Questions About Managing Measles

Recent headlines will spur **questions about managing measles**.

Stay alert for symptoms, including fever...cough...runny nose...red, itchy eyes...and a delayed maculopapular rash that starts on the face.

If you suspect a patient may have measles, isolate them and notify the local health department ASAP.

**What's the role of vitamin A or cod liver oil?** Keep in mind, most evidence for vitamin A and measles is from resource-limited countries...where vitamin A deficiency from severe malnutrition is more common.

Advise against using vitamin A or cod liver oil, which is high in vitamin A, to PREVENT measles. Warn that improper dosing or prolonged use of vitamin A can lead to toxicity...vomiting, eye or liver damage, etc.

But vitamin A may be given to children for TREATMENT...along with supportive care. It may decrease complications.

Vitamin A is given once daily for 2 days, and the dose varies by age. It's 50,000 IU for infants under 6 months, 100,000 IU for infants 6 through 11 months, and 200,000 IU for children 12 months or older.

**Who should get post-exposure prophylaxis?** Give NONimmune contacts an MMR vaccine within 72 hours of initial exposure...OR refer for immune globulin within 6 days of exposure.

But don't give live MMR vaccine to severely immunocompromised or pregnant patients...or kids under 6 months of age. Instead, give immune globulin within 6 days of exposure...and vaccinate household contacts.

**How can you prevent measles?** Vaccinate. About 97% of people develop lifelong immunity after 2 doses of a measles vaccine.

Continue to give 2 doses of MMR or MMRV to kids...at 12 to 15 months, then again at 4 to 6 years. But the second MMR dose can be given 4 weeks after the first, especially in outbreak areas or if traveling.

And MMR can be given to infants as young as 6 months if they're at high risk of exposure during an outbreak or travel. But infants who get MMR before age 1 year still need 2 MORE doses per the usual schedule.

Ensure adults have had at least 1 dose of MMR if born in 1957 or later. Or give 2 doses at least 4 weeks apart to adults at higher risk of exposure, such as college students and healthcare workers.

Watch for patients who got an MMR between 1963 and 1967. If it was inactivated or they're unsure, give them at least 1 live MMR dose.

If patients don't have a record of getting MMR, vaccinate.

Get our resource, Vaccine Adherence: Addressing Myths and Hesitancy, to support your discussions about autism, fears, etc.

## Key References:

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