Measles (Rubeola)

Measles was once a common and potentially dangerous childhood disease, and it remains so in many parts of the world. In the United States and other developed countries, the risk has been greatly reduced by the use of effective vaccines. Measles is very contagious and can cause outbreaks, especially among groups who have not been vaccinated.

What is measles?

Measles is a disease caused by infection with the rubeola virus, producing a high fever and a red rash all over the body. Measles was once widespread, with occasional outbreaks affecting thousands of children. Although vaccines have made measles uncommon in developed countries, it can still occur and can be serious.

Most cases of measles in the United States occur in people who have come from countries where measles is still a major problem. Although most children with measles recover completely, there is a small risk of serious complications. Measles (rubeola) is different from another childhood infection called German measles, or rubella.

What does it look like?

- Measles starts with a few days of fever and other symptoms, such as cough, runny nose, and red, irritated eyes (conjunctivitis). The fever can sometimes become very high—up to 104°F (40°C)—usually when the rash appears. Your child may look very ill.
- After 2 or 3 days, the typical rash of measles begins, appearing as red spots often with a "bump" in them. There can be so many spots that an entire area will look red. Your doctor may look for typical grayish-white dots inside the mouth, called "Koplik spots."
- The rash usually begins on the face and neck, then spreads downward over the body, covering the arms and legs. By the time the rash reaches the feet, it begins to clear up on the face. The rash usually starts to fade after 2 or 3 days and lasts a total of 5 or 6 days.
- Other symptoms are possible, such as abdominal pain, vomiting, and diarrhea.

How is measles spread?

Measles spreads very easily by means of coughing, sneezing, or contact with mucous or saliva.

If your child has not been vaccinated and is exposed to the rubeola virus, the chances that he or she will get measles are very high. After your child is exposed to measles, there is about a 2-week incubation period before symptoms begin.

What are some possible complications of measles?

- There are several possible complications, some of them serious:
 - Ear infections (otitis media).
 - Pneumonia (bacterial infection of the lungs).
 - Nervous system complications, including encephalitis (inflammation of the brain) or seizures (involuntary movements).
- With good medical care, few children die of measles in the United States.
- The risk of complications is highest for children under 5 years old.

What puts your child at risk of measles?

- Not receiving the recommended vaccinations increases your child's chances of getting measles! If your child is vaccinated, he or she will be almost completely protected against this disease.
- Children who have immigrated from or traveled to countries where measles is common may be at higher risk.

Can measles be prevented?

- *Yes.* Measles vaccination greatly reduces your child's chances of getting the disease. Measles, mumps, rubella (MMR) vaccination is recommended for nearly all children: one dose at age 1; a second dose at ages 4 to 6 years. There is a low risk of some mild reactions after MMR vaccination, such as fever and a rash.
- If you or others in your family have not been vaccinated and are exposed to someone with measles, vaccination may still help to prevent the disease. This is especially important for pregnant women and infants under 1 year old.
- Immune globulin (a blood product that contains antibodies to measles) is used to prevent infection after exposure in certain cases.

How is measles treated?

• No specific treatment can cure measles or kill the rubeola virus. The disease has to run its course. Your child's fever should go down by the time the rash reaches his or her feet. The rash usually clears up completely after 5 or 6 days.

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- Your child will probably not receive antibiotics, because they are not effective against rubeola or other viruses. If your doctor suspects secondary infection with bacteria (such as an ear infection or pneumonia), antibiotics will be prescribed.
- Your doctor may order tests to confirm that your child has measles.
- If your child is uncomfortable or has a very high fever, give him or her acetaminophen or ibuprofen.
- Make sure your child gets plenty of fluids.
- The rubeola virus spreads very easily: avoid contact with others who may not have been vaccinated against measles.

When should I call your office?

Call our office if your child's rash doesn't start to get better within 2 or 3 days or if your child develops any of the following symptoms:

- Difficulty breathing along with cough.
- Worsening cough.
- Diarrhea.
- Earache.
- Seizures (involuntary movements).
- Extreme sleepiness or behavior changes.
- Fast or difficult breathing.