



# JEFFERSON COUNTY PUBLIC HEALTH

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To: Parents, Teachers, and Staff  
From: Thomas Locke, MD, MPH, Jefferson County Health Officer  
Subject: **Measles in Washington State**

Cases of measles are occurring in three Washington State counties – San Juan, Whatcom, and Kitsap – along with a very large outbreak (>375 cases) in Southern British Columbia. To date there have been 12 confirmed cases in Washington State, the most recent being a Kitsap County man who travelled to San Juan County. Several of the known measles cases have travelled around the State during their contagious period, including time spent on the Washington State ferries and in restaurants and public gatherings.

**Cause:** Measles is a viral respiratory disease that starts with flu-like symptoms and progresses to fever and rash. Measles is one of the most contagious diseases known and is easily spread when an infected person breathes, coughs, or sneezes. If a person is susceptible to the infection (has not been vaccinated or had a previous measles infection) they can get measles just by walking into a room where someone with the disease is in or has been in the past couple of hours.

**Symptoms:** Measles causes fever, runny nose, cough, reddened eyes, and a rash that begins on the head and spreads downward covering the body. Symptoms begin 7-21 days after exposure and a person is highly contagious for 4-5 days before the rash appears and for 4 days afterward. People at highest risk to become infected with measles are those who are unvaccinated, pregnant women, infants under six months of age, and those with weakened immune systems.

**Complications:** Measles can be a serious disease with up to 30% of reported cases experiencing one or more complications. About 10% of children will develop an ear infection that can lead to hearing loss. 1 in 20 will develop a form of measles pneumonia that can be life threatening. About 1 in 1,000 will develop a brain infection (encephalitis), and 1 to 2 out of every 1,000 measles cases will die despite aggressive medical treatment. Complications from measles are more common among very young children (younger than 5 years of age) and in adults older than 20.

**Transmission:** Measles virus is released into the air when an infected person breathes, coughs, or sneezes. It is so contagious that anyone who is exposed to it and is not immune will probably get the disease

**Isolation and Quarantine of Measles Cases:** Unimmunized individuals exposed to measles must be excluded from school, work, and all public places from day 7 to day 21 after their exposure. **Unimmunized students will be excluded from school for the duration of any measles outbreak occurring within the community.**

# Protect Yourself and Your Family

**The best way to protect yourself from getting measles is to be up-to-date on your immunizations.**

This is a good opportunity to review your child's and your own immunization records to be sure you are immune to measles. The questions below are specific to measles, mumps, and rubella vaccine (MMR).

- **At what age should the first dose of MMR be given?**

The first dose of MMR should be given on or after the child's first birthday; the recommended age range is from 12-15 months.

- **When should children get the second MMR shot?**

The second dose is usually given when the child is 4-6 years old, or before he or she enters kindergarten or first grade. However, the second dose can be given earlier as long as there has been an interval of at least 28 days since the first dose.

- **Which adolescents and adults should receive MMR vaccine?**

All unvaccinated adolescents without a valid medical reason not to get the vaccine should have documentation of two doses of MMR. All adults born in or after 1957 should also have documentation of vaccination or other evidence of immunity. Persons born before January 1, 1957 are considered immune to measles because of likely exposure to natural disease prior to the availability of vaccines.

- **Which adults need two doses of MMR vaccine?**

Certain adults are at higher risk of exposure to measles, mumps, and/or rubella and may need a second dose of MMR unless they have other evidence of immunity; this includes adults who are:

- Students in postsecondary educational institutions;
- Healthcare workers;
- Persons planning to travel internationally;
- People who received inactivated (killed) measles vaccine or measles vaccine of unknown type during 1963-1967 should receive two doses of MMR vaccine

- **Is there a risk of autism or serious complications from MMR vaccine?**

No! Reports of a link between MMR vaccine and autism were based on fraudulent research that has been thoroughly debunked and discredited. MMR is a very safe vaccine. Natural measles, in contrast, can be deadly with up to 30% of cases experiencing a significant complication. Not getting vaccinated is an unwise and dangerous choice and jeopardizes the health of infants, pregnant women, and people with weakened immune systems who cannot be vaccinated and are highly susceptible to measles.