



Measles in schools and childcare centers – information for families

What is measles?

Measles is a very contagious illness that is caused by a virus. Before the measles, mumps, and rubella (MMR) vaccine became widely available, measles was a common childhood disease. Most children recovered from measles without problems, but many others did not. In some children, measles caused pneumonia, encephalitis (infection of the brain), and even death. Before the MMR vaccine, about 450 people died every year from measles. Most of these were previously healthy children.

MMR vaccine is very effective. One dose of MMR vaccine is 93% effective against measles infection and two doses are 97% effective. MMR vaccination rates have fallen in the US, which has led to an increase in cases and also some large outbreaks.

How can I be prepared in case my school/childcare center has a measles case?

Although the risk of a measles outbreak in St. Louis County is currently low, you can be prepared by checking on your child's vaccinations and making sure your school or childcare facility has copies of your child's immunization records. If you are not sure if your child is up to date on measles vaccine, you should call your child's pediatrician or look in their online health portal.

What happens if someone at our school/childcare center has measles?

Notification

If someone at your school/childcare center tests

positive for measles, all administrators, staff, parents, and students will be notified right away.

Safety Measures

Measles is very contagious and poses an elevated risk to schools and childcare centers. Because of this, anyone who is in the same school/childcare building as a person who is contagious with measles is considered exposed. An exposed person must provide evidence of immunity to measles in order to keep coming to school or childcare. If the exposed person cannot provide evidence of immunity, they must stay home from 5 days after their first exposure through 21 days after their last exposure. This means refraining from all public activities, including school, sports, extracurricular activities, social events, etc.

Immunity

Children in school and childcare settings are considered immune to measles if they can show one of the following:

- Laboratory confirmation of past measles infection.
- For children in grades K – 12: Documentation that the person received two doses of MMR vaccine, separated by at least 28 days and with the first being on or after the child's first birthday.
- For children in childcare or preschool: Documentation that the person received one dose of MMR vaccine on or after the child's first birthday.

My child is not considered immune to measles according to the criteria above.

What are my options if they are exposed to measles?

In most situations, a student who is not immune to measles and who is exposed will have to remain home from 5 days after their first exposure through 21 days after their last exposure. There are a few options for post-exposure prophylaxis (PEP) that might allow someone to return to school more quickly, but as you will see below, families should not rely on these options.

First, the exposed student may return to school if they receive a dose of MMR vaccine within 72 hours of their first measles exposure. However, it usually takes longer than 72 hours for someone to find out that they have been exposed to measles. This is because a person who has measles can infect others four days before the rash begins. It also takes time to diagnose a patient with measles and to identify people who were exposed.

Second, sometimes people who are exposed to measles can receive a product called immune globulin (IG) from a doctor. Not many people are able to receive IG, though, because it is hard to obtain and is usually only given to people who have a high-risk of developing severe illness (e.g., newborn infants or pregnant people). Even if a person is able to receive IG, they still may need to be excluded. DPH follows guidelines from the American Academy of Pediatrics that instruct health departments to consider the immune status and risk level of contacts when evaluating whether a student given IG can return to school. For example, exclusion would be necessary if the student attends a school with a low overall vaccination rate or a childcare center with children <12 months.

If my child gets a single dose of MMR vaccine, does that mean that they are considered immune if they are exposed again?

Not necessarily. Children in preschool only need one dose of MMR vaccine in order to be considered

immune. Children in grades K-12 need to receive a second dose of MMR vaccine at least 28 days after the first dose in order to be considered immune if they are exposed again.

I have a Religious Immunization Exemption on file with my school. Does my child still need to be excluded if they are exposed?

Yes. As noted on the [Missouri Department of Health and Senior Services Religious Immunization Exemption](#), "In the event of an outbreak of a vaccine-preventable disease within a particular facility, children who are not fully immunized or do not have documented laboratory evidence of immunity shall not be allowed to attend school or day care until the local health authority declares the designated outbreak or health emergency has ended." DPH considers a single case of measles in a school or childcare facility to be an outbreak and requires exclusion of everyone in that school or childcare who cannot demonstrate immunity according to the criteria above.

For more information, visit:

US Centers for Disease Control and Prevention:
<https://www.cdc.gov/measles/index.html>

American Academy of Pediatrics: <https://www.healthychildren.org/english/health-issues/vaccine-preventable-diseases/Pages/Measles.aspx>

