



Emergency Department

Measles

Information for Parents/ Carers

What is measles?

Measles is a highly infectious viral illness that can be very unpleasant and sometimes lead to serious complications. However in the majority of patients, who are otherwise normally fit and well, it is treated like any other viral infection and patients get better quickly. It's now uncommon in the UK because of the effectiveness of vaccination.

Who catches measles?

Anyone can get measles although it is much more common if you haven't been vaccinated or had it before.

It's most common in young children around 1-4 year old groups.

The infection usually clears in around 7 to 10 days.

How do you catch measles?

Measles is caught through direct contact with an infected person or through droplets when an infected person coughs or sneezes.

How infectious is measles?

Measles is very contagious.

In fact, 9 out of 10 people who aren't vaccinated for measles will get it if they are near an infected person.

How serious is measles?

Measles can be unpleasant but will usually pass in about 7 to 10 days without causing any further problems.

Once you've had measles, your body builds up resistance (immunity) to the virus and it's highly unlikely you'll get it again.

However, measles can lead to serious and potentially life-threatening complications in some people. These include infections of the lungs (**Pneumonia**) and brain (**encephalitis**).

People with measles can spread the disease as early as 4 days before the rash starts. They're most contagious while they have a fever, runny nose, and cough. Those with a weak **immune system** due to other conditions can spread the measles virus until they recover.

What are the symptoms of measles?

Measles starts with cold-like symptoms that develop about 10 days after becoming infected with the virus.

This is followed a few days later by the measles rash which typically starts behind the ears and spreads down the back of the neck.

The initial symptoms of measles can include:

- a runny or blocked nose
- sneezing
- watery eyes
- swollen eyelids
- sore, red eyes that may be sensitive to light
- a high temperature (fever), which may reach around 40C (104F)
- small greyish-white spots in the mouth (see below)
- aches and pains
- cough
- loss of appetite
- tiredness, irritability and a general lack of energy

Spots in the mouth:

A day or two before the rash appears, many people with measles develop small greyish-white spots in their mouth.

Not everyone with measles has these spots, but if someone has them in addition to the other symptoms listed above or a rash, it's highly likely they have the condition.

The spots will usually last for a few days.

The Rash:

The measles rash appears around two to four days after the initial symptoms and normally fades after about a week.

You'll usually feel most ill on the first or second day after the rash develops.

The rash:

- is made up of small red-brown, flat or slightly raised spots that may join together into larger blotchy patches
- usually first appears on the head or neck, before spreading outwards to the rest of the body
- is slightly itchy for some people
- can look like other childhood conditions, such as slapped cheek syndrome, roseola or rubella
- is unlikely to be caused by measles if the person has been fully vaccinated (had two doses of the MMR vaccine) or had measles before.

Complications:

Complications are more likely in children with weakened immune systems (such as those with leukaemia or HIV), those who are malnourished, children aged under 5 years and adults. Many malnourished children in the world die when they get measles, usually from a secondary lung infection (pneumonia). There are still occasional reports of children in the UK who die from complications of measles. These children have usually not been immunised.

More common complications include:

- Eye infection (conjunctivitis).
- Inflammation of the voice box (laryngitis).
- Ear infection causing earache.
- Infections of the airways, such as bronchitis and croup, which can be common.

Although these are distressing, they are not usually serious.

Less common complications of measles are:

- A fever fit (febrile convulsion) occurs in about 1 in 200 cases.
- Brain inflammation (encephalitis). This is a rare but very serious complication. It occurs in about 1 in 5,000 cases. It typically causes drowsiness, headache and being sick (vomiting)

which start about 7-10 days after the onset of the measles rash. Encephalitis may cause brain damage. Some children die from this complication.

- Liver infection (hepatitis).
- Pneumonia. This is a serious complication that sometimes develops. Typical symptoms include fast or difficult breathing, chest pains and generally becoming more ill.
- Squint is more common in children who have had measles. The virus may affect the nerve or muscles to the eye.

A very rare brain disease called subacute sclerosing panencephalitis can develop years later in a very small number of people who have had measles. This can sometimes occur several years after getting measles. This condition is nearly always fatal.

Can you prevent measles?

The best way to protect your child is to make sure they're immunised against measles. For most kids, measles protection is part of the measles-mumps-rubella vaccine (MMR) when they're 12 to 15 months old and again when they're 4 to 6 years old. About 95% of people achieve immunity during their first vaccine, and the rest develop it the second time they're vaccinated. Immunity lasts a lifetime.

The first vaccine can be given to babies as young as 6 months old if they will be traveling internationally. Talk to your doctor to see when the vaccine is needed.

How soon should a child be back at school after measles?

After 4 days from when the rash first appears if they are well enough. Also try to avoid close contact with babies, people who are pregnant and people with weakened immune systems.

When to see a doctor?

If you think you or your child may have measles, see a doctor to confirm the diagnosis. You should phone first because measles is so catching - the surgery may make arrangements so that your child doesn't wait in the waiting room and risk infecting other people. Most children recover fully with no complications or treatment. However, you should see a doctor again if symptoms get worse, or if you suspect a complication.

If your child has been tested for measles, you will be contacted with the results and information on advice on how to manage the rest of your family and keep others safe.

Easing the symptoms of measles:

It can help to:

- rest and drink plenty fluids, such as water, to avoid dehydration
- take paracetamol and/or ibuprofen to relieve a high temperature
- use cotton wool soaked in warm water to gently remove any discharge from your child's eyes

What if your child has measles and you are pregnant?

Measles when you're pregnant could harm your baby.

It can cause:

- miscarriage or stillbirth
- premature birth (Before the 37th week of pregnancy)
- your baby having a low birthweight

It's important to get medical advice if you're pregnant and have been in close contact with someone who has measles.

General Advice - When to seek help again urgently:

RED	<p>If your child:</p> <ul style="list-style-type: none"> • Has a rash does not fade when a glass is pressed against it and feels very unwell – for example, it's painful to look at bright lights or has a stiff neck as this could be meningitis. • Refuse eating, drinking, feeding • Not passing urine or less than two wet nappies in 12 hours • shortness of breath • a high temperature that does not come down after taking paracetamol or ibuprofen • confusion • seizures (fits) 	<p>Ring 999 immediately for help or to come to the A&E.</p>
AMBER	<ul style="list-style-type: none"> • You or your child have been in close contact with someone who has measles and have not had measles before, or you've not had 2 doses of the MMR vaccine • you've been in close contact with someone who has measles and you're pregnant – measles can be serious in pregnancy • You or your child have a weakened immune system and think you have measles or have been in close contact with someone with measles. • Your child becomes unwell. 	<p>Immediately contact your GP or call NHS 111 and make an appointment for your child to be seen that day face to face. If your child already under Paediatrician, you can contact the Medical Day Unit (MDU) on 0151 252 5767, Mon-Fri 9-5pm, if you are concerned, or need further advice about joint or tummy problems.</p>
GREEN	<p>If your child:</p> <ul style="list-style-type: none"> • Has rash that fades when a glass is pressed against it. • Has temperature • Bony aches • Watery discharge from eyes 	<p>Provide your child rest and encourage drinking plenty fluids, such as water, to avoid dehydration. Give paracetamol or ibuprofen to relieve a high temperature – do not give aspirin to children under 16 years. Use cotton wool soaked in warm water to gently remove any crusts from your or your child's eyes. Or contact your GP for advice and they can arrange for your child to be seen.</p>

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment. This information can be made available in other languages and formats if requested.

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