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Adult Measles Vaccination Guidance

Background: Most adults in the U.S. are at low risk for measles.

• From January 1 to May 24, 2019, 940 individual cases of measles have been confirmed in 26 states. This is an increase of 60 cases from the previous week. This is the greatest number of cases reported in the U.S. since 1994 and since measles was declared eliminated in 2000. Ohio has no confirmed measles cases as of May 30, 2019.

<u>Recommendations</u>: One dose of measles, mumps, and rubella (MMR) vaccine, or other presumptive immunity, is sufficient for most U.S. adults born on or after 1957.

Other presumptive evidence of measles immunity includes:

- Birth before 1957
- Laboratory evidence of immunity
- Laboratory confirmation of disease

Certain adults are considered to be high risk and need two doses of MMR, each dose separated by at least 28 days, unless they have other presumptive evidence of measles immunity, as listed above. These adults include:

- Students at post-high school education institutions
- Healthcare personnel
- International travelers

Some adults may have received a killed measles vaccine during the 1960's. The killed measles vaccine was available from 1963 to 1968 and administered to less than 5% of adults. The ACIP recommendation is to re-vaccinate anyone who received the killed vaccine. However, this only affects a very small proportion of adults that were vaccinated during those years.

During outbreaks, health departments may provide additional recommendations to protect their communities. The at-risk population is defined by the local and state health departments, depending on the epidemiology of the outbreak. Thus, if the outbreak is affecting preschool-aged children or adults with community-wide transmission, a second dose should be considered for children aged 1 through 4 years or adults who have received 1 dose. CDC is working on clinical guidance for protection of infant travelers to areas within the United States that are experiencing sustained measles transmission.

Clarification of recommendations:

- There is no recommendation for an adult catch-up program for persons born before 1989
- There is no recommendation for vaccination campaigns among adults or individuals in non-affected areas to prevent measles outbreaks