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PUBLIC HEALTH ADVISORY

To: Health Care Providers
From: Dr. Siiri Bennett, State Epidemiologist
Subject: **MMR Vaccine Guidance**
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Abstract: Over the past few weeks, multiple news outlets have reported on the MMR vaccine, previous vaccine recommendations, and the potential for some adults to need additional doses of MMR vaccine. This HAN message contains the most current MMR vaccine recommendations from the federal Centers for Disease Control and Prevention (CDC).

MMR Guidance

Over the past few weeks multiple news outlets have reported on the MMR vaccine, previous vaccine recommendations, and the potential for some adults to need additional doses of MMR vaccine. Below are the most current MMR vaccine recommendations from the federal Centers for Disease Control and Prevention (CDC):

CHILDREN (Ages 6 months – 18 years):

- Routine Schedule: 2-dose series, usually Dose 1 at 12-15 months and Dose 2 at 4-6 years. Dose 2 may be administered as soon as 4 weeks after Dose 1.
- Special Situations:
 - Infants aged 6-11 months who will be traveling internationally may receive 1 dose before departure; then revaccinate with 2 doses, Dose 1 at 12-15 months and Dose 2 as early as 4 weeks later. One dose may be considered for this age group during a U.S. measles outbreak.

ADULTS (Ages 19 years and Older):

- Routine Schedule: 1 dose for those with no evidence of immunity to measles, mumps, or rubella
 - Evidence of immunity includes: Born before 1957 (except health care personnel), documentation of receipt of MMR vaccine, or laboratory evidence of immunity or disease (diagnosis of disease without laboratory confirmation is not evidence of immunity).
- Special Situations:
 - Pregnancy with no evidence of immunity to rubella should receive 1 dose MMR vaccine after pregnancy, prior to discharge from health care facility.
 - Non-pregnant women of child-bearing age with no evidence of immunity to rubella should receive 1 dose MMR vaccine.
 - Patients with HIV infection and CD4 count ≥ 200 cells/ μ L for at least 6 months and no evidence of immunity to measles, mumps, or rubella should receive a 2-dose series of MMR vaccine at least 4 weeks apart; MMR vaccine is contraindicated in people with HIV infection who have a CD4 count < 200 cells/ μ L.
 - Patients with severe immunocompromising conditions should not receive MMR vaccine; vaccination is contraindicated.
 - Students in postsecondary educational institutions, household or close personal contacts of immunocompromised persons, and international travelers with no evidence of immunity to measles, mumps, or rubella should receive 1 dose MMR vaccine if 1 dose was previously received, or a 2-dose series of MMR vaccine at least 4 weeks apart if none was previously received.
 - Adults vaccinated with 1 dose MMR vaccine from 1963-1967 who are unsure what type of vaccine was given, or who know the dose was inactivated, should be revaccinated with 1 dose MMR vaccine if low-risk, or with 2 doses MMR if high-risk (high-risk individuals

- include health care personnel, international travelers, and students at post-high school educational institutions).
- Adults vaccinated with MMR before 1989 who received 1 dose live MMR vaccine are considered to have immunity, unless they are in a high-risk group (i.e. health care personnel, international travelers, or students in a post-high school educational setting), and then should receive an additional 1 dose MMR vaccine.
 - Health care personnel born in 1957* or later with no evidence of immunity to measles, mumps, or rubella should receive a 2-dose series of MMR vaccine at least 4 weeks apart for protection against measles and mumps, or 1 dose MMR vaccine for protection against rubella. During an outbreak of measles or mumps, healthcare facilities should recommend 2 doses of MMR vaccine separated by at least 4 weeks for unvaccinated healthcare personnel regardless of birth year who lack laboratory evidence of measles or mumps immunity or laboratory confirmation of disease.

*The vast majority of people born before 1957 are likely to have been infected with measles, mumps, and rubella and presumed to be protected against these diseases. However, health care personnel born before 1957 should consider getting a 2-dose series of MMR vaccine at least 4 weeks apart for protection against measles and mumps, or 1 dose MMR vaccine for protection against rubella.

Adults and children who have been exposed to a confirmed measles case should review their vaccination status and discuss possible vaccination with their healthcare provider.

For more information, please contact MIP at 207-287-3746 or immunizeme.dhhs@maine.gov

Additional Resources:

US CDC ACIP Schedules:

- Recommended Child & Adolescent Schedule: <https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>
- Recommended Adult Schedule: <https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>

Ask The Experts: <http://www.immunize.org/askexperts/>

U.S. CDC National Immunization Program: <https://www.cdc.gov/vaccines/index.html>