

Protecting Infants Against Measles

An Overview for Parents and Caregivers



2026 is on track to be [the worst year for measles cases in decades](#) in the United States, with outbreaks reported in multiple states. Amid the increase in cases, this resource provides an overview for parents and caregivers who want to protect their infant against measles.

What is measles and how does it spread?

Measles is a [highly contagious](#) disease that causes a high fever, widespread rash, cough, and red eyes. It can lead to life-threatening complications, like brain inflammation and pneumonia.

The virus travels through airborne droplets and can spread when a person coughs, sneezes, or talks. These viral droplets can remain in a room up to two hours after the infected person has gone. Measles can also spread through close contact – like sharing utensils or touching contaminated surfaces – and from a pregnant person to their fetus or baby during pregnancy, delivery, or while breastfeeding.

Why is measles so dangerous?

Measles is [highly contagious](#) and there is no cure or medication to treat measles.

- 1 in 5 children with measles becomes sick enough to need hospitalization
- 1 in 20 children with measles gets pneumonia
- Approximately 1 to 3 out of every 1,000 children who get measles die from their infection

How do I protect my baby against measles?

The best protection against measles is vaccination – this includes vaccination for the infant, other members of your household, loved ones, or caregivers. Since the measles vaccination program started, the incidence of measles has decreased by over 99% in the United States.

The [American Academy of Pediatrics](#) recommends children receive 2 doses of measles, mumps, rubella (MMR) or measles, mumps, rubella and varicella (MMRV) vaccine. Routine timing for these vaccines is at the following ages:

- Dose 1: 12 to 15 months
- Dose 2: 4 to 6 years

For infants under one year old, immunocompromised individuals, or unvaccinated individuals, it is strongly recommended to avoid travel to areas with [active measles outbreaks](#).

Even if there is not an ongoing outbreak in your area, continue to take [standard precautions](#) to keep everyone healthy:

- Don't allow strangers to hold or play with your baby
- Keep your baby away from anyone with a fever, cough, or other respiratory symptoms
- Make sure you and anyone in contact with your baby washes their hands regularly



When should I consider early vaccination?

A pregnant person who has been vaccinated against measles prior to giving birth can pass the antibodies to their child. These antibodies may provide protection against severe disease for the first six months of a baby's life, or possibly longer.

In some situations, such as living in or traveling to an outbreak area, early vaccination between 6 and 12 months of age is possible. Talk to your healthcare provider or pediatrician about the possibility of early vaccination.

What should I do if my baby has been exposed to measles or is showing symptoms of measles?

If you or your baby has been exposed to measles, contact your healthcare provider or pediatrician right away, but **before** you attempt to see them in-person.

Because measles is highly contagious, you will put others at risk of exposure at the doctor's office or care facility. A healthcare provider will share more information on the safest way to make an appointment.

Is there a treatment for measles?

No. There are no antibiotics or antiviral medications that treat measles.

Vitamin A cannot cure or prevent measles. In some cases, it may be administered by a healthcare provider to reduce the risk of serious complications. Vitamin A should only be administered by a healthcare provider – not at home – because too much Vitamin A can lead to a serious condition called Vitamin A toxicity.

Do parents or caregivers need a measles booster?

Most people born or living in the U.S. before 1957 are considered immune to measles because they have likely had it.

Adults born after 1957 or those who know they have not had measles can still receive the MMR or MMRV vaccine as an adult. The minimum timing between doses one and two is 28 days for MMR and 90 days for MMRV. Adults who received the vaccination as a child and are concerned about decreasing immunity, or who may be traveling to a location with a measles outbreak, can test their immunity with a titer test.

SOURCES

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