

Measles Overview and Planning in Virginia

Commissioner's Advisory Council on Health Disparity and Health Equity

Meredith Robinson, Vaccine Preventable Diseases
Epidemiologist, Division of Surveillance and Investigation

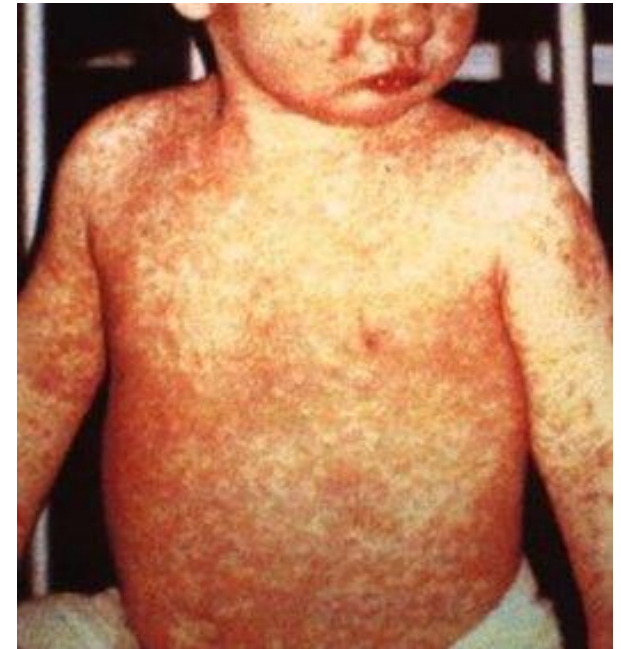
Christy Gray, Division of Immunization Director

Maria Reppas, Communications Director

July 8, 2025

Measles Clinical Features

- **Measles is a highly contagious viral illness** that spreads easily through the air when an infected person breath, coughs, or sneezes.
- Over 90% of people exposed to the virus will develop measles if they are not immune.
- Measles is immediately reportable in Virginia.
- **Transmission:** Measles spreads from person to person through the air or by direct contact with nose or throat discharges from someone who is infected.
 - Anyone on the same air handling system as someone who is infectious is considered exposed
 - Measles virus can survive in the air for up to 2 hours
- **Incubation period:** 7-21 days
 - **Prodrome:** fever, cough, coryza, conjunctivitis, Koplik spots
 - **Rash:** maculopapular, begins on face and spreads downwards
- **Infectious period:** 4 days before – 4 days after rash onset



Source

Measles Rash on Dark Skin Tones

- The measles rash, which is typically described as red and blotchy on lighter skin, may appear darker brownish-red, purple, or even difficult to see on darker skin tones.
- It is important for providers to be aware of the various ways a measles rash may appear of patients with dark skin tones so they can be tested quickly and receive appropriate care.



[Source](#)



[Source](#)



[Source](#)

Measles in Virginia

- **Three cases of measles have been reported in Virginia in 2025.**
 - A pre-school-age child (0-4 years) was diagnosed with measles in April following international travel.
 - Multiple healthcare facilities were identified as potential exposure locations. No secondary cases were reported.
 - A teenager (13-17 years) was diagnosed with measles in May following international travel.
 - Multiple healthcare facilities and public locations were identified as potential exposure sites. One additional case was reported in a child (0-4 years) following these exposures.
- VDH has responded to multiple measles exposures at airports and public locations after international travelers and residents of neighboring jurisdictions traveled through Virginia while infectious.
- VDH is closely monitoring measles activity within the United States and abroad. VDH continues to use active and passive surveillance methods to monitor for suspect measles cases requiring public health investigation.
- VDH is partnering with local health district team to distribute education materials to healthcare providers on measles testing, reporting, and infection control protocols.

Measles Public Health Response

1. **Isolate** the infected individual.
2. **Notify** VDH to arrange measles testing.
3. **Confirm** the diagnosis.
4. **Identify** those potentially exposed to each case, determine if exposed persons are susceptible.
5. **Implement** disease control measures for susceptible persons to prevent disease (e.g., vaccine, IG) and provide health education.
6. **Distribute** information on measles exposures to the public and local healthcare providers.



[Source](#)

Measles Response Readiness

- VDH is partnering with local health district teams to identify communities at increased risk for measles outbreaks (e.g., under-vaccinated).
 - Establishing relationships with community leaders
 - Crafting tailored messaging on measles symptoms and recommendations for reducing measles spread.
- Local health departments are also working with providers to ensure they have access to resources for measles testing and post-exposure treatment.
 - Distributing measles test kits to healthcare providers without viral transport media (VTM).
 - Ensuring swift access to measles vaccine and immune globulin

Measles Vaccination

The best way to protect against measles is to get the measles, mumps, and rubella (MMR) vaccine.

All children are recommended to receive 2 doses of MMR vaccine at 12-15 months and 4-6 years of age.

Most people vaccinated will be protected for life.

High rates of vaccination have made measles less common in the United States.

Most cases in Virginia are a result of unvaccinated individuals traveling to areas of the world where the disease is endemic.

Pockets of low vaccination increase the chance of an outbreak in Virginia.



She thinks
“Measles”
live in shells.

**Childhood vaccinations
keep it that way**

Measles isn't a sea creature, it's a very contagious virus that can cause pneumonia (infection of the lungs) and encephalitis (swelling of the brain). Childhood vaccinations continue to help protect kids from measles. Let's keep it that way.

Talk to your child's healthcare provider about keeping up to date with childhood vaccinations.



Virginia's Immunization Program

Mission: Reduction of morbidity and mortality associated with vaccine-preventable diseases in Virginia.

Vaccine Distribution and Access

- Vaccines for Children (VFC) Program
- Vaccines for Adults (VFA) Program



Data

- Virginia Immunization Information System (VIIS)
- Surveys
- Consumer Access to Vaccine Records



Policy

- School Vaccine Requirements Policy

Case Management and Support

- Coordination with Surveillance and Investigation, and Central Pharmacy



Education, Outreach, and Advocacy

- ImmunizeVA



Be sure
they're
immunized
before the
first bell.

VDH VIRGINIA
DEPARTMENT
OF HEALTH

VDH VIRGINIA
DEPARTMENT
OF HEALTH

Virginia MMR Vaccine Dashboard

Locality Name

(All)

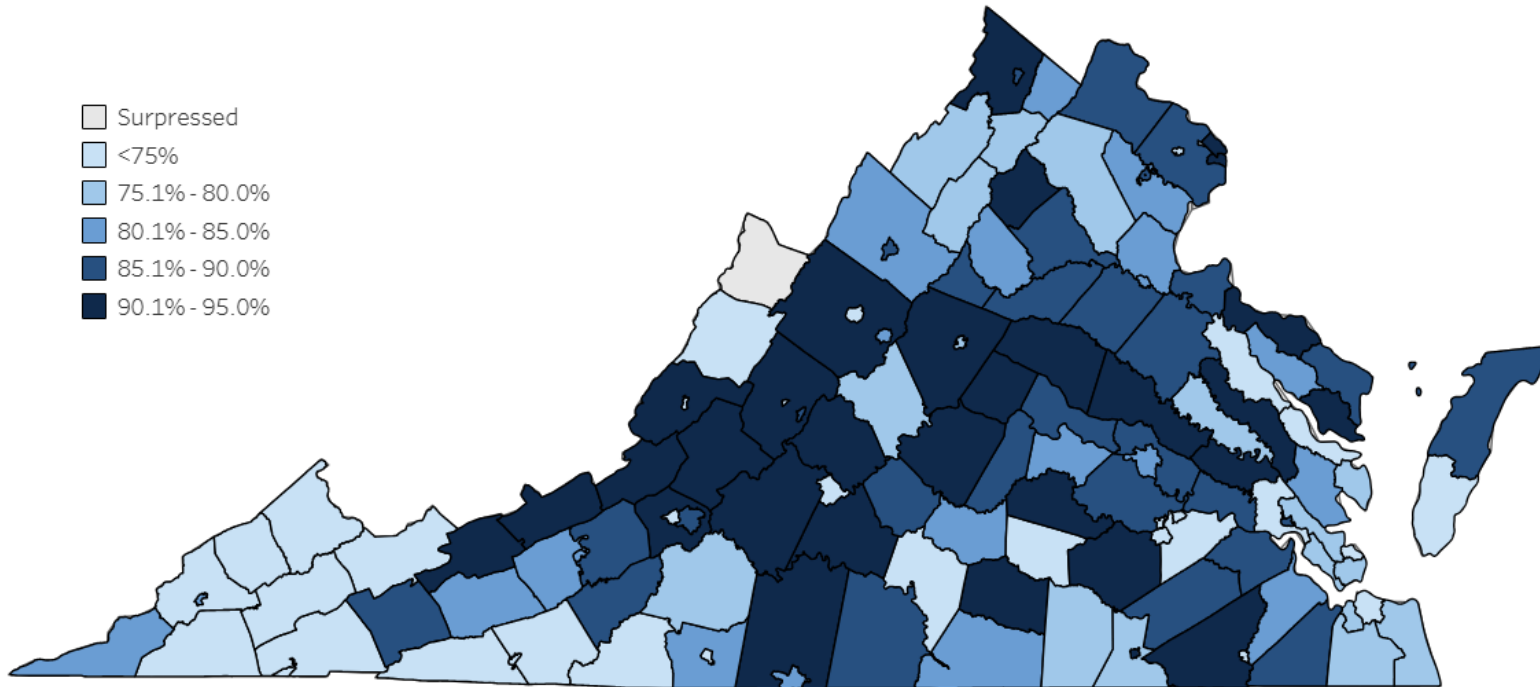
Age Group

2 year olds at least one dose

Data refreshed on : 6/17/2025

The MMR Vaccination Rate for 2 year olds in Virginia is 88.9% (86,366 people)

- Surpressed
- <75%
- 75.1% - 80.0%
- 80.1% - 85.0%
- 85.1% - 90.0%
- 90.1% - 95.0%



Denominator – Our single age population denominator estimate can disproportionately affect the accuracy of vaccination rates in areas with small populations.

Numerator – In localities with small populations, missing a few vaccine doses from a provider can have an outside effect on the accuracy of vaccination rates.

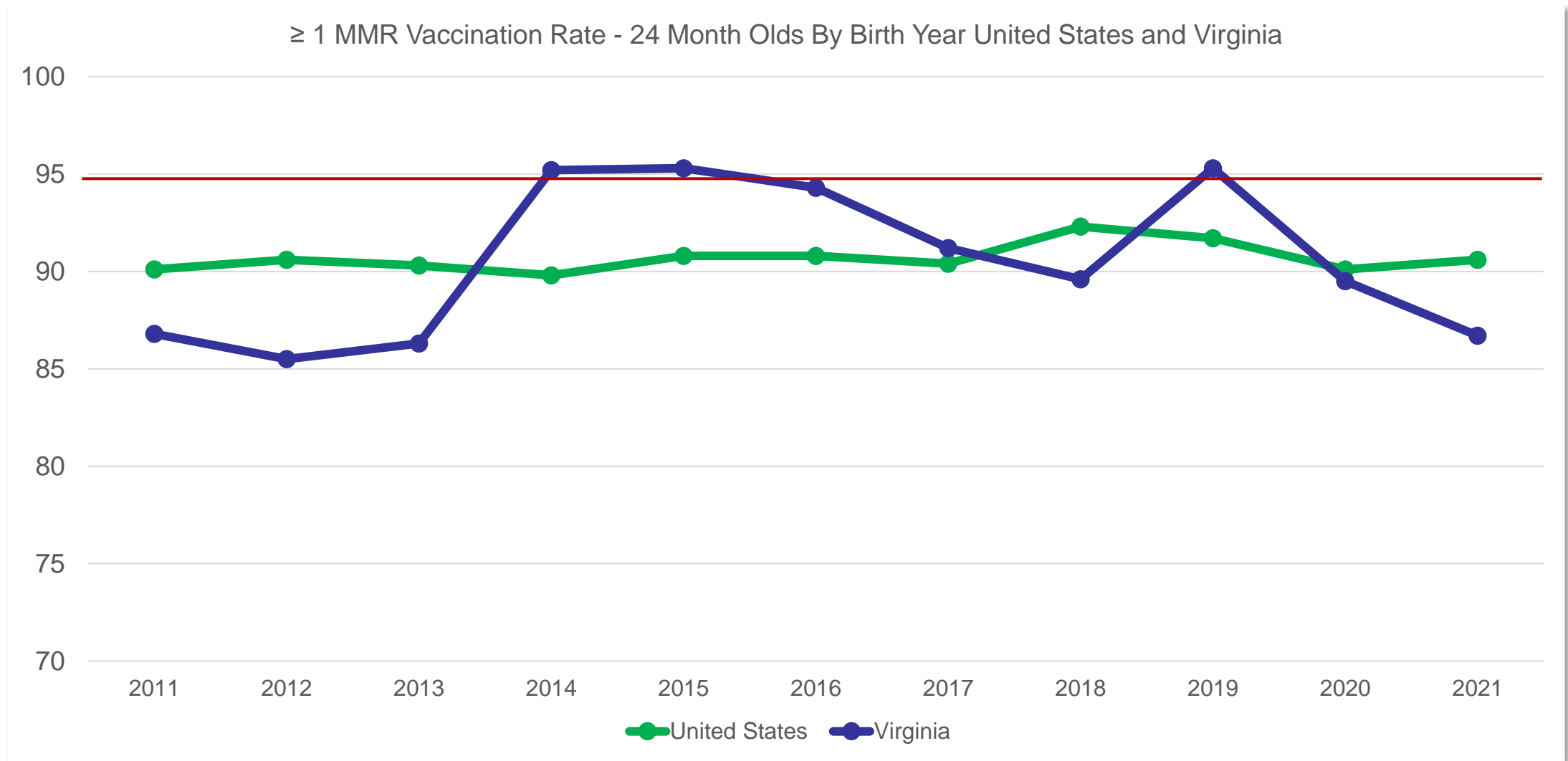
One Dose vs Series Completion – vaccines split on different records may inaccurately increase the dose rate and decrease the series complete rate.

Demographics – Race/Ethnicity has higher unknown rates in childhood vaccination data.

Vaccines administered outside of Virginia may not be included in VIIS and may not include demographic data.

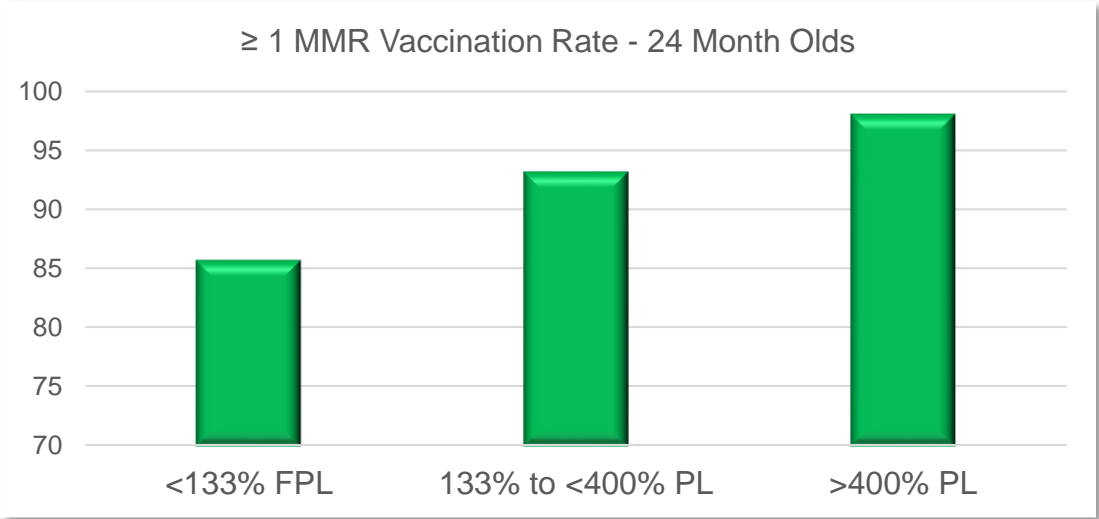
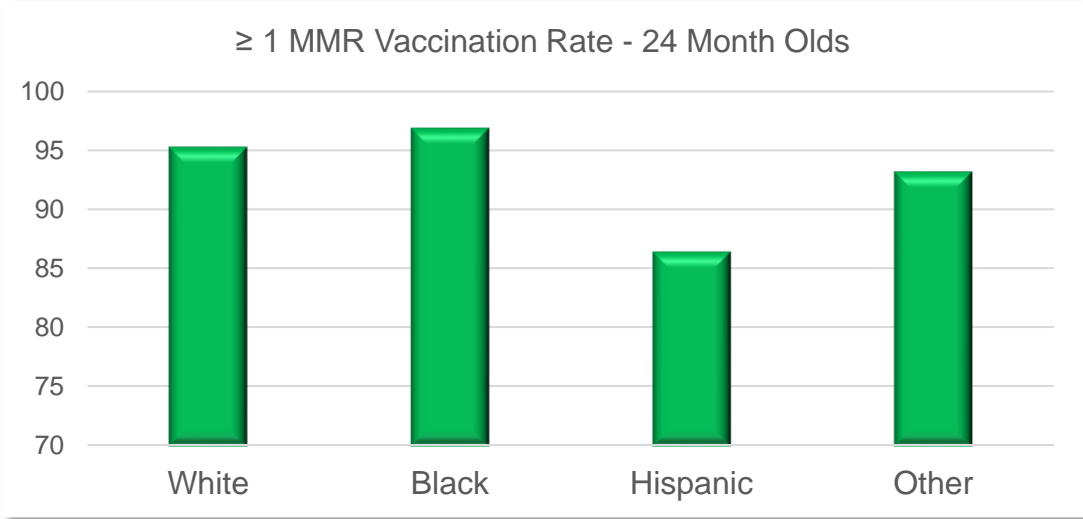
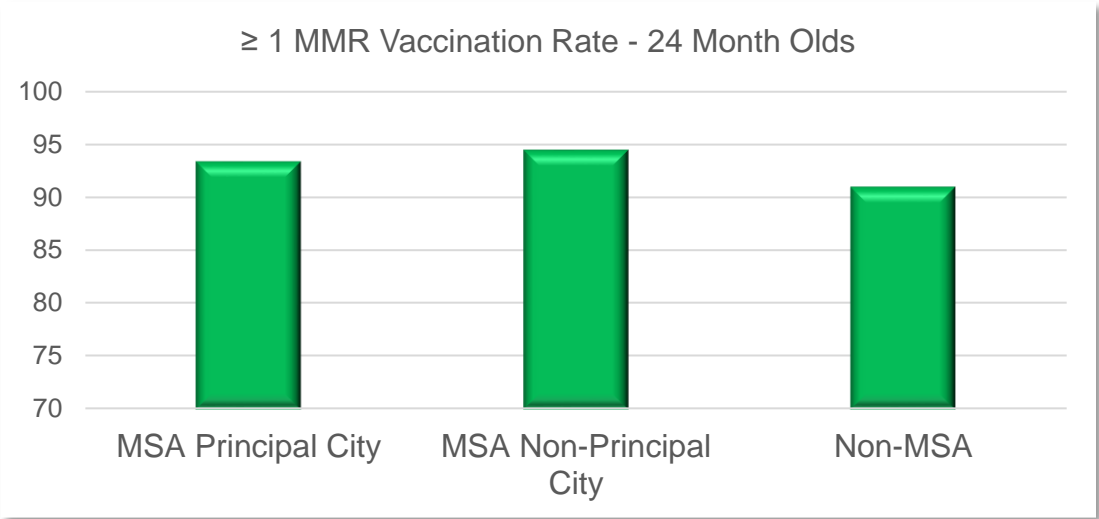
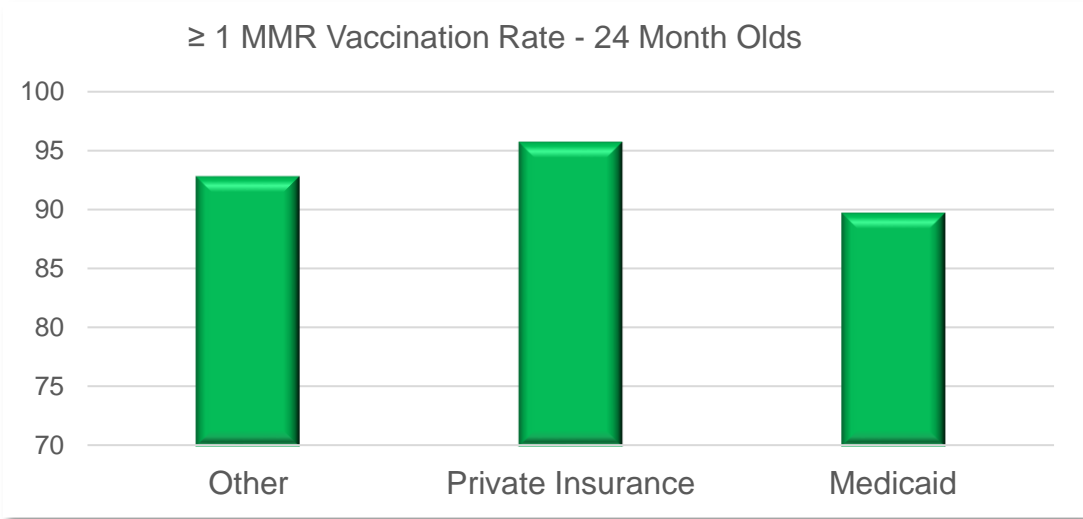
Data Quality efforts are being identified and will continue to be addressed to improve these dashboards.

Measles Vaccination Trends



Source: [CDC Vaxview](#) Children Born 2011 – 2021 National Immunization Survey-Child

Measles Vaccination in Virginia by Social Determinant of Health



Source: [CDC Vaxview](#) Children Born 2016-2019 National Immunization Survey-Child 2017-2022

Communication & Outreach Strategies

Proactive Communications Efforts

- Strategic public awareness campaigns
 - Healthy Back to School campaign [annual]
 - Provides resources and information on immunizations, well-child visits, COVID-19, and mental health
 - Includes information on measles and the MMR vaccine
 - Target audience: parents and legal guardians of minors
 - Duration: May-July

Communication & Outreach Strategies

- Holiday campaign [annual]
 - Publicize resources and information on flu, RSV, COVID-19, and immunizations before people congregate for the holidays
 - Reminds Virginians to stay up-to-date on their immunizations, including the MMR vaccine
 - Target audience: all Virginians, specifically immunocompromised populations
 - Duration: September-December

Communication & Outreach Strategies

Other communications tactics

- Clinician letters
 - <https://www.vdh.virginia.gov/clinicians/clinician-letters/>
 - Two include measles [March and June]
- 2025 statewide news releases
 - Virginia Health Officials Investigating Another Potential Measles Exposure in Northern Virginia [in draft as of June 25]
 - Virginia Health Officials Investigating Potential Measles Exposure in Northern Virginia [June 14]

Communication & Outreach Strategies

- Virginia Health Officials Confirm Third 2025 Measles Case in the State [June 5]
- Virginia Health Officials Confirm Second 2025 Measles Case in the State [May 23]
- Virginia Health Officials Confirm First 2025 Measles Case in the State [April 19]

Communication & Outreach Strategies

- Social media content
 - Social media toolkits and templates added to the Comms Hub for LHDs to use on their social media accounts
 - Flyers and outreach materials for the LHDs to use at events

Communication & Outreach Strategies

- Radio ad buys and strategic partnerships
 - Interviews with local community leaders and other familiar faces
 - COVID-19 vaccine example
- Newspaper ad buys
- Billboards in targeted areas
- Promote VDH's call center

Communication & Outreach Strategies

- VDH Call center
 - 1-877-829-4682
 - Monday-Friday, 8 AM-5 PM
- Website content
 - <https://www.vdh.virginia.gov/measles/>
 - MMR vaccine data dashboard [published June 14]
- Communications Hub
 - <https://sites.google.com/view/covidcommshub/home>

Communication & Outreach Strategies

Outreach [local level]


- Local health districts (LHD)
- Vaccination events
- Join in-person community events
- Media outreach
 - Letters to the editor (LTE)
 - Guest essays
 - Interviews with local and regional media outlets
- Individual LHD social media accounts and websites

Communications & Outreach Strategies

Examples: Roanoke City & Alleghany LHD

Do you need a Measles Vaccine?

Some adults born before 1989 may want to talk to their healthcare providers about whether they need a booster MMR dose.



BORN BEFORE 1957
Nope. People born before 1957 are generally considered to have natural immunity to measles due to widespread exposure.

VACCINATED BETWEEN 1957-1962
Maybe. Check with your doctor.

VACCINATED BETWEEN 1963-1967
Yes! The measles vaccine you received is considered ineffective and you will need another dose.

VACCINATED BETWEEN 1968-1989
Maybe. Check with your doctor.

VACCINATED AFTER 1989
Nope. If you received two doses your vaccines are considered effective.

VDH VIRGINIA DEPARTMENT OF HEALTH

ROANOKE CITY and ALLEGHANY HEALTH DISTRICTS

¿Necesita una vacuna contra el sarampión?

Algunos adultos nacidos antes de 1989 deberían consultar con su médico para ver si necesitan una dosis de refuerzo de la vacuna triple (sarampión, paperas y rubéola - MMR por sus siglas en inglés).



NACIDOS ANTES DE 1957
No. Se considera que las personas nacidas antes de 1957 tienen inmunidad natural al sarampión debido a la exposición generalizada.

VACUNADOS ENTRE 1957 Y 1962
Quizás. Consulte con su médico.

VACUNADOS ENTRE 1963 Y 1967
¡Sí! La vacuna contra el sarampión que recibió se considera ineficaz y necesitará otra dosis.

VACUNADOS ENTRE 1968 Y 1989
Quizás. Consulte con su médico.


VACUNADOS DESPUÉS DE 1989
No. Si recibió dos dosis, sus vacunas se consideran eficaces.

VDH VIRGINIA DEPARTMENT OF HEALTH


ROANOKE CITY and ALLEGHANY HEALTH DISTRICTS

Communications & Outreach Strategies

Examples: Roanoke City & Alleghany LHD

**VDH** VIRGINIA DEPARTMENT OF HEALTH
To protect the health and promote the well-being of all people in Virginia

**RCAHD Health Updates
Newsletter**
04.02.25

**ROANOKE CITY
and ALLEGHANY
HEALTH DISTRICTS**
Your Partner in Community Wellness

*Health updates for residents of the
Roanoke City & Alleghany Health Districts (RCAHD)
Alleghany, Botetourt, Covington, Craig, Roanoke City, Roanoke County, Salem
Forwarded from a friend? [Subscribe here](#)*

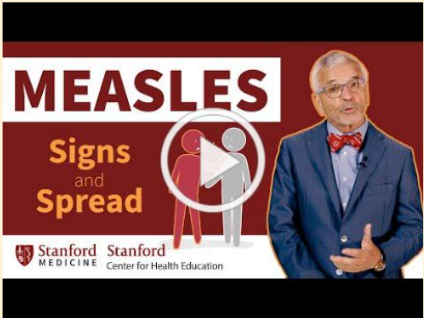
Measles on the Rise in 2025: What You Need to Know

A resurgence of measles in recent months has lifted the disease into national headlines. Over 500 cases have now been reported in more than 20 states, most recently in [Colorado](#), with a confirmed case on March 31. (The [CDC dashboard](#) is updated on Fridays.)

As of April 1, Virginia is not among the states with a confirmed case, but there have been [several exposures](#) in recent weeks from infected people passing through nearby airports and train stations.

Locally, RCAHD health department staff investigate any suspected cases of measles after they have been reported to us by healthcare providers.

[Read more about measles on the VDH website](#)



MEASLES
Signs and Spread

Stanford MEDICINE Center for Health Education

The Facts About Measles 6min (General public safety message, courtesy Stanford Medicine)

Questions?

Christy Gray, Division of Immunizations Director, christy.gray@vdh.virginia.gov

Maria Reppas, Communications Director, maria.reppas@vdh.virginia.gov

Meredith Robinson, Vaccine Preventable Diseases Epidemiologist, Division of Surveillance and Investigation, meredith.robinson@vdh.virginia.gov