

Recommendations for the use of MMR vaccine in adults



Year of Birth	Vaccination History	Recommendations for Measles Vaccination for Travellers
1990 - Present	2 doses MMR or previous measles infection.	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps containing vaccination. ¹
	No history of MMR or measles infection.	2 doses of MMR, at least 1 month apart, preferably 3 months apart. ²
1980 - 1990	2 doses of MMR or other measles vaccine or measles infection.	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps containing vaccination.
	At least 1 dose of measles vaccine. ³	1 dose MMR (2 doses if no history of mumps vaccination).
	Women of child-bearing age, who may have had a single dose of measles vaccine. PREGNANT WOMEN SHOULD NOT BE GIVEN MEASLES VACCINE.	With an uncertain vaccination history, it is preferable to give 2 doses of MMR, at least 1 month apart but preferably 3 months apart, to ensure that the patient has a documented completed primary course of measles vaccination. Ensure that the woman is not pregnant before commencing vaccination. ⁴
	No history of measles vaccination or measles infection.	2 doses of MMR, at least 1 month apart, preferably 3 months apart.

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1970 - 1979	2 doses of MMR or other measles vaccine. Measles infection.	No further vaccinations required but check history to determine if fully protected against mumps as may never have received a mumps containing vaccination.
	No history of MMR or measles infection.	2 doses of MMR, at least 1 month apart, preferably 3 months apart.
Pre-1970	Likely to have had all three natural infections and less likely to be susceptible.	Vaccine should be offered to travellers if there is no reliable history of disease or immunisation and they are considered to be at high risk of exposure. (e.g. VFR, mixing closely with local population)

Notes:

1. Mumps: many young people have not received mumps vaccine, even if they have received vaccines containing measles and rubella. They may be under the impression that they have received mumps vaccine and are protected. Prior to 1988 there was no routine vaccination against mumps in the U.K. In 1994 MR was used because sufficient quantities of MMR were not available. Two doses of MMR are required at least 1 month apart (preferably 3) to provide full protection against mumps.
2. Ideally, the 2 doses of MMR should be 3 months apart as this produces a better immune response. While it is desirable to give a full primary course of 2 doses, in practice, if there is insufficient time, giving a single dose to a traveller will provide good protection (approximately 90%).
3. Measles vaccine was introduced in the U.K. in 1968 and uptake was good from 1980s. An MR (measles/rubella vaccine) campaign in schools in 1994, followed up using a second dose (MMR) in 1996 makes it likely that people in school between these dates have had at least one dose of measles vaccine.
4. If exposed to measles in pregnancy, a clear record of a full course of MMR indicates that HNIG would not be required

Source: PHE Green Book: Immunisation against Infectious Diseases (2006, updated online September 2014)