VACCINE FREE: Now What?

MEASLES ESSENTIALS

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Measles Essentials

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Measles, also called rubeola, is a highly contagious — but rare — respiratory infection that's caused by a **virus**. It causes a total-body skin rash and flu-like symptoms, including a fever, cough, and runny nose.

Since measles is caused by a virus, symptoms typically go away on their own without medical treatment once the virus has run its course. But a child who is sick should be sure to receive plenty of fluids and rest, and kept from spreading the infection to others.

Part 1: The Disease and Its Signs and Symptons

Signs and Symptoms

While measles is probably best known for the full-body rash that it causes, the first symptoms of the infection are usually a hacking cough, runny nose, high fever, and watery red eyes. Another marker of measles are Koplik's spots, small red spots with blue-white centers that appear inside the mouth.

The measles rash typically has a red or reddish brown blotchy appearance, and first usually shows up on the forehead, then spreads downward over the face, neck, and body, then down to the feet.

Measles is highly contagious. When someone with measles sneezes or coughs, he or she can spread virus droplets through the air and infect others.

Measles is very rare in the United States. Due to widespread immunizations, the number of U.S. measles cases has steadily declined in the last 50 years. There were thousands of cases of the measles in 1950, but in 2002 there were just 44. Most of the time, the cases occur in settings where there are lots of kids, some of whom haven't gotten vaccinated or whose immunity has diminished since they got the vaccine.

The most important thing you can do to protect kids from measles is to have them vaccinated according to the schedule prescribed by your doctor.

Conventional Prevention

Infants are generally protected from measles for 6 to 8 months after birth due to immunity passed on from their mothers. Older kids are usually immunized against measles according to state and school health regulations.

For most kids, the measles vaccine is part of the measles-mumps-rubella immunizations (MMR) given at 12 to 15 months of age and again at 4 to 6 years of age. Measles vaccine is not usually given to infants younger than 12 months old. But if there's a measles outbreak, the vaccine may be given when a child is 9 months old, followed by the usual MMR immunization at 12–15 months.

As is the case with all immunization schedules, there are important exceptions and special circumstances. Your child's doctor should have the most current information regarding recommendations about the measles immunization. Measles vaccine should not be given to pregnant women, or to kids with active tuberculosis, leukemia, lymphoma, or people whose immune systems are suppressed for some reason.

Also, the vaccine shouldn't be given to kids who have a history of severe allergic reaction to gelatin or to the antibiotic neomycin, as they are at risk for serious reactions to the vaccine. These kids can be protected from measles infection with an injection of antibodies called gamma globulin if it's given within 6 days of exposure — these antibodies can either prevent measles or make the symptoms less severe.

Measles vaccine occasionally causes side effects in kids who don't have any underlying health problems. In about 10% of cases the measles vaccine causes a fever between 5 and 12 days after vaccination, and in about 5% of cases the vaccine causes a rash, which isn't contagious and usually fades on its own.

Treatment

The symptoms of measles usually lasts for about 2 weeks. It is highly contagious, and 90% of people who haven't been vaccinated for measles will get it if they live in the same household as an infected person.

A child who is diagnosed with measles should be closely monitor for fever and other symptoms to detect any complications. In some cases, measles can lead to other health problems, such as croup, and infections like bronchitis, bronchiolitis, pneumonia, conjunctivitis (pinkeye), myocarditis, and encephalitis. Measles also can make the body more susceptible to ear infections or other health problems caused by bacteria.

If fever is making your child more uncomfortable, you may want to give a non-aspirin fever medication such as acetaminophen. Remember, you should never give aspirin to a child who has a viral illness since the use of aspirin in such cases has been associated with the development of Reye syndrome. As with any viral infection, encourage your child to drink clear fluids: water, fruit juice, tea, and lemonade. These will help replace bodily fluids your child loses in the heat and sweating of fever episodes.

Use a cool-mist vaporizer to relieve cough and to soothe breathing passages. Clean the vaporizer each day to prevent mold from growing. Avoid hot-water or steam vaporizers that can cause accidental burns and scalds in children.

Kids with measles should get extra rest to help them recover. It's usually safe for a child to return to school 7 to 10 days after the fever and rash go away. But to be sure, check with your child's doctor.

When to Call the Doctor

Call the doctor immediately if you suspect that your child has measles. Also, it's important to get medical care if your child:

- is an infant and has been exposed to measles
- is taking medicines that depress the immune system
- has tuberculosis, cancer, or a disease that affects the immune system
- Keep track of your child's temperature. Let the doctor know if your child has an earache, since this may be a sign of an infection.

Remember that measles is very rare, and a child who is properly vaccinated is extremely unlikely to contract the disease.

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2. http://www.DrGreene.com/21 1136.html

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Rubeola, First Disease

We're now in the beginning of the 21st century, and about one million children still die of measles each year around the world. Measles has been a major cause of suffering and death at least since the societies of ancient China, Persia, and Rome. Measles epidemics ravaged Europe throughout the Middle Ages and attacked the Americas beginning in 1657. Before the measles <u>vaccine</u> became generally available in 1965, there were 3 to 9 million cases of measles in the United States each year. It was a common cause of <u>pneumonia</u>, blindness, <u>seizures</u>, brain damage, and death.

What is it?

Measles is a specific <u>virus</u> that causes a specific disease. It was the first of the non-pox <u>rash</u> illnesses of childhood to be identified (first disease). It remains a major worldwide problem. In most children, the illness is self-limited. Nevertheless, complications are common. Some are as simple as <u>ear infections</u>, <u>croup</u>, or appendicitis. Others are crippling or lethal.

Who gets it?

In developing countries, measles is still widespread, infecting almost all unimmunized children by the age of 4. The mortality rate in unimmunized children remains about 10 percent and blindness is common if the child is unimmunized and malnourished. The number of cases in the United States is reported to be less than 1000 per year and serious complications are far less common. Whenever immunization rates fall, the measles rates rise. This happened most recently in the US in 1986 to 1990. Measles tends to be a winter and spring disease. There is no difference in illness rates between boys and girls, but complications are more common in boys. Measles causes disease in humans and other primates.

What are the symptoms?

During roughly the first 10 days following exposure, a child has dramatic viral and immunologic activity taking place inside her body, with virtually no outward sign of illness. Next, typically, comes the prodromal period in which she has symptoms of a cold (tiredness, runny nose, cough, and perhaps red eyes) but with a high fever (~39.5 C or 103 F). These symptoms gradually increase over about 4 days. During these 4 days, she has white spots in her mouth. These are called Koplik spots and are the hallmark of measles. They usually start on the inside of the cheek opposite the lower molars, then spread within 12 hours to cover most of the inside of the cheeks and lower lip. Many things can cause white spots in the mouth; Koplik spots always appear on a bright red, granular background. The typical measles rash begins about 14 days after exposure (or 4 days after appearing ill). The fever is still at its height when the rash appears (in contrast to an infection called Roseola). The measles rash starts as spots, which then begin to blend together. The rash begins around the ears and on the forehead at the hairline. Over three days, it spreads sequentially to cover the face, neck, trunk, arms, buttocks, and legs. Over this same three-day period, the Koplik spots disappear and the fever begins to fall.

Is it contagious?

Measles is a highly contagious disease and is <u>spread from person to person through the air</u>. People with measles are contagious throughout the illness, but especially during the prodromal period before the rash. It can also spread by <u>direct contact</u> and <u>droplets</u>.

How long does it last?

Measles symptoms usually last about 12 days. The rash disappears over about three or four days after it reaches its peak in the same order in which it started. As the rash fades, it looks coppery, then brownish, with fine white flakes. Complications such as encephalitis, subacute sclerosing panencephalitis (SSPE), blindness, other forms of brain damage, pneumonia, or heart damage may last considerably longer. They may be lifelong or even life ending. Encephalitis is thought to occur in about 1 out of every 1000 cases of measles (AAP RedBook 2006).

How is it diagnosed?

The diagnosis is usually based on the presence of Koplik spots, the presence of the fever with the three C's -- cough, conjunctivitis, and coryza (cough, red eyes, and a very runny nose), and the sequential progression of the rash. The diagnosis may be confirmed by a series of blood tests.

How is it treated?

For uncomplicated measles, there is no specific treatment. Some studies suggest that vitamin A lessens the severity of measles. The cough is often severe and some older children benefit from cough medicines. Particularly during the period of the fever, plenty of fluids should be given. Avoid exposure to other ill children in the first weeks following measles, since some of the normal defenses are temporarily damaged.

How can it be prevented?

The measles vaccine is an effective vaccine in preventing measles. After 2 doses of the measles vaccine, over 99 percent of recipients will be immune to measles. The initial dose of the measles vaccine is usually administered after a child is 12 months of age. The second dose is recommended at the age of kindergarten entry (i.e. age 4-6 years), but may be given any time 1 month after the first dose. In areas where measles is very common, the vaccine can be given as young as 6 months of age, but protection is suboptimal. In these children, repeat vaccination at 12-15 months and 4-6 years is recommended. When the vaccine is not completely effective, it at least minimizes the length, and particularly the severity, of the disease. For those who have suppressed immune systems (such as with cancer or immunodeficiency), exposure to measles may necessitate prophylaxis with IV immunoglobulins (disease-fighting antibodies).

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Alan Greene MD FAAP Reviewed by Khanh-Van Le-Bucklin MD & Liat Simkhay Snyder M.D. March 2008

Part 2: Suggested Homeopathic Remedies yor Measles

1. http://www.hpathy.com/diseases/measles-symptoms-treatment-cure.asp

Measles is an infectious viral disease that occurs most often in the late winter and spring. It begins with a fever that lasts for a couple of days, followed by a cough, runny nose, and conjunctivitis (pink eye). A rash starts on the face and upper neck, spreads down the back and trunk, then extends to the arms and hands, as well as the legs and feet. After about five days, the rash fades the same order it appeared. Measles is highly contagious. Infected people are usually contagious from about 4 days before their rash starts to 4 days afterwards. The measles virus resides in the mucus in the nose and throat of infected people. When they sneeze or cough, droplets spray into the air and the droplets remain active and contagious on infected surfaces for up to two hours.

Aconite [Acon]

Aconite is one of the first remedies for measles; that is, while the case is presumed to be one of measles, and a hard croupy cough are present. Ferrum phosphoricum in many respects is similar to Aconite, and will take its place where restlessness and anxiety are wanting. In catarrhal conditions Aconite ceases to be of use after exudation has taken place, and so in measles; it would cease to be of use after it modified the fever, and the eruption appears and the disease is diagnosed as measles. Ferrum phosphoricum will perhaps be the better remedy if there be chest involvement together with the catarrhal symptoms.

Gelsemium [Gels]

Gelsemium is, on the whole, a more useful remedy in commencing measles than Aconite; that is, it is oftener indicated; there is much chilliness, the fever is a prominent symptoms, the child is dumpish, apathetic, does not want to be disturbed; there is watery coryza which excoriates (burns) the upper lip and nose, and there is harsh, barking, croupy cough, with chest soreness and hoarseness. Gelsemium, too, has an action on the skin and may be continued with benefit after the eruption has appeared; there is an itching and redness of the skin, and a decidedly measly eruption produced by it. It has some aching in the limbs, and may be compared with Dulcamara, but seldom is mistaken for that remedy. Gelsemium has more coryza, Dulcamara more aching. Both may be useful in an undeveloped eruption; Gelsemium when there is pain at the base of the brain, high fever and passive brain symptoms; Dulcamara when occurring from damp, cool air, rainy weather or sudden changes. Belladonna may be indicated in measles when sore throat is present and the cerebral excitement indicating that remedy, together with moisture and heat; but it corresponds more closely to scarlet fever.

Euphrasia [Euph]

When the catarrhal symptoms greatly predominate Euphrasia may be used. Acrid tears stream out of the eyes, with a red and swollen conjunctiva. The cough is dry and very hoarse, and there is an intense throbbing headache, which is relieved on the appearance of the eruption. The excoriating discharge from the eyes will distinguish from Allium cepa. The photophobia of Euphrasia is worse in artificial light, and a brightness of the eyes despite the catarrhal condition is characteristic.

Pulsatilla [Puls]

A little later in the disease Pulsatilla symptoms may make their appearance. The fever has subsided or entirely disappeared. There is coryza and profuse lachrymation (tears). The cough is still dry at night, but loosens a little in the daytime. The child sits up to cough. There is much predisposition to earache and sometimes sickness at the stomach. Where there is catarrh of the digestive canal and diarrhoea Pulsatilla will be found useful. The eyes agglutinate and the discharge is purulent. Kali bichromicum is so similar to Pulsatilla in many respects that it may be mentioned here, as the two remedies seem to differ in intensity only. Kali bichromicum has pustules developing on the cornea. The throat is swollen and there is catarrhal deafness. It produces an eruption, which closely resembles measles.

It comes in very well after Pulsatilla when the patient develops more intense symptoms. Measles associated with ear symptoms and swollen glands especially call for Kali bichromicum, and it is one of our best remedies for laryngeal affections, with a hoarse, dry, croupy cough. Dr. Jousset recommends Viola odorata for the cough. Sulphur is a great measles remedy. It is useful where the skin is dusky and the rash does not come out, or is purplish when it does appear.

Arsenicum [Ars]

In measles, which do not run a favorable course, in malignant type or black or hemorrhagic (bleeding) measles we have two or three important remedies. The first of these is Arsenicum. There will be sinking of strength, diarrhoea, delirium, restlessness and debility, petechiae (pinpoint hemorrhage) and general typhoid symptoms. The stools are particularly offensive and exhausting. Arsenicum may save the patient in these conditions. Dr. Gaudy, of Brussels, considers Arsenicum almost specific in measles. He says that its action is little short of marvelous. It is prophylactic and curative, and one of the best remedies to remove all sequelae (after effects) of the disease. It corresponds to the insidious phenomena of severe epidemics of measles. Crotalus may also be indicated in the form known as black measles. Also Baptisia, with its fetor and prostration, may prove useful. Lachesis is the fourth remedy for these conditions. The individual symptom of each remedy will differentiate them, but all four should be studied carefully in these low conditions of measles.

Stramonium [Stram]

When the eruption does not come out properly, or when it disappears suddenly and grave symptoms appear, there are a few remedies that play a most important role. Stramonium is one of these. In a case calling for it you will find these symptoms: non-appearance of the rash; the child is hot, restless, and on falling asleep cries out as if frightened; there are convulsive movements and the face is red. Cuprum is indicated in convulsion due to recession of the eruption. It has the same terror on awakening, but its symptoms are more violent than those of Stramonium and the face instead of being red is more apt to be bluish. Zincum has the same awakening from sleep as if terrified, but with Zincum there is much weakness, the child seems too weak to develop the eruption. Bryonia is useful when chest symptoms appear upon retardation or a recession of the eruption. Too slow development of the eruption with chest symptoms calls for it. Antimonium tartaricum is another remedy for retarded or repelled eruption. There will be great difficulty in breathing, rattling of mucus, bluish or purplish face, drowsiness and twitching.

Bryonia [Bry]

This remedy comes in well when the rash appears late, or runs an irregular course, and when inflammatory diseases of the chest accompany. The cough is dry and painful; there is soreness of the limbs and body, stitches in the chest, etc. Spasms from suppressed measles when the child is seized with great lassitude and debility, twitching of muscles or of single limbs or if the spasms are preceded by deep and violent coughing and oppressed respiration. For the chest complications a number of remedies may come into use. Sticta, if there be present an incessant dry and spasmodic cough, worse when lying down and at night; it is a teasing, titillating cough. Phosphorus with its dry, exhausting cough with oppressed breathing. Rumex with its short tickling bronchial cough worse from cold air. Drosera with its whooping-like cough. All these may be indicated in measles. Sabadilla is the remedy when among the catarrhal symptoms there is violent sneezing attended with a frontal headache. It will correspond to some epidemics and should not be overlooked.

2. http://www.clovelly.org.uk/documents/measles3.html

The measles virus enters the body through the nose and mouth. It incubates, often silently, for up to 14 days in the lymph system, liver, spleen, bone marrow and blood. Thus the natural disease involves a massive effort from the entire immune system. Vaccination weakens this natural immune response, and children become more susceptible to breathing difficulties, asthma, and eczema, allergies and glue ear. Use remedies in 6c or 30c dose and repeat every 1 or 2 hours. Stop as soon as symptoms improve. It is best to consult a professional homeopath for further advice and support.

Aconite:

Use in first 24 hours of illness, when cold and fever symptoms start. Sudden onset; high fever; red eyes; restlessness, anxiety, fear; dry barking cough like croup.

Belladonna:

High fever with bright red face; radiating heat; red eyes; throbbing headache; dilated pupils; painful throat; may be delirious.

Euphrasia:

Painful burning, watery eyes; redness around eyes; sensitive to light; bland discharge from nose.

Sulphur:

Terribly irritating rash; worse for heat of bed or a bath. Give if rash slow to come out. Itching worse for scratching. MEASLES IS LESS SERIOUS WHEN FULLY EXPRESSED ONTO THE SKIN.

Pulsatilla:

Weepy, clingy; not thirsty; earache; dry cough at night, loose in morning. Craves fresh air. Thick bland yellow/green nasal discharge.

Gelsemium:

Slow onset - the illness takes days to emerge and the child feels increasingly weak. Lethargic and exhausted with generalized shivering and aching. Heavy eyelids.

Bryonia:

Very dry, tiresome cough; high temperature; headache worse for the slightest movement; dry mouth; intense thirst.

Kali Bic:

Mucus difficult to cough up or blow out; swollen neck glands; thick stringy rope-like yellow-green mucus. The virus is expelled via the same route as it came into the body, so a cough is a natural part of the healing process.

Apis:

High temperature, very hot; wants covers off; eyes sore, tearful and irritable; stinging, burning rash soothed by anything cool; rosy-red waterlogged rash; general swelling of face; eyes with water bag appearance.

In many cases, Morbillinum 30c (one dose) will clear any after-effects of measles.

[MEASLES3] © Liz Bevan-Jones SRN LCH RSHom & Yvonne Stone SRN RM LCH RSHom: updated May 2004