
Measles, mumps, rubella, varicella (chickenpox) – immunisation

Summary

- Immunisation is the best protection against measles, mumps, rubella and chickenpox.
 - The National Immunisation Program provides immunisations against measles, mumps, rubella and varicella (commonly known as chickenpox).
 - Immunisation against measles, mumps, rubella and chickenpox can be provided with either the MMR and MMRV vaccines and, in some cases, the varicella vaccine.
 - Common immunisation side effects are usually mild and temporary (occurring in the first few days after vaccination) and do not require specific treatment.
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The **Immunise Australia Program** provides immunisations against measles, mumps, rubella and varicella (commonly known as chickenpox). Immunisation against these four diseases can be given in the form of two different combination vaccines and a single vaccine for chickenpox, depending on age and type of infectious disease.

The first combined immunisation is against measles, mumps and rubella with a vaccine commonly known as the MMR vaccine. The second combined immunisation (available from July 2013) is against measles, mumps, rubella and varicella (chickenpox), with a vaccine commonly known as the MMRV vaccine. Immunisation against chickenpox can also be given in a single vaccine against chickenpox, called the varicella vaccine (VV).

Vaccination against measles, mumps and rubella requires two doses of vaccine. Vaccination against chickenpox requires one dose to help protect against serious complications associated with chickenpox and to protect from developing shingles later in life. Research shows that two doses of chickenpox vaccine in children provides increased protection and reduces the risk of chickenpox in children under 14 years of age. The government funds one free dose of chickenpox vaccine and a second dose can be purchased on prescription.

Any person with a reliable history of having had a chickenpox infection is considered immune and does not require the vaccine. Immunised children who get chickenpox generally have a much milder form of the disease. They have fewer skin lesions, a lower fever and recover more quickly.

Because of the potential for serious complications from infectious diseases in young children, especially measles, the first dose of the MMR vaccine is given at 12 months of age, without the varicella vaccine. This is due to an increased risk of febrile convulsions in children under four years of age who receive their first dose of MMR as MMRV.

From July 2013, immunisation with MMRV vaccine at 18 months gives very young children earlier protection against measles, mumps and rubella.

Immunisation with MMR and MMRV

Immunisation is the best protection against measles, mumps, rubella and chickenpox. It is important to know that it is safe for children with egg allergies to receive the MMR and MMRV vaccines.

Protection against measles, mumps, rubella and chickenpox is available under the National Immunisation Program Schedule.

In Victoria, immunisation against these diseases is free of charge for:

- Children at 12 months – the first immunisation is given as the MMR combination vaccine
 - Children at 18 months of age – the second immunisation is given as the MMRV combination vaccine
 - All children under 10 years of age can receive the free National Immunisation Program vaccines.
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- Young people 10 to 19 years of age, of families who currently receive family assistance payments between 1 January 2016 to 31 December 2017 can receive the free National Immunisation Program vaccines.
- Students in year seven of secondary school – students who have not already had chickenpox infection can receive the VV
- Women planning pregnancy or after the birth of their child – two doses of MMR are available for women who have low immunity or no immunity to rubella
- Aboriginal and Torres Strait Islander people, refugees and asylum seekers and vulnerable people older than 10 years of age – catch-up immunisations with MMR are available for people who have not been fully vaccinated.

Immunisation is also recommended (but not free) for adults born during or since 1966, unless you have evidence of having received two doses of MMR. If you have not received the vaccine, ask your doctor about catch-up doses. The MMRV vaccine is not recommended for people aged 14 years and over and so people in this age range can receive the MMR vaccine and the VV.

People who should not be immunised with MMR or MMRV

Not everyone is a suitable candidate for MMR and MMRV vaccination. A person with an impaired immune system should not be vaccinated.

Some of the possible causes of impaired immunity include:

- Infection with human immunodeficiency virus (HIV) or the presence of acquired immunodeficiency syndrome (AIDS) from an HIV infection
- Taking certain medications, such as high-dose corticosteroids
- Receiving immunosuppressive treatment, including chemotherapy and radiotherapy
- Having some types of cancer, such as Hodgkin's disease or leukaemia
- Having an immune deficiency with extremely low levels of antibodies (hypogammaglobulinaemia, multiple myeloma or chronic lymphoblastic leukaemia).

If you have an impaired immune system, speak with your doctor about what options might be available.

Pregnancy and measles immunisation

You should not be given the MMR vaccine if you are already pregnant. Pregnancy should also be avoided for 28 days after the vaccination. The MMRV vaccine is not recommended for people 14 years and over.

Pre-immunisation checklist

Before immunisation, it is important that you tell your immunisation provider if you (or your child):

- Are unwell (have a temperature over 38.5°C)
- Have had a serious reaction to any vaccine
- Have had a serious reaction to any component of the vaccine
- Have had a severe allergy to anything
- Have had a 'live' vaccine in the last month
- Have had recent immunoglobulin or blood transfusion treatment
- Have a disease or you are having treatment that causes low immunity
- Are pregnant or intend to become pregnant.

'The jab' video – watch how other students feel about getting immunised.

Side effects of MMR and MMRV vaccines

The combined MMR and MMRV vaccines are effective and safe, but all medications can have unwanted side effects.

Side effects from MMR and MMRV vaccines that can occur seven to 10 days after vaccination include:

- Temperature (fever, can be more than 39.4°C), lasting two to three days
- Faint red rash (not infectious)
- Head cold and/or runny nose, cough and/or puffy eyes
- Drowsiness or tiredness
- Swelling of salivary glands.

The MMRV vaccine can cause a mild chickenpox-like rash five to 26 days after vaccination.

Managing fever after immunisation

Common side effects following immunisation are usually mild and temporary (occurring in the first few days after vaccination). Specific treatment is not usually required.

There are a number of treatment options that can reduce the side effects of the vaccine including:

- Give extra fluids to drink and do not overdress children if they are hot
- Although routine use of paracetamol after vaccination is not recommended, if fever is present, paracetamol can be given – check the label for the correct dose or speak with your pharmacist, (especially when giving paracetamol to children).

Managing injection site discomfort

Vaccines may cause soreness, redness, itching, swelling or burning at the injection site for one to two days. Paracetamol might be required to ease the discomfort.

Sometimes a small, hard lump at the injection site may persist for some weeks or months. This should not be of concern and requires no treatment.

Concerns about side effects

If the adverse event following immunisation is unexpected, persistent or severe, or if you are worried about yourself or your child's condition after a vaccination, see your doctor or immunisation nurse as soon as possible, or go directly to a hospital. It is also important to seek medical advice if you (or your child) are unwell, as this may be due to other illness rather than because of the vaccination.

Adverse events that occur following immunisation may be reported to the Victorian Surveillance of Adverse Events Following Vaccination In the Community (SAEFVIC) Line. SAEFVIC is the central reporting service in Victoria for any significant adverse events following immunisations. You can discuss with your immunisation provider how to report adverse events in other states or territories.

Rare side effects

There is a very small risk of a serious allergic reaction (anaphylaxis) to any vaccine. This is why you are advised to stay at the clinic or medical surgery for at least 15 minutes following vaccination, in case further treatment is required. If any other reactions are severe and persistent, or if you are worried, contact your doctor for further information.

Immunisation and HALO

The immunisations you may need are decided by your health, age, lifestyle and occupation. Together, these factors are referred to as HALO.

Talk to your doctor or immunisation provider if you think you or someone in your care has health, age, lifestyle or occupation factors that could mean immunisation is necessary. You can check your immunisation HALO using the [downloadable poster](#).

Where to get help

- Your doctor

- In an emergency, always call triple zero (000)
- Emergency department of your nearest hospital
- Your local government immunisation service
- Maternal and Child Health Line (24 hours) Tel. 132 229
- NURSE-ON-CALL Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
- Immunisation Program, Department of Health & Human Services, Victorian Government Tel. 1300 882 008
- National Immunisation Information Line Tel. 1800 671 811
- Your local pharmacist
- SAEFVIC Tel. 1300 882 924 – the line is attended between 10.00 am and 4.00 pm and you can leave a message at all other times

Things to remember

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This page has been produced in consultation with and approved by:

Department of Health and Human Services - RHP&R - Health Protection - Communicable Disease Prevention and Control Unit

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