# The Current Measles Virus Outbreaks and Vaccine Coverage Strategies 

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glish measles, rubeola, red measles, and morbilli are all other names for the disease. Both roseola and rubella, also known as German measles, are diseases brought on by distinct viruses.

The classic description of the characteristic mea-sles rash is a generalized red maculopapular rash that appears several days after the fever. It usually causes itching and begins on the back of the ears but eventually spreads to the head and neck after a few hours. The measles rash can last up to eight days and appears two to four days after the initial symp-toms. Before going away, the rash is said to "stain," changing color from red to dark brown. In general, measles goes away after about three weeks.
A type of modified measles can occur in people who have been vaccinated but only have partial protective immunity. Modified measles has milder symptoms, a longer incubation period, and fewer distinctive symptoms (a brief and discrete rash).
Although complications may occur in some cases, most people survive measles. One to four people will end up in the hospital, and between one and two will pass away. Adults over the age of 20 and children under the age of 5 have a higher risk of complications. The most common fatal complication of measles infection-pneumonia-is respon-sible for between 56 and 86 percent of measles-related deaths. By eliminating antibodies-producing cells, the measles virus weakens the immune sys-tem and increases the likelihood of death from other diseases. Measles suppresses the immune system for about two years. It has been epidemi-ologically linked to up to $90 \%$ of childhood deaths in thirdworld countries. In the past, it may have killed more people in the United States, the United Kingdom, and Denmark than measles did. Despite the presence of an attenuated strain in the measles vaccine, immune memory is not destroyed.

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