

Why measles vaccines still matter today

For many adults, measles was once considered a normal part of childhood.

Before vaccines, nearly every child in the United States caught the virus. Today, however, public health experts emphasize that while natural immunity *does* occur after infection, the risks of measles are far too high when compared to the protection offered by the measles, mumps and rubella (MMR) vaccine.

Early 2025 [data](#) show rising cases in the U.S., a reminder that measles still spreads quickly wherever vaccination rates dip.

Natural immunity and the role of vaccines

“Natural immunity is wonderful. It's part of the evolution of the human body that has taken all our exposures and creates a memory for them, so that we can protect ourselves in the future. Vaccines augment (improve) that. There are some infections that an individual doesn't have to go through, or are so severe to go through, that receiving a vaccine is more valuable,” says [Doug Kasper, MD, infectious disease specialist with OSF HealthCare](#).

He notes that measles is one of those infections.

“Measles is highly infective and has potential [complications](#) in our child population. The key with measles is that the vaccine is so effective at preventing infection. It's unanimously beneficial to receive and has been that way for a long time in the United States.”

For older generations who remember having measles as kids, it can be easy to assume it wasn't serious. But modern evidence paints a different picture: measles can lead to pneumonia, hospitalization, brain inflammation, long-term complications and death – even in healthy children.

Why measles vaccination remains essential for kids

“Fortunately, measles vaccination remains part of the normal pediatric vaccine schedule. It's something that would be discussed with the parent regarding their child at a standard visit,” Dr. Kasper says. “We strongly recommend all children receive all their childhood vaccinations, which includes the measles, mumps and rubella (MMR) vaccine. The timing of that vaccine begins at one year of age, but it can sometimes be given earlier if there is a local outbreak of measles in the community.”

MMR vaccination rates need to remain extremely high, typically above 95%, to prevent outbreaks. However, declining vaccination rates across parts of the Americas have caused concern. The [Pan American Health Organization](#) recently warned that the region may lose its measles elimination status without urgent action.

Vaccines build a “library” of protection

The goal of vaccination isn't to replace the body's defenses – it's to strengthen them.

“In the hospital, we tend to see people that get sicker, so that's what we focus our efforts on. But a lot of medicine is done outside of the hospital, and that is preventive medicine,” Dr. Kasper says. “So, the strategy with vaccine is to try not to get sick or try to get less sick than you would've. Use the utility of the vaccine, along with natural immunity, to build up your individual reservoir as much as possible to protect you in the future.”

This “reservoir” or “library” of immunity is especially important with a virus as contagious as measles, which can linger in the air for hours and infect up to 90% of unprotected people who are exposed.

Localized outbreaks are driving current cases

While measles is not widespread across the U.S., localized outbreaks continue to occur in communities where vaccination rates have dropped. Public health departments monitor these cases closely and respond with tools such as:

- Rapid case investigations
- Community education
- Mobile vaccination units
- Early MMR vaccination for children who qualify

Without high vaccination coverage, these small outbreaks can grow quickly. That's why maintaining strong MMR rates is essential – to protect children, prevent community spread and preserve decades of progress toward [measles elimination](#).

For more information on measles symptoms and long-term risks, visit the [OSF Newsroom](#).