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## Measles Vaccine Information

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### Measles: The Illness

Measles is a highly contagious respiratory illness spread by coughing, sneezing, or simply being in close contact with an infected individual. Measles presents as a whole body rash and may include fever, runny nose, cough, pink eye, and sore throat. These symptoms generally last 2-4 days and are followed by the signature itchy red rash on the body around the fourth or fifth day.

Prior to the introduction of the measles vaccine in 1963 the CDC described measles as “*a self-limiting infection of short duration, moderate severity, and low fatality.*” Self-limiting means the condition resolves on its own without treatment. Serious complications can occur in those deficient in Vitamin A.

According to the U.S. CDC, those with naturally-acquired measles have life-long immunity. Infants born to mothers with naturally-acquired antibodies benefit from their mother’s immunity as mothers who have recovered from measles pass short-term measles immunity to their infants by breastfeeding.

### The Measles Vaccine

- The measles vaccine is manufactured with a weakened form of the live measles virus. The measles virus is grown in a culture of chicken embryo cells.
- The measles vaccine was introduced in 1963. All provinces include the measles vaccine in the recommended childhood schedule. The measles vaccine is given in a multi-vaccine combination with mumps and rubella (MMR) and/or chicken pox (MMR-V). These are all live-viruses. A single measles vaccine is not available in Canada. The vaccine has not been updated since 1968.
- While the vaccine may have contributed to diminishing measles as a childhood illness, it has resulted in an increase in measles in adults and infants. The reason being the measles vaccine does not confer life-long immunity. Its effectiveness wanes over time and as a result, many adults vaccinated as children are without protection.
- And mothers who were vaccinated for measles and did not contract measles naturally do not transfer robust maternal antibodies to their infant to protect the infant in the first few months of life. As a result of vaccination, adults and infants are at greater risk of measles when the consequences can be more severe than when contracted in childhood.

## Considerations for the Vaccine Decision

- Natural measles infection confers life-long immunity. Those born before the introduction of the measles vaccine and experienced measles naturally contribute to herd immunity which helps to reduce measles outbreaks.
- As the population ages and individuals with life-long immunity diminishes, and individuals with temporary vaccine-induced immunity increases, the susceptibility to measles increases. The herd immunity once common in Canada has been dismantled by six decades of mass vaccination.
- The increase in susceptibility in infants and adults is due to vaccine failure, not a failure to vaccinate. This was predicted by those who recognized the limitations of the measles vaccine.
- While measles was once a serious illness, the mortality from measles declined 98.5% and was no longer considered a public health threat **before** the vaccine was introduced. This means the measles vaccine was unnecessary. Its introduction has dramatically altered the measles experience.
- Health Canada and public health officers claim that if everyone were vaccinated, no one would die or be harmed from measles. This statement ignores the known risks of measles vaccination, including disability and death, and the increase in susceptibility to measles in infants and adults.
- As of June 27, 2025, there have been more than **117,063** reports of measles-vaccine reactions, hospitalizations, injuries, and deaths following measles vaccinations made to the U.S. Vaccine Adverse Events Reporting System, including **574 related deaths, 9,080 hospitalizations, and 2,225 related disabilities**. Approximately **50 percent** of adverse events occur in children under three years of age. <sup>1</sup>
- A 2010 U.S. HHS study revealed that less than 1% of vaccine adverse events are reported. This means that the actual number of adverse events and deaths could be more than 100X these numbers – **11,706,300 reports, 57,400 deaths, and 222,500 disabilities**.
- A risk analysis comparing the increased risk of mortality in children (16 mths – 19 yrs) from not being vaccinated for measles vs. the risk of mortality from the vaccine concluded that **the risk of death is more than 260 times higher in children vaccinated with the measles vaccine**. <sup>2</sup>
- The measles vaccine has not been proven safe against a true placebo, and has not been proven safer than contracting measles. The measles vaccine is using technology that is almost 60 years old.

## For More Information

Vaccine Choice Canada: <https://vaccinechoicecanada.com>

Physicians for Informed Consent: <https://physiciansforinformedconsent.org/mmr>

New Parents Guide to Understanding Vaccination: <https://uptoeveryone.com/products/new-parents-guide-to-understanding-vaccination>

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<https://www.medalerts.org/vaersdb/findfield.php?TABLE=ON&GROUP1=CAT&GROUP2=AGE&EVENTS=ON&VAX%5b%5d=MEA&VAX%5b%5d=MER&VAX%5b%5d=MM&VAX%5b%5d=MMR&VAX%5b%5d=MMRV&VAXTYPES%5b%5d=Measles>

<sup>2</sup> <https://vaxcheckers.org/wp-content/uploads/2021/09/PRJN4.pdf>