

Transplant ID Guidance on Measles Prevention for UCSF SOT Programs

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ASSESSING IMMUNITY: Send measles IgG on all transplant candidates

VACCINATION

- **Contraindicated** in adult organ transplant **recipients** who are receiving immunosuppression
- **Vaccinate** all seronegative **candidates** who are **not** receiving immunosuppression
 - Two doses of MMR vaccine separated by at least 28 days
 - Ideal to wait 4 weeks after last MMR dose prior to transplantation
 - If accepted organ offer within 4 weeks of last MMR vaccine, consult Transplant ID on admission
- **Caregivers / household contacts** of transplant recipients should be assessed for immunity and vaccinated as appropriate, particularly if their transplant candidate / recipient is seronegative

POST-EXPOSURE PROPHYLAXIS

- Measles exposure definition: sharing the same airspace with a confirmed measles case during their infectious period
 - Infectious period: four days before rash onset through four days after rash onset
 - Time period of exposure: up to 1 hour after the infectious person has left (applies even if the infectious person was masked)
- **Administer post-exposure prophylaxis to transplant recipients within 6 days of measles exposure**
 - IVIG 400mg/kg (adequate protection if received equivalent dose within 3 weeks of exposure)
 - SCIG 0.5mL/mg (adequate protection if received equivalent dose within 2 weeks of exposure)
 - Note: MMR vaccine as post-exposure prophylaxis is contraindicated among transplant recipients

REFERENCES

- UCSF HEIP Website: <https://infectioncontrol.ucsfmedicalcenter.org/ucsf-measles-guidance-and-resources>
 - CDC, CDPH, and SFDPH guidance documents are included in HEIP resources
- IDSA Clinical Practice Guideline for Vaccination of the Immunocompromised Host: <https://academic.oup.com/cid/article/58/3/e44/336537>
- AST Guidelines on Vaccination of solid organ transplant candidates and recipients: <https://pubmed.ncbi.nlm.nih.gov/31002409/>