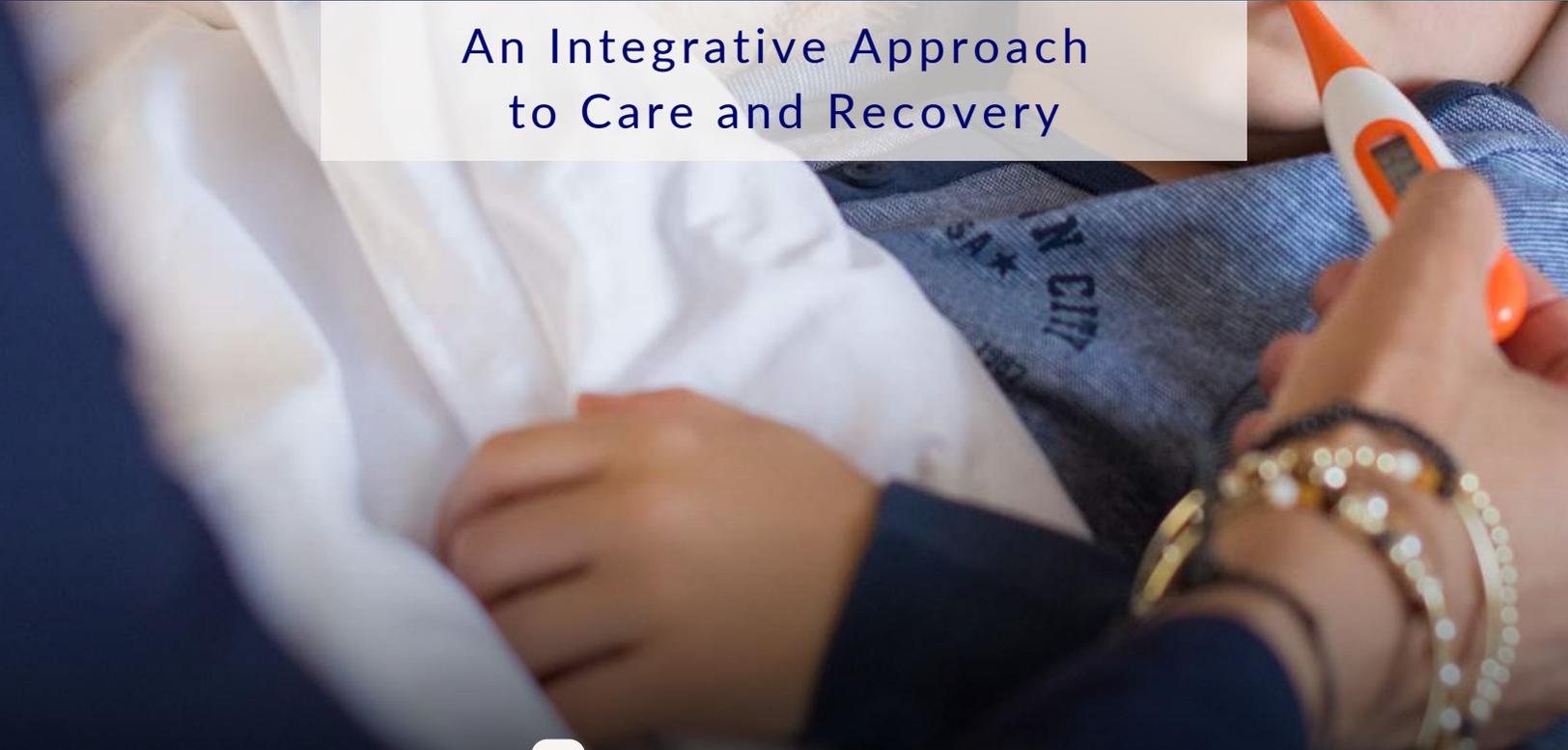




NAVIGATING MEASLES



An Integrative Approach
to Care and Recovery



INDEPENDENT[™]
MEDICAL ALLIANCE

Introduction

Measles is a highly contagious viral infection caused by the measles morbillivirus. While typically self-limiting in well-nourished children, it can be serious in those with nutrient deficiencies – particularly vitamin A. Supporting the body's innate immune response is the cornerstone of naturopathic and functional management.

Key Stages:

Progression:

- Prodromal (days 1–4): Fever, cough, runny nose, conjunctivitis
- Koplik's spots: White spots on inner cheeks (diagnostic sign)
- Rash phase (day 4+): Red maculopapular rash spreads from face downward
- Recovery: Rash fades, fever breaks, energy returns over 7–10 days

Watch For:

- Monitor for complications, including ear infection, pneumonia, and encephalitis (rare)
- Immune suppression can persist 2–3 years post-infection
- Gut integrity is often compromised during and after illness
- Nutritional repletion is essential for full recovery

DISCLAIMER: This guide is for educational purposes only and is not medical advice. It is intended to complement, not replace, individualized clinical care. Always work with a qualified practitioner when managing measles, particularly in infants, immunocompromised individuals, or those with complications. Dosages listed are general references; adjust based on age, weight, and clinical presentation. Seek emergency care when red flag signs are present.

Vitamin A: The Critical Intervention

Vitamin A deficiency dramatically increases measles severity and mortality. The WHO and numerous clinical trials support high-dose vitamin A during active measles infection.

| Age Group | Daily Does (IU) | Duration |
|--------------------------------------|-----------------|---------------------|
| Under 6 months | 50,000 IU | 2 days |
| 6-11 months | 100,000 IU | 2 days |
| 12 months and over | 200,000 IU | 2 days |
| Children with malnutrition/eye signs | 200,000 IU | Day 1, 2 and day 28 |

Preferred form: Retinol (preformed vitamin A) – NOT beta-carotene during illness.

Food sources to emphasize during recovery: Liver, cod liver oil, egg yolks, full-fat dairy, sweet potato, and carrots.



Nutrient Toolkit

Beyond vitamin A, several key nutrients have strong mechanistic and clinical support for immune function during viral illness.

Vitamin D3:

Critical for innate immunity; most children are deficient. Reduces respiratory complications.

Dose: 1,000–2,000 IU/day maintenance; 5,000 IU/day during acute illness (with K2)

Vitamin C:

Antiviral, antioxidant, supports mucosal integrity and immune cell function.

Dose: 500–1,000 mg every 4–6 hrs during acute phase; reduce if loose stools

Zinc:

Essential for lymphocyte function; depleted rapidly during fever and infection.

Dose: 5–15 mg elemental zinc/day depending on age; short-term during illness

Selenium:

Antioxidant; reduces viral mutation risk and lung inflammation.

Dose: 25–50 mcg/day; brazil nuts are excellent whole-food source

Vitamin E:

Supports immune cell membranes; often co-depleted with vitamin A.

Mixed tocopherols preferred; found in sunflower seeds, almonds, wheat germ

Magnesium:

Required for 300+ enzymatic reactions; supports sleep, muscle recovery, nervous system.

Dose: 100–200 mg/day, Glycinate or citrate form; Epsom salt baths for topical delivery

B Vitamins (B6, B12, Folate):

Support immune response, red blood cell production, and neurological recovery.

Methylated forms preferred; ensure adequate intake through diet and supplementation



Diet During & After Measles

Nutrition is medicine. The goal is to support immune function, reduce inflammation, protect mucosal integrity, and fuel recovery—without taxing a depleted digestive system.

Emphasize:

- Easily digestible whole foods: Bone broth, cooked vegetables, soft grains
- Liver (2–3x/week): Nature's multivitamin – especially rich in vitamin A, B12, iron, zinc
- Cod liver oil: Provides vitamins A and D in natural synergistic forms
- Fermented foods (in recovery): Kefir, yogurt, sauerkraut to restore gut flora
- Eggs: Whole-food source of A, D, zinc, choline
- Bright orange/yellow vegetables: Squash, carrot, sweet potato (beta-carotene)
- Berries and citrus: Vitamin C, antioxidants, flavonoids
- Bone broth: Glutamine, collagen, minerals; soothes and heals gut lining

Avoid/Minimize:

- Sugar and refined carbohydrates: Suppress immune function
- Processed foods and seed oils: Promote inflammation
- Dairy in excess during the acute phase if mucus is a concern
- Fruit juice: High sugar content undermines immune response
- Cold, raw foods: Hard to digest when unwell
- Gluten: Consider reducing during recovery if gut symptoms are present

Hydration:

- Coconut water: Natural electrolytes, easy on digestion
- Warm herbal teas: Elderflower, yarrow, ginger, lemon balm; traditionally used to support fever resolution
- Bone broth: Mineral-rich, gut-healing, anti-inflammatory
- Water with trace minerals: Add a pinch of good salt if sweating significantly



Herbal Support

Herbs have been used for centuries to support the body through acute viral illness. The following have the most evidence for treating measles and other viral infections:

Antiviral & Immune-Modulating Herbs:

- Elder (*Sambucus nigra*): Flowers traditionally used to support fever; berries antiviral, immune stimulating; use flower in acute fever, and berries during the recovery phase
- Andrographis (*Andrographis paniculata*): Strong antiviral, reduces fever duration, supports respiratory tract; well-studied in viral illness
- Echinacea: Immune modulator; best in early acute phase; use pulsed dosing (5 days on, 2 days off)
- Astragalus: Immune tonic and adaptogen; best used in recovery and prevention, not acute infection
- Cat's Claw (*Uncaria tomentosa*): Antiviral, anti-inflammatory; supports immune response and reduces post-viral inflammation
- Licorice root (*Glycyrrhiza glabra*): Antiviral, soothes mucous membranes, adrenal support; use cautiously with hypertension

Fever Support & Comfort Herbs:

- Yarrow (*Achillea millefolium*): Traditional diaphoretic; helps regulate and resolve fever naturally
- Peppermint: Cooling, supports comfort during fever, gentle digestive aid
- Catnip (*Nepeta cataria*): Gentle, calming fever support, especially for children; safe and well tolerated
- Chamomile: Anti-inflammatory, calming for restless, feverish children; gut support
- Lemon Balm: Antiviral, calming

Topical & Symptomatic Support:

- Calendula tea/compress: Soothing for rash, anti-inflammatory, gentle on sensitive skin
- Oat baths (colloidal oatmeal): Relieves skin itching and irritation from rash
- Lavender essential oil (diluted): Apply to skin to relieve discomfort; calming for sleep



Gut Health and Microbiome Support

The measles virus directly infects gut epithelial cells, disrupting the gut lining and microbiome. This can persist well beyond the acute illness and is a key driver of post-measles immune vulnerability. Gut restoration is essential.

During Acute Illness:

- Avoid unnecessary antibiotics unless there is a clear bacterial complication, as these destroy commensal gut flora and worsen dysbiosis
- Prioritize easily digestible foods, including soups, broths, and cooked grains
- Introduce spore-based or SBO probiotics: These are often better tolerated in acute GI states
- Reduce fiber temporarily: High-fiber foods can worsen diarrhea during the acute phase; reintroduce during recovery

Recovery & Gut Restoration:

- Probiotics: Lactobacillus rhamnosus GG, L. reuteri, Bifidobacterium strains; restores commensal bacteria depleted during illness
- Glutamine: Primary fuel for enterocytes; 2–5 g/day supports gut lining repair
- Collagen/bone broth: Glycine and collagen peptides support tight junction integrity
- Zinc carnosine: Clinically supported for gut lining repair; 16–37.5 mg elemental zinc, 2x/day
- Fermented foods: Kefir, live yogurt, kimchi, sauerkraut; reintroduce gradually after acute phase
- Prebiotic foods: Cooked and cooled rice/potato, green banana, leeks, and onion; feed beneficial bacteria

Note: The immune suppression post-measles (sometimes referred to as “immune amnesia”) appears to be significantly microbiome-mediated. Gut restoration should be maintained for 2–3 months post-recovery.



Sleep & Rest: Non-Negotiable

Sleep is when the immune system does its most critical repair work. During acute measles, enforced rest is essential; this is not the time to manage symptoms and push through.

Sleep Environment:

- Darkened room: Conjunctivitis makes photosensitivity significant; protect eyes
- Cool, well-ventilated space (not cold): Aids fever management and comfort
- Calming bedtime herbs: Chamomile, lemon balm, passionflower tea
- No screens during illness: Reduces neurological stress and eye strain
- Consistent sleep/wake times: Supports circadian immune regulation
- Magnesium glycinate before bed: Promotes deep, restorative sleep
- White noise or gentle music if restless
- Keep visitors minimal: Reduces stimulation and transmission risk

Sleep Duration and Recovery:

- Optimal: 10–14 hours for young children, 8–10 for older children
- Short naps (20–40 min) during the daytime are beneficial and protective
- Post-measles fatigue is real; allow extended rest for 1–3 weeks after
- Return to regular daily activities only after being fever-free for 48 hours and energy is restored
- Post-viral fatigue syndrome is a risk if normal activity too resumed too quickly – err on the side of more rest



The Home Toolkit

Having these items on hand before illness strikes means you can act immediately.

Supplements:

- Vitamin A Retinol drops or capsules (preformed, not beta-carotene)
- Vitamin D3 + K2 Liquid drops: Easier to dose for children of all ages
- Vitamin C: Buffered or liposomal form; liquid for young children
- Zinc (liquid or lozenges)
- Liquid zinc sulfate or glycinate for flexible dosing
- Magnesium Glycinate Powder or capsule form; Epsom salts for baths
- Quality Probiotic: Refrigerated multi-strain; spore-based as backup
- Elderflower/Elderberry: Tincture or glycerite; organic dried flowers for tea
- Echinacea Tincture: Glycerite for children; combine with elderflower
- Cod Liver Oil: Provides natural A and D; fermented, preferred quality



Pantry:

- Bone broth (frozen or jarred)
- Coconut water
- Raw honey (for those over 12 months of age)
- Good quality sea salt/trace minerals
- Dried elderflower, chamomile, and yarrow
- Oat flour or colloidal oatmeal (bath)



Healing Foods:

- Frozen liver (easy to grate small amounts into food)
- Organic eggs
- Sweet potato, squash, carrots
- Fermented foods (kefir, live yogurt)
- Lemon and ginger
- High-quality olive oil, coconut oil



When to Seek Medical Attention

Natural and functional medicine support is highly effective for uncomplicated measles. However, know when to escalate. These are red flags requiring urgent assessment:

- Difficulty breathing, fast or laboured breathing, or persistent cough that worsens
- High fever not responding to any measures, or fever above 40°C/104°F lasting more than 5 days
- Persistent vomiting or inability to keep fluids down
- Severe earache or hearing changes (risk of secondary bacterial ear infection)
- Extreme drowsiness, difficulty waking, confusion, or seizures
- Worsening rash with signs of skin infection (pus, hot, swollen areas)
- Signs of dehydration: No tears, dry mouth, no urination for 8+ hours
- In infants under 12 months: Any significant fever or change in behavior warrants prompt review

Post-Measles Recovery Protocol

Recovery from measles is a process, and the immune system requires active support for weeks to months. *Do not rush back to normal daily life—make sure you are fully recovered.*

Weeks 1–2: Active Recovery

- Continue acute-phase nutrients: Taper doses as energy and appetite return
- Rest remains the priority: No sports, minimal school; no exercise—gentle walks at most
- Focus on nutrient-dense foods: Liver, eggs, broth, fermented foods, colorful vegetables
- Begin gut restoration protocol: Probiotics, glutamine, zinc carnosine

Weeks 3–6: Rebuilding

- Vitamin A maintenance: Lower dose, cod liver oil ongoing; retest levels at 8 weeks if possible
- Vitamin D: continue maintenance dosing; aim for serum 25-OH-D above 50 ng/mL
- Immune tonic herbs: Astragalus, reishi, ashwagandha; adapt based on constitution
- Continue fermented foods: Daily kefir, yogurt, or sauerkraut
- Monitor learning and mood: The gut-brain axis is often affected; watch for behavioral or cognitive changes

Months 2–3: Long-Term Immune Restoration

- Functional testing if indicated: Micronutrient panel, stool analysis, IgG levels
- Consider immune amnesia: The patient may be more susceptible to other infections; maintain excellent nutrition
- Adaptogens ongoing: Ashwagandha, eleuthero, and schisandra support the HPA axis and immune resilience
- Re-evaluate gut health: Stool testing if GI symptoms persist beyond 8 weeks





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