

Wheats

+

Dulling Soars.

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OBJECTIVE--To examine whether contracting measles from a sibling of the opposite sex affects mortality. **DESIGN**--Prospective registration during 15-20 years of all births and deaths, including 243 measles related deaths. Measles infection was not registered; however, as in fatal cases measles was probably contracted from a maternal sibling the risk of dying during measles outbreaks was examined in families with two boys, two girls, or a boy and a girl. **SETTING**--31 small villages in two rural areas of eastern Senegal. **SUBJECTS**--766 children living in families with two children aged under 10 years during outbreaks of measles, 107 (14%) of whom died of measles. **MAIN OUTCOME MEASURE**--Deaths from measles, size of village, age and sex of maternal siblings. **RESULTS**--The interval between outbreaks in the same village was greater than 10 years. The risk of dying of measles was significantly related to age, increasing with the age difference between siblings and decreasing with the size of village. In a multiple logistic regression analysis adjusting for these background factors, children in families with a boy and a girl had a significantly higher mortality than children in families with two boys or two girls (odds ratio = 1.81, 95% confidence interval 1.17 to 2.82). The increase in risk was the same for boys and girls in families with two children one of whom was a boy and one a girl. **CONCLUSION**--Cross sexual transmission may be an important determinant of severity of measles infection.

The Disease

We don't usually think of measles as being a serious disease, but it can be very serious. Most children who get measles will have a rash, high fever, cough, runny nose, and watery eyes. These symptoms last for 1 or 2 weeks. But measles also causes ear infections in nearly 1 out of every 10 children who get it. As many as 1 out of 20 children with measles gets pneumonia. About 1 child in every 1,000 who get measles will get encephalitis. (This is an inflammation of the brain that can lead to convulsions, and can leave your child deaf or mentally retarded.) For every 1,000 children who get measles, 1 or 2 will die from it. Measles can also make a pregnant woman have a miscarriage or give birth prematurely.

Measles spreads very easily from person to person. You can get measles from an infected person who coughs or sneezes around you or even talks to you. Before measles vaccine was available, nearly all children had measles by the time they were 15 years old. An average of 530,000 cases a year were reported in the United States during the 10 years before vaccine was available. And during each of these years over 450 people died because of measles. Now, thanks to measles vaccine, the number of measles cases each year is a fraction of what it was then. However, we shouldn't assume that our children are safe from the threat of measles. In 1989 and 1990 we saw a large increase in measles, partly because many parents didn't have their preschool-aged children vaccinated. Measles spreads so easily that any child who is not immunized will probably get it, either now or later in life.

Cause of Death by Measles in England

Date	Total of all Causes		Cause of Death by Measles		Total Population
	Males	Females	Males	Females	
1850	186284	182318	3616	3464	17773324 E & W
1860	215238	203482	4767	4790	19902713 E & W
1870	265586	249743	3772	3771	22501316 E & W
1880	273442	255182	6312	6016	25708666 E & W
1890	290448	271800	6516	6098	28762287 E & W

**Source:- Office for National
Statistics**

**Registrar General
Annual Review**

A very rare complication of measles can occur up to 10 years following the initial infection. Called subacute sclerosing panencephalitis, this is a slowly progressing, smoldering swelling and destruction of the entire brain. It is most common among people who had measles infection prior to the age of two years. Symptoms include changes in personality, decreased intelligence with accompanying school problems, decreased coordination, involuntary jerks and movements of the body. The disease progresses so that the individual becomes increasingly dependent, ultimately becoming bedridden and unaware of his or her surroundings. Blindness may develop, and the temperature may spike (rise rapidly) and fall unpredictably as the brain structures responsible for temperature regulation are affected. Death is inevitable.

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Measles virus is not found in any other animal species.

One of the earliest written descriptions of measles as a disease was provided by an Arab physician in the 9th century who described differences between measles and smallpox in his medical notes.

A Scottish physician, Francis Horn, demonstrated in 1757 that measles was caused by an infectious agent present in the blood of patients. In 1954 the virus that causes measles was isolated in Boston, Massachusetts, by John F. Enders and Thomas C. Peebles.

Measles Incidence

In countries and regions of the world that are able to keep vaccination coverage high—around 95%—measles is very rare. In North and South America, Finland, and some other areas, endemic measles transmission is considered to have been interrupted through vaccination. There are still sporadic cases of measles in the United States because visitors from other countries can become infected before or during travel and spread the infection to unvaccinated or unprotected persons.

Worldwide, there are estimated to be 30 million cases and 700,000 deaths each year. More than half of the deaths occur in Africa. During 1997-1998, about 100 deaths were attributed to measles in Argentina and Brazil during large outbreaks in those countries.

Measles: Background of disease

[Top](#)

The disease of measles and the organism that causes it (a virus) share the same name. The disease is also called rubeola. Other rash-causing diseases often confused with measles are roseola (roseola infantum) and rubella (German measles), among others.

The virus is spread from person to person through direct contact with respiratory droplets. Measles is a disease of humans; there is no reservoir of measles virus in any other animal species.

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Measles: Incidence

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Measles

Related concepts:

Rubeola, First Disease

Introduction:

We're now in the beginning of the 21st century, and about one million children still die of measles each year around the world.

Measles has been a major cause of suffering and death at least since the societies of ancient China, Persia, and Rome. Measles epidemics ravaged Europe throughout the Middle Ages and attacked the Americas beginning in 1657. Before the measles vaccine became generally available in 1965, there were 3 to 9 million cases of measles in the United States each year. It was a common cause of pneumonia, blindness, seizures, brain damage, and death.

What is it?

Measles is a specific virus that causes a specific disease. It was the first of the non-pox rash illnesses of childhood to be identified (first disease). It remains a major worldwide problem.

In most children, the illness is self-limited. Nevertheless, complications are common. Some are as simple as ear infections, croup, or appendicitis. Others are crippling or lethal.

Who gets it?

In developing countries, measles is still widespread, infecting almost all unimmunized children by the age of 4. The mortality rate in unimmunized children remains about 10 percent and blindness is common if the child is unimmunized and malnourished.

The number of cases in the United States is reported to be less than 1000 per year and serious complications are far less common. Whenever immunization rates fall, the measles

rates rise. This happened most recently in the US in 1986 to 1990.

Measles tends to be a winter and spring disease. There is no difference in illness rates between boys and girls, but complications are more common in boys.

Measles causes disease in humans and other primates.

What are the symptoms?

During roughly the first 10 days following exposure, a child has dramatic viral and immunologic activity taking place inside her body, with virtually no outward sign of illness.

Next, typically, comes the prodromal period in which she has symptoms of a cold (tiredness, runny nose, cough, and perhaps red eyes) but with a high fever (~39.5 C or 103 F). These symptoms gradually increase over about 4 days.

During these 4 days, she has white spots in her mouth. These are called Koplik spots and are the hallmark of measles. They usually start on the inside of the cheek opposite the lower molars, then spread within 12 hours to cover most of the inside of the cheeks and lower lip. Many things can cause white spots in the mouth; Koplik spots always appear on a bright red, granular background.

The typical measles rash begins about 14 days after exposure (or 4 days after appearing ill). The fever is still at its height when the rash appears (in contrast to an infection called Roseola).

The measles rash starts as spots, which then begin to blend together. The rash begins around the ears and on the forehead at the hairline. Over three days, it spreads sequentially to cover the face, neck, trunk, arms, buttocks, and legs. Over this same three-day period, the Koplik spots disappear and the fever begins to fall.

Is it contagious?

measles. After 2 doses of the measles vaccine, over 99 percent of recipients will be immune to measles. The initial dose of the measles vaccine is usually administered after a child is 12 months of age. The second dose is recommended at the age of kindergarten entry (i.e. age 4-6 years), but may be given any time 1 month after the first dose. In areas where measles is very common, the vaccine can be given as young as 6 months of age, but protection is suboptimal. In these children, repeat vaccination at 12-15 months and 4-6 years is recommended. When the vaccine is not completely effective, it at least minimizes the length, and particularly the severity, of the disease.

At the turn of the 20th century, the dueling scar (or *bragging scar* or *renommier schmiss*) was popularized by upper-class Austrians and Germans who saw it as a mark of their class and of their honor, due to the social importance of dueling societies at Austrian universities at the time. If you were a doctor, lawyer, or professor, the dueling scar was a tattoo that signified your inclusion in an elite social rank, and visitors to university cafes would expect to see young men with bandaged faces.

The sport at the time was very different from modern fencing. The men used heavy sabres, and took turns chopping at each other five times a piece, repeated over and over. While padding was worn, the goal was *to be injured*. Kevin McAleer (author of *Dueling: The Cult of Honor in Fin-de-Siecle Germany*) writes,

"The idea was to stand your man and show courage – not to inflict a wound, but to be wounded. That's the very strange part of it – the true winner was he who walked away with a nice juicy scar, to show that he'd stood the test. The point was not to get the other guy, but to show that you could take it. You'd get these guys who looked like they'd walked into a propeller. It was pretty gnarly, but the guys were damn proud to look that way."

"The scars showed you had courage and education, and were good husband material. A lot of these kids were rather good-looking, and you didn't have to ruin your whole face in dueling. The scars usually accumulated on the left side of the face, so from the right profile, he still looked good. And even if it was an ugly, knotted scar, women were attracted by everything it implied, and the pride with which the wearer bore it."

Students too afraid to actually duel would cut themselves with razors or contract doctors to form the wounds, and then would repeatedly tear open the wound to irritate them, as well as using salt, wine, and even sewing horse hair into them to ensure a prominently keloided scar. It was very important for these wounds to be noticeable, as the belief was that class/caste and honor were directly linked — the dueling scar was evidence that the wearer had the foundation to fulfill his destiny as one of Germany's ruling class.



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Dueling scar COMMENTS?

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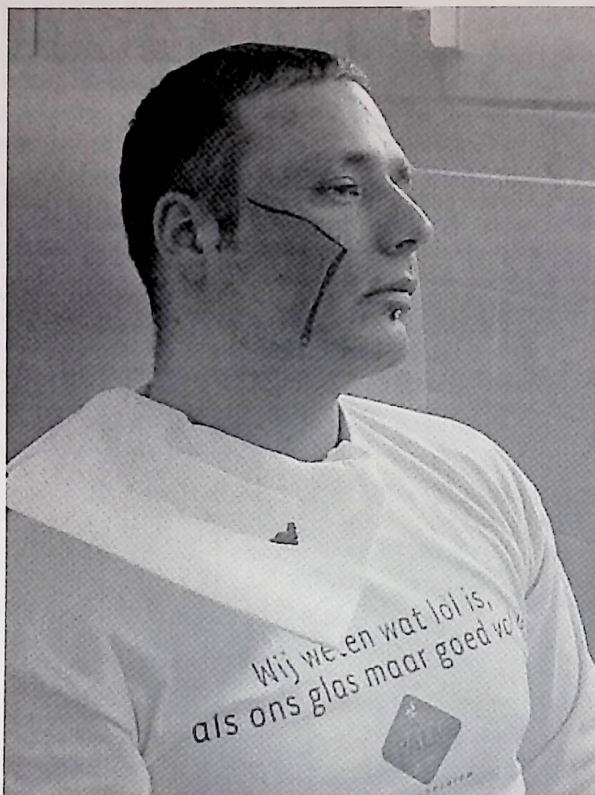
much about



Renommierschmiss on Otto "Scarface" Skorzeny, SS officer who later formed ODESSA, which helped eminent Nazis resettle in South America.

This is certainly not the earliest example of **"chicks dig scars"**, but it is one of the best modern examples (while dueling of various sorts existed around the world, the cult of the dueling scar was largely unique to central Europe, although it did exist for a brief time at other elite universities such as Oxford). Dueling cults died out by the second World War, although even today many (primarily older) Germans still consider the scars attractive, and it certainly has continued on a smaller scale. In addition, it was both fetishized and popularized through stories and films.

Next time your parents tell you you're a freak for body piercing, remind them that they're very lucky you're not a German aristocrat.

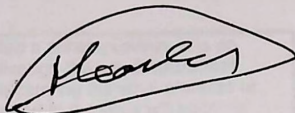


Modern renommier schmiss?

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Fast facts



- Measles is the leading vaccine-preventable childhood killer in the world
- Each year, 30 to 40 million children suffer from measles and 1 million die from the disease
- In Africa alone, 200 million children are at risk from measles
- More than 12 million cases occur in Africa each year
- Every year, more than half the deaths caused by measles occur in Africa (i.e. about 450,000). This means that, in African countries:
 - 1,200 children die every day of measles
 - 51 children die every hour of measles
 - one child dies every minute of measles
- Visible signs of measles include fever, rash, running nose, cough, red eyes, red lips, peeling of the skin, and difficulty in breathing
- Measles can also cause blindness and brain damage, and make a child susceptible to secondary infections such as pneumonia and diarrhoea
- Measles vaccination is the most cost-effective public health intervention available for preventing deaths

Measles is caused by a type of virus called a paramyxovirus. It is an extremely contagious infection, spread through the tiny droplets that may spray into the air when an individual carrying the virus sneezes or coughs. About 85% of those people exposed to the virus will become infected with it. About 95% of those people infected with the virus will develop the illness called measles. Once someone is infected with the virus, it takes about 7-18 days before he or she actually becomes ill. The most contagious time period is the three to five days before symptoms begin through about four days after the characteristic measles rash has begun to appear.

The first signs of measles infection are fever, extremely runny nose, red, runny eyes, and a cough. A few days later, a rash appears in the mouth, particularly on the mucous membrane which lines the cheeks. This rash consists of tiny white dots (like grains of salt or sand) on a reddish bump. These are called Koplik's spots, and are unique to measles infection. The throat becomes red, swollen, and sore.

A couple of days after the appearance of the Koplik's spots, the measles rash begins. It appears in a characteristic progression, from the head, face, and neck, to the trunk, then abdomen, and next out along the arms and legs. The rash starts out as flat, red patches, but eventually develops some bumps. The rash may be somewhat itchy. When the rash begins to appear, the fever usually climbs higher, sometimes reaching as high as 105°F (40.5°C). There may be nausea, vomiting, diarrhea, and multiple swollen lymph nodes. The cough is usually more problematic at this point, and the patient feels awful. The rash usually lasts about five days. As it fades, it turns a brownish color, and eventually the affected skin becomes dry and flaky.

Many patients (about 5-15%) develop other complications. Bacterial infections, such as ear infections, sinus infections, and pneumonia are common, especially in children. Other viral infections may also strike the patient, including croup, bronchitis, laryngitis, or viral pneumonia. Inflammation of the liver, appendix, intestine, or lymph nodes within the abdomen may cause other complications. Rarely, inflammations of the heart or kidneys, a drop in platelet count (causing episodes of difficult-to-control bleeding), or reactivation of an old tuberculosis infection can occur.

An extremely serious complication of measles infection is swelling of the brain. Called encephalitis, this can occur up to several weeks after the basic measles symptoms have resolved. About one out of every thousand patients develops this complication, and about 10-15% of these patients die. Symptoms include fever, headache, sleepiness, seizures, and coma. Long-term problems following recovery from measles encephalitis may include seizures and mental retardation.

A very rare complication of measles can occur up to 10 years following the initial infection. Called subacute sclerosing panencephalitis, this is a slowly progressing, smoldering swelling and destruction of the entire brain. It is most common among people who had measles infection prior to the age of two years. Symptoms include changes in personality, decreased intelligence with accompanying school problems, decreased coordination, involuntary jerks and movements of the body. The disease progresses so that the individual becomes increasingly dependent, ultimately becoming bedridden and unaware of his or her surroundings. Blindness may develop, and the temperature may spike (rise rapidly) and fall unpredictably as the brain structures responsible for

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What are the symptoms of measles?

If your child has the measles, he'll start out with a fever; an extremely runny nose; red, runny eyes; and a cough. A few days later, he'll develop characteristic Koplik's spots in his mouth, particularly on the mucous membranes that line his cheeks. These spots appear as tiny white dots (like grains of salt or sand) on reddish bumps. A couple of days later, a measles rash will appear on his face and neck, progress down his back and trunk, then his arms and hands, and finally his legs and feet.

The rash starts out as flat red patches, but eventually develops some bumps. It will look as though someone poured a bucket of red paint over your child's head. As the rash (which can be itchy) appears, the fever usually climbs, sometimes reaching as high as 105 degrees F. Your child may have nausea, vomiting, diarrhea, and multiple swollen lymph nodes. A cough may become troublesome, and your child will feel miserable.

The rash usually lasts about five days, and as it fades, it turns a brownish color. It will fade in the order it appeared on your child's body, and it will leave his skin dry and flaky.

What are the possible complications?

In 6 to 20 percent of measles cases, the child will develop some kind of complication, like diarrhea or an ear infection. Other less likely but possible difficulties include pneumonia, meningitis, encephalitis (swelling of the brain) and (very rarely) other serious brain complications.

Measles is a highly contagious disease and is spread from person to person through the air. People with measles are contagious throughout the illness, but especially during the prodromal period before the rash.

It can also spread by direct contact and droplets.

How long does it last?

Measles ~~symptoms usually last about 12 days~~. The rash disappears over about three or four days after it reaches its peak in the same order in which it started. As the rash fades, it looks coppery, then brownish, with fine white flakes.

Complications such as encephalitis, subacute sclerosing panencephalitis (SSPE), blindness, other forms of brain damage, pneumonia, or heart damage may last considerably longer. They may be lifelong or even life-ending.

How is it diagnosed?

The diagnosis is usually based on the presence of Koplik spots, the presence of the fever with the three C's -- cough, conjunctivitis, and coryza (cough, red eyes, and a very runny nose), and the sequential progression of the rash.

The diagnosis may be confirmed by a blood test.

How is it treated?

For uncomplicated measles, there is no specific treatment.

Some studies suggest that vitamin A lessens the severity of measles. The cough is often severe and some children benefit from cough medicines. Particularly during the period of the fever, plenty of fluids should be given.

Avoid exposure to other ill children in the first weeks following measles, since some of the normal defenses are temporarily damaged.

How can it be prevented?

The measles vaccine is an effective vaccine in preventing