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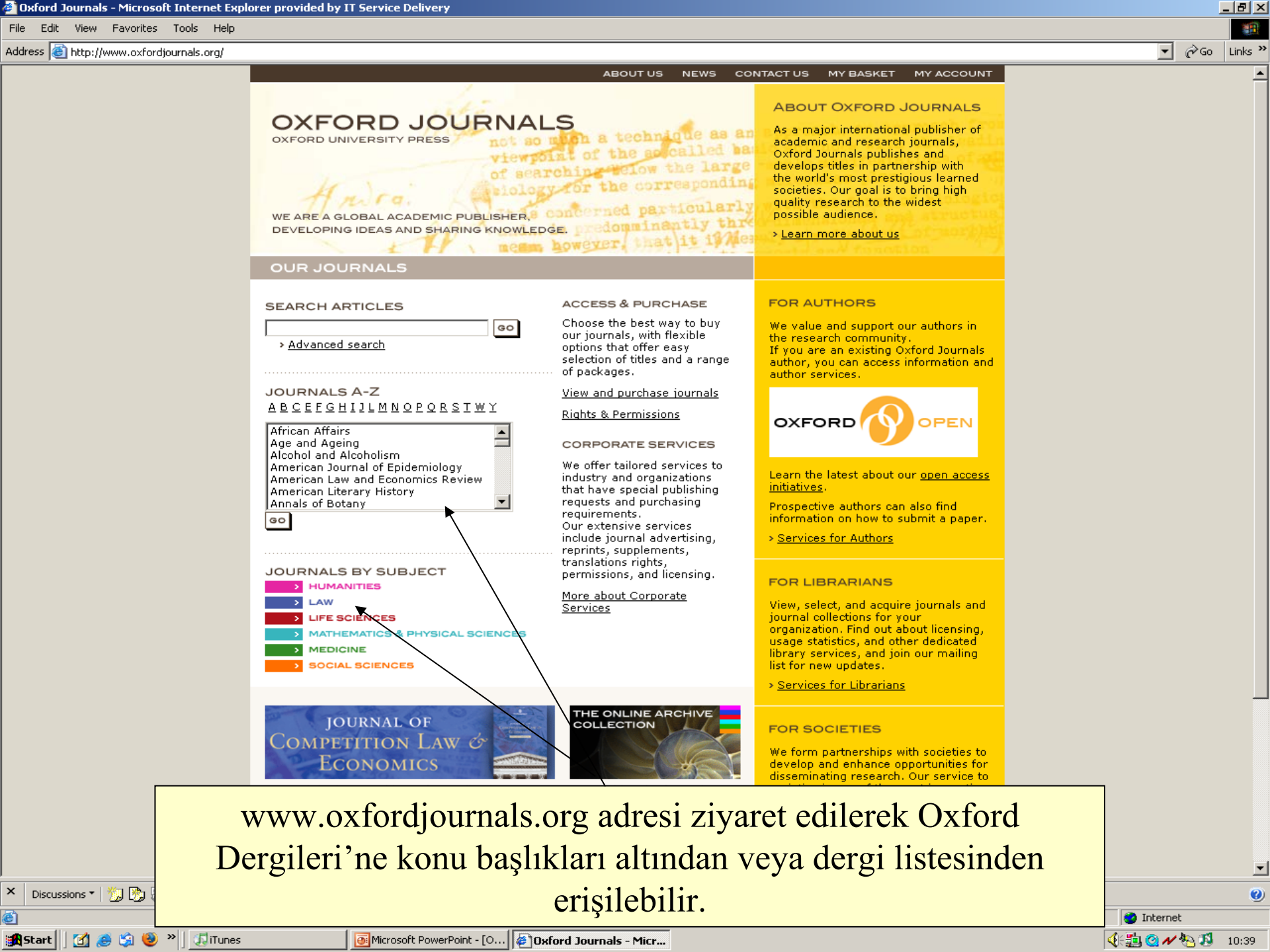
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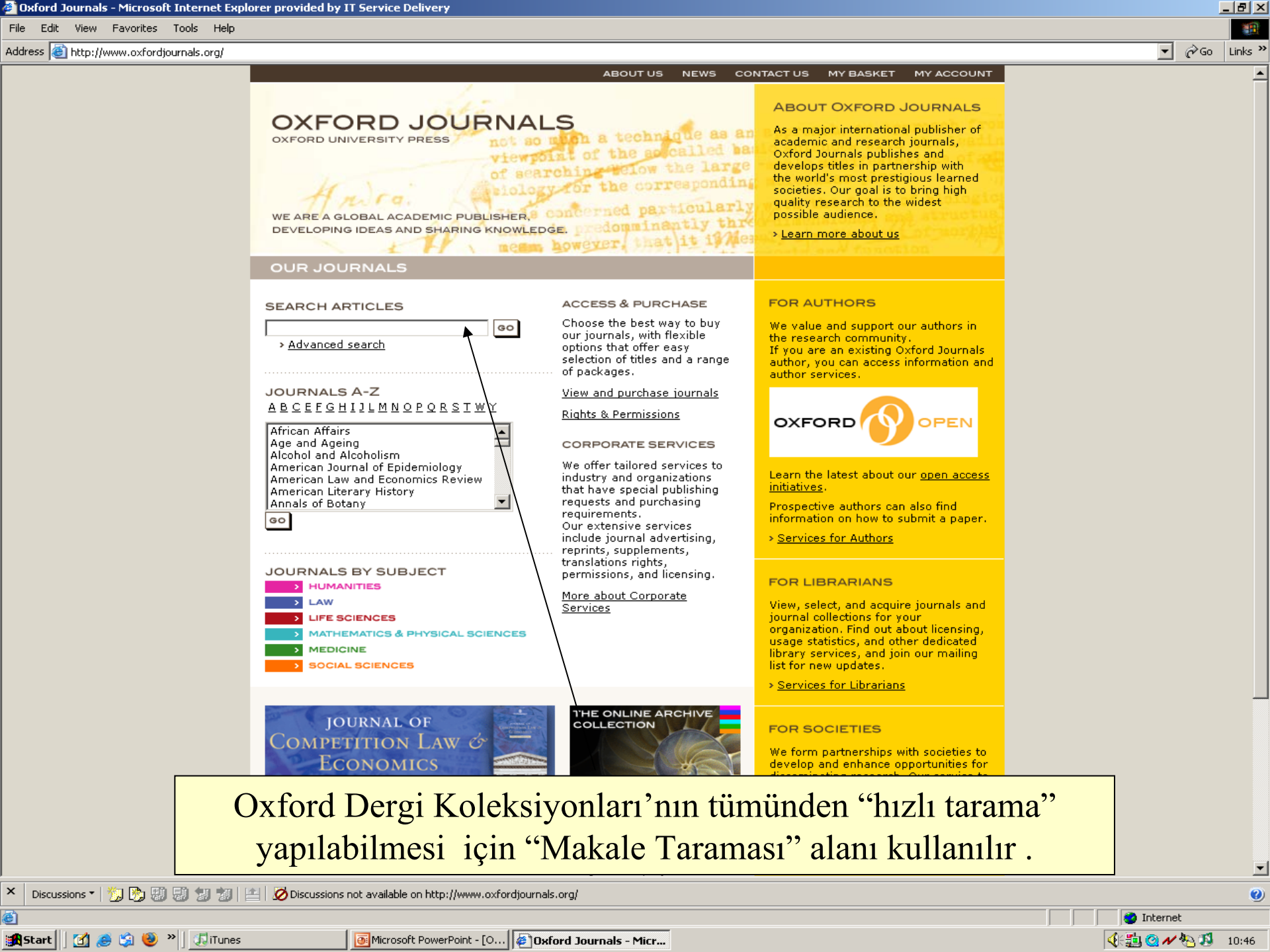


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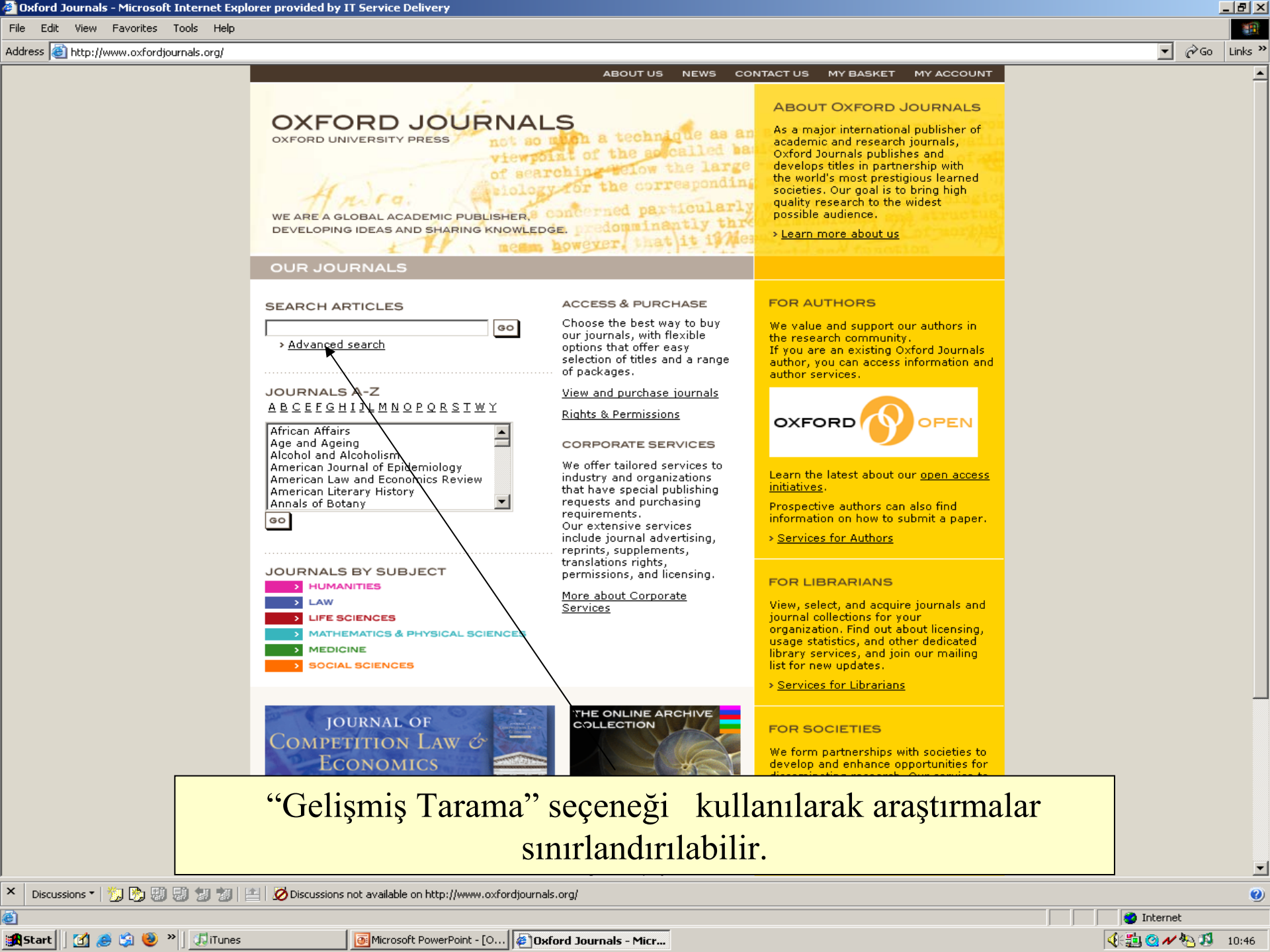
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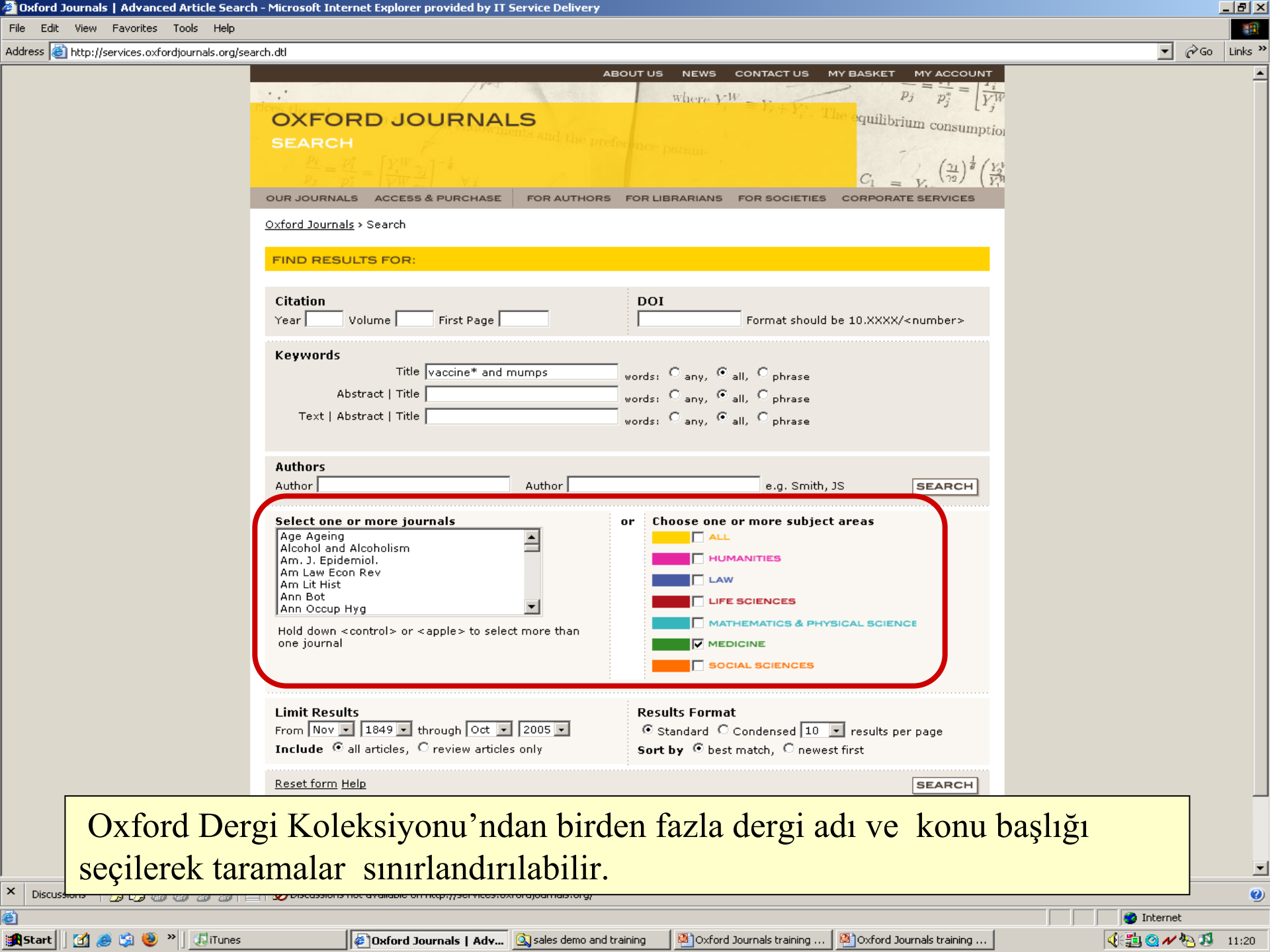
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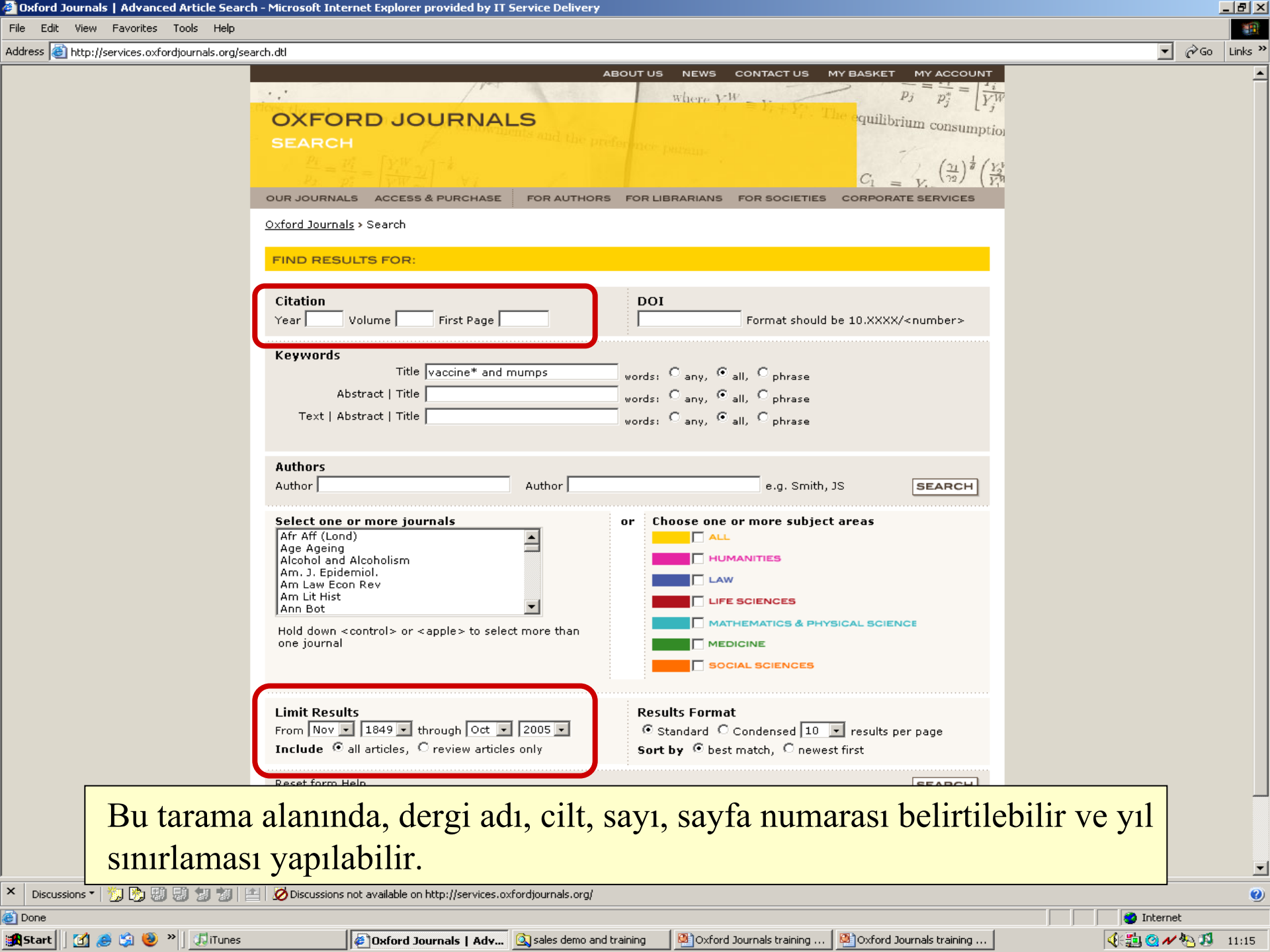
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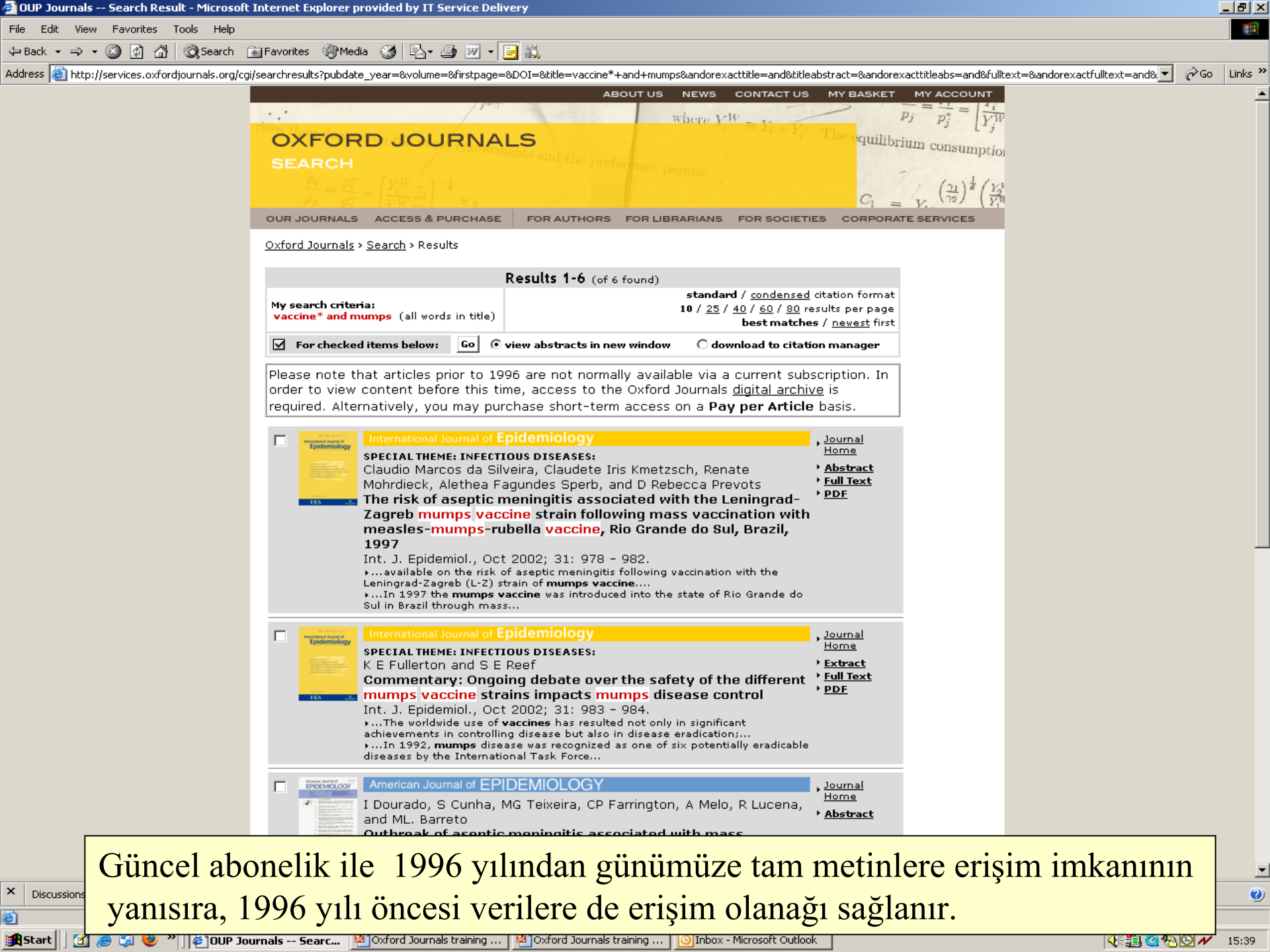
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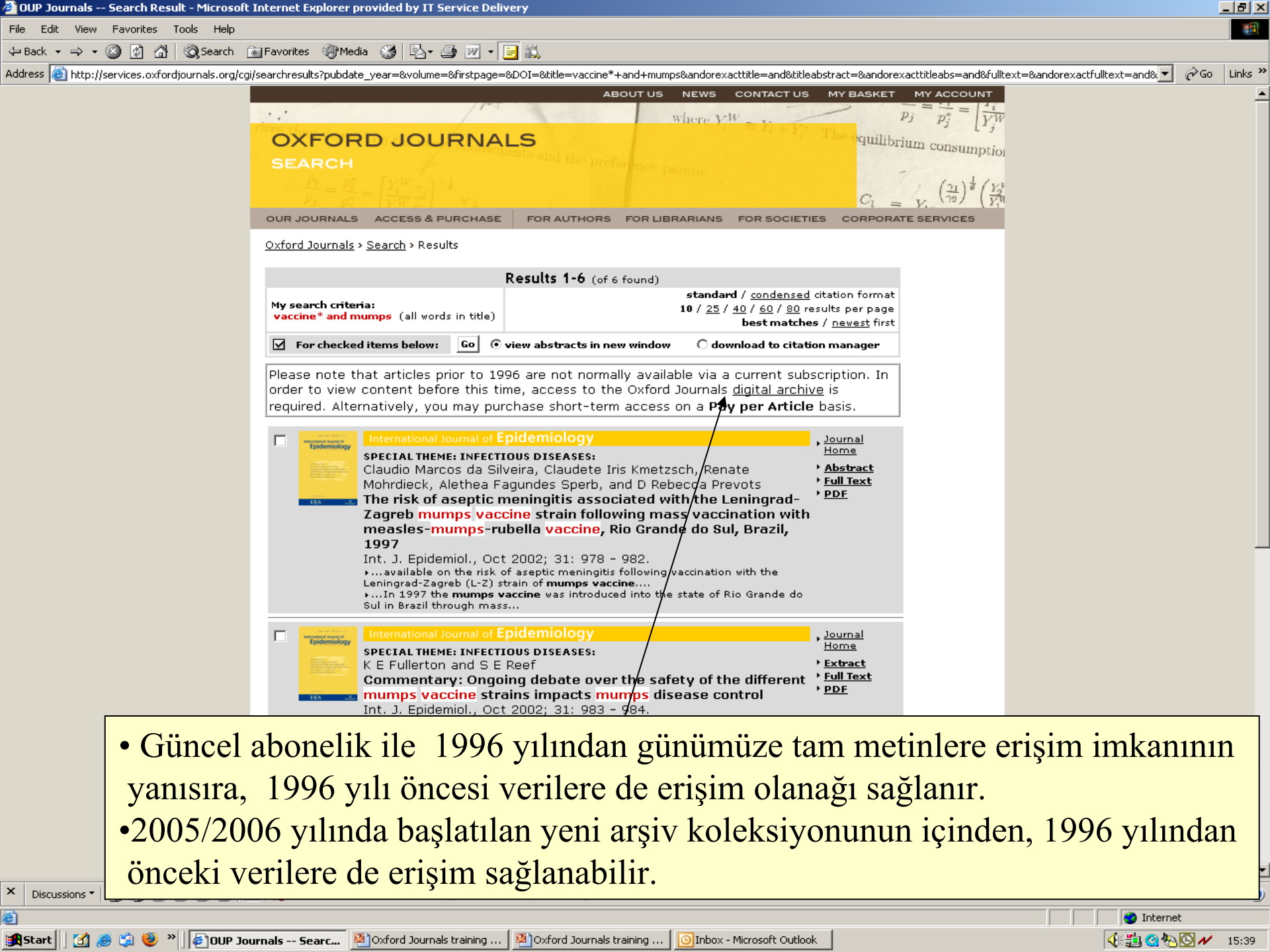
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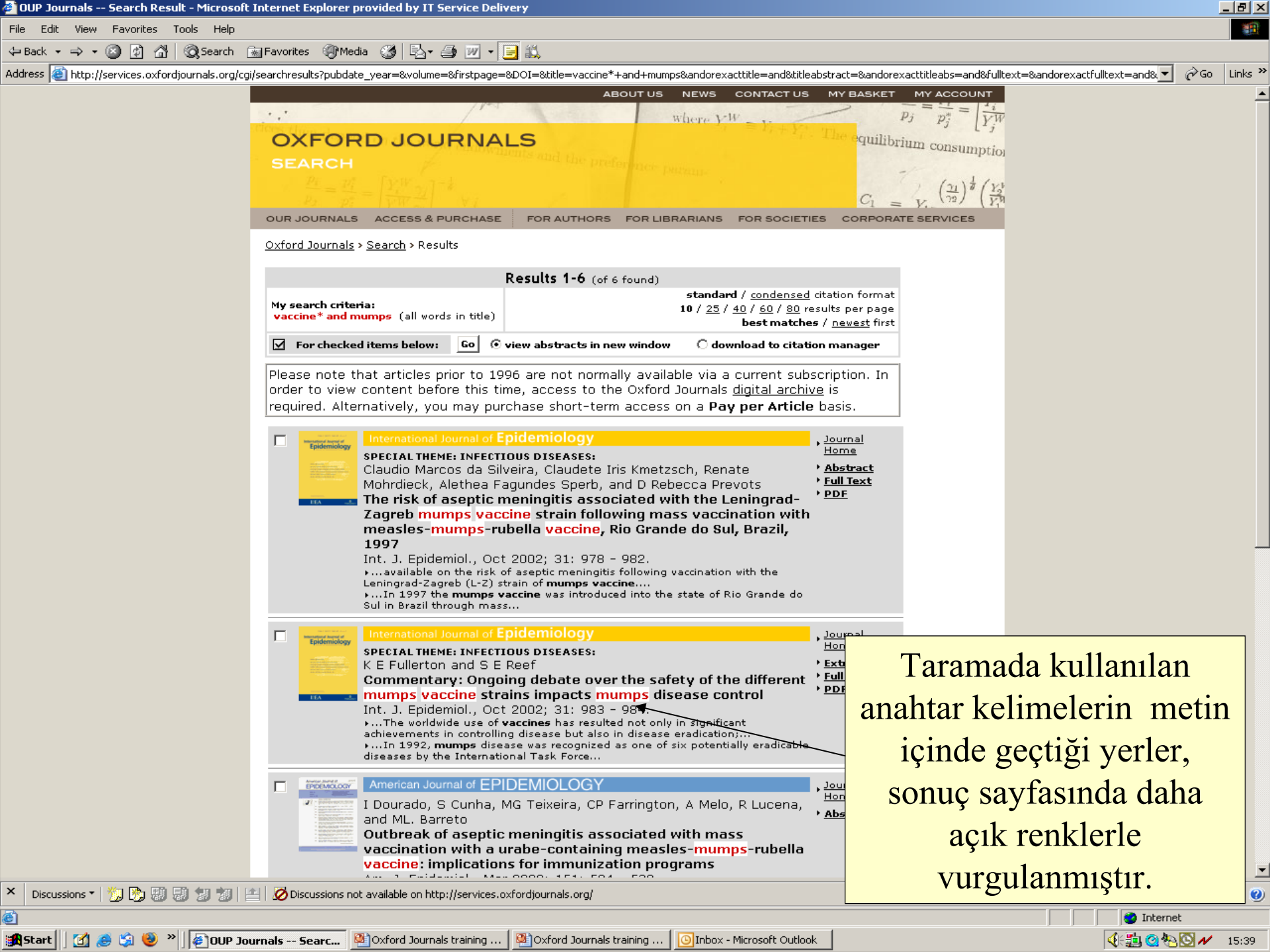
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Claudio Marcos da Silveira<sup>a</sup>, Claudete Iris Kmetzsch<sup>b</sup>, Renate Mohrdieck<sup>b</sup>, Alethea Fagundes Sperb<sup>b</sup> and D Rebecca Prevots<sup>c,d</sup>

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## Abstract

Background: Few data are available on the risk of aseptic meningitis following vaccination with the Leningrad-Zagreb (L-Z) mumps vaccine strain.

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Risk Analysis of Aseptic Meningitis after  
Measles-Mumps-Rubella Vaccination in  
Korean Children by Using a Case-Crossover  
Design

Moran Ki<sup>1</sup>, Taesung Park<sup>2</sup>, Sung Gon Yi<sup>2</sup>, Jin Kyoung Oh<sup>3</sup> and  
BoYoul Choi<sup>3</sup>

<sup>1</sup> Department of Preventive Medicine, Eulji University School of Medicine, Daejeon, Korea.  
<sup>2</sup> Department of Statistics, Seoul National University, Seoul, Korea.  
<sup>3</sup> Department of Preventive Medicine, Hanyang University College of Medicine, Seoul, Korea.

Epidemiologic study of a vaccine's adverse events is not easy; so many countries have no reliable data. Vaccines containing the Urabe or Hoshino strain have been withdrawn from use in several

ommendation not to use specific strains. The meningitis in children after receiving the children aged 8-36 months who had aseptic previously defined criteria. Through a telephone nts' vaccination records. Study results rain of the vaccine (relative risk = 0.6, 95% ative risk was 5.5 (95% CI: 2.6, 11.8); the I: 5.9, 41.2) and was elevated until the sixth verse events after receiving vaccines.

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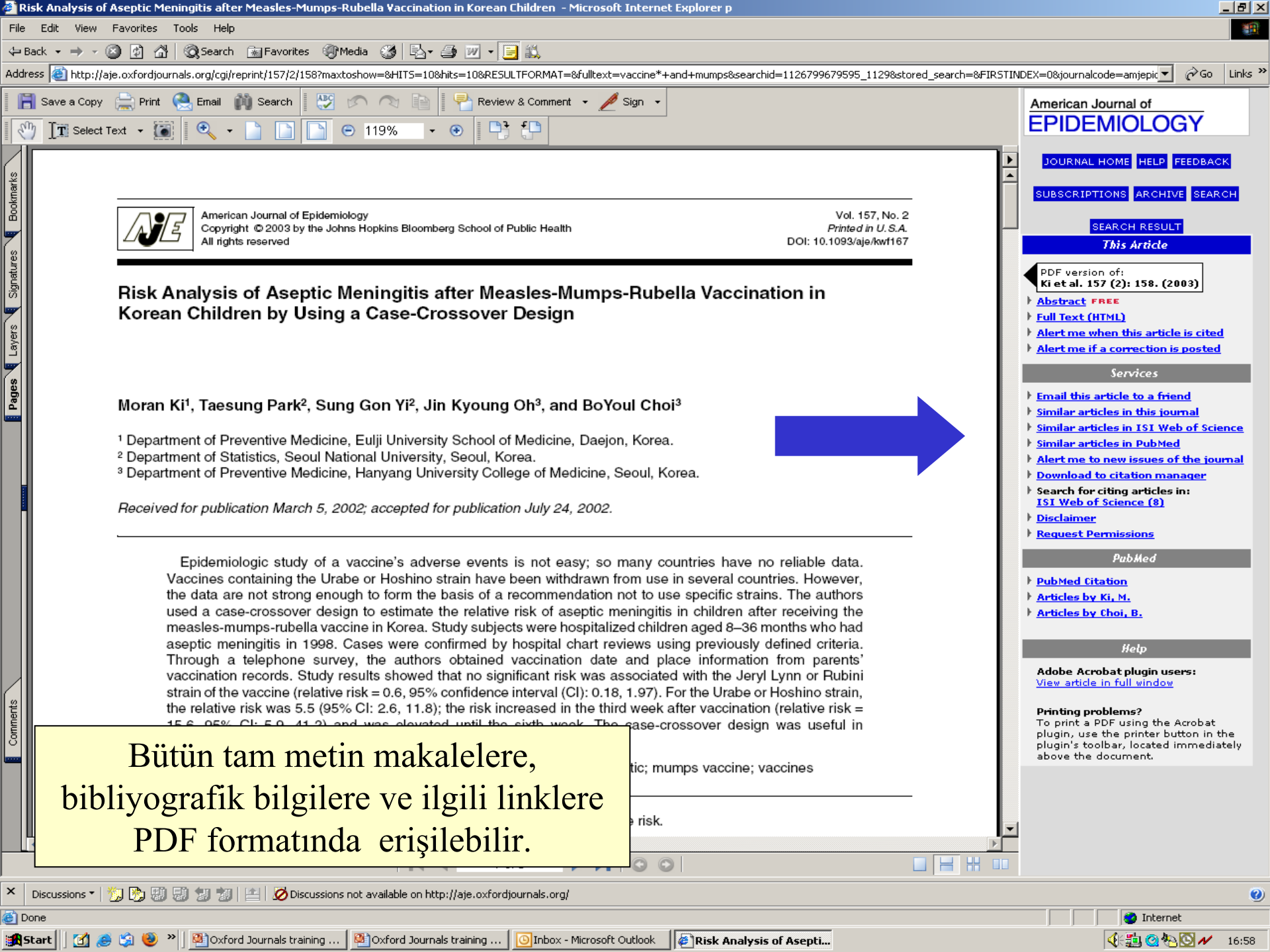
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## Risk Analysis of Aseptic Meningitis after Measles-Mumps-Rubella Vaccination in Korean Children by Using a Case-Crossover Design

Moran Ki<sup>1</sup>, Taesung Park<sup>2</sup>, Sung Gon Yi<sup>2</sup>, Jin Kyoung Oh<sup>3</sup>, and BoYoul Choi<sup>3</sup>

<sup>1</sup> Department of Preventive Medicine, Eulji University School of Medicine, Daejeon, Korea.

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Received for publication March 5, 2002; accepted for publication July 24, 2002.

Epidemiologic study of a vaccine's adverse events is not easy; so many countries have no reliable data. Vaccines containing the Urabe or Hoshino strain have been withdrawn from use in several countries. However, the data are not strong enough to form the basis of a recommendation not to use specific strains. The authors used a case-crossover design to estimate the relative risk of aseptic meningitis in children after receiving the measles-mumps-rubella vaccine in Korea. Study subjects were hospitalized children aged 8–36 months who had aseptic meningitis in 1998. Cases were confirmed by hospital chart reviews using previously defined criteria. Through a telephone survey, the authors obtained vaccination date and place information from parents' vaccination records. Study results showed that no significant risk was associated with the Jeryl Lynn or Rubini strain of the vaccine (relative risk = 0.6, 95% confidence interval (CI): 0.18, 1.97). For the Urabe or Hoshino strain, the relative risk was 5.5 (95% CI: 2.6, 11.8); the risk increased in the third week after vaccination (relative risk = 15.6, 95% CI: 5.0, 41.2), and was elevated until the sixth week. The case-crossover design was useful in

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## Risk Analysis of Aseptic Meningitis after Measles-Mumps-Rubella Vaccination in Korean Children by Using a Case-Crossover Design

Moran Ki<sup>1</sup>, Taesung Park<sup>2</sup>, Sung Gon Yi<sup>2</sup>, Jin Ky

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<sup>3</sup> Department of Preventive Medicine, Hanyang University College of Medicine, Seoul, Korea.

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Epidemiologic study of a vaccine's adverse effects is not easy, so many countries have used the Hoshino strain. The data are not strong enough to form the basis of a case-crossover design to estimate the risk of aseptic meningitis in 1998. Cases were confirmed through a telephone survey, the authors obtained vaccination records. Study results showed that the relative risk was 5.5 (95% CI: 2.6, 11.8); the 15.6, 95% CI: 5.9, 41.2) and was elevated upon confirming the risk of acute adverse events after child, hospitalized; epidemiologic research design

Abbreviations: CI, confidence interval; MMR, measles-mumps-rubella vaccine.

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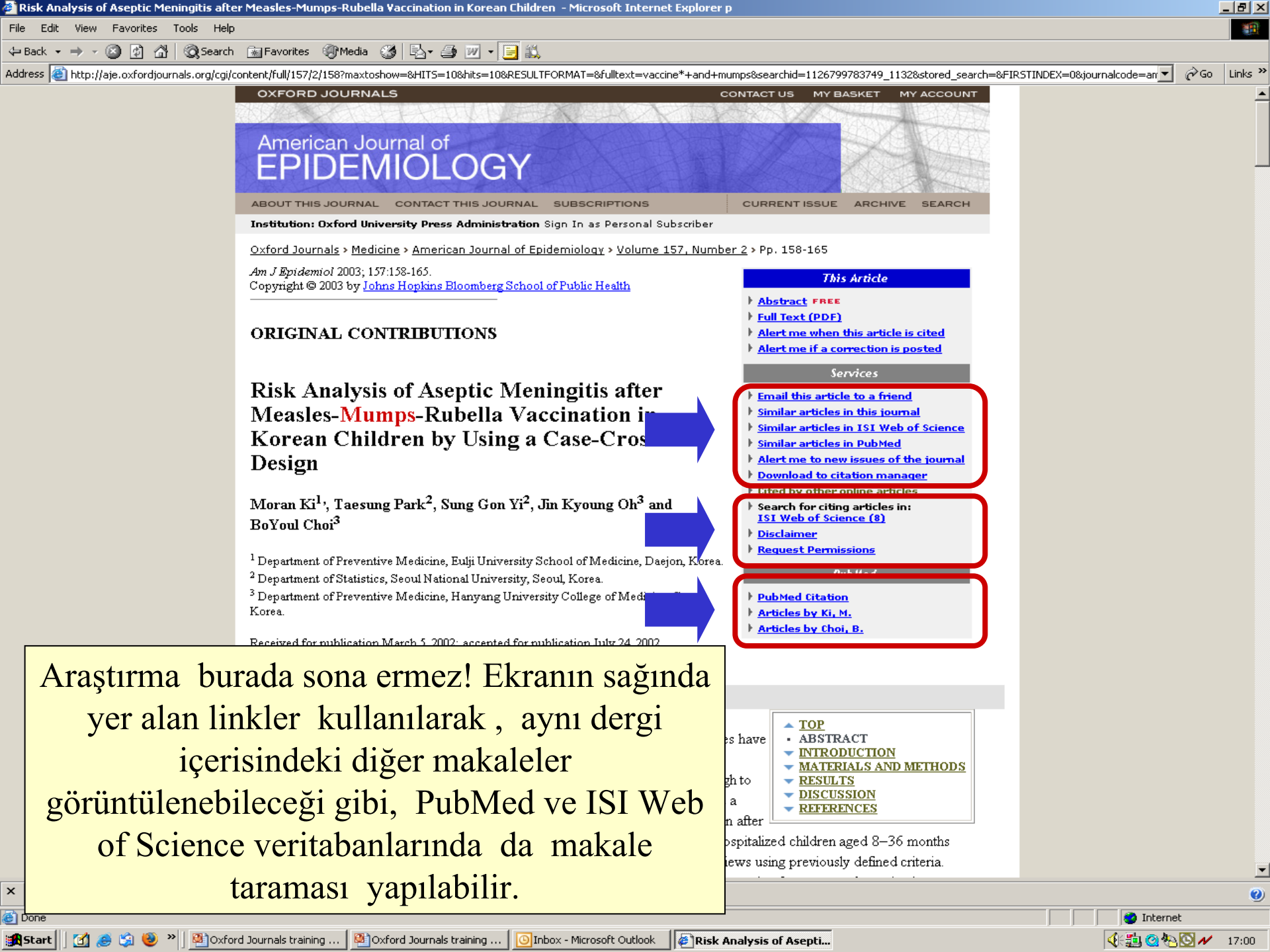
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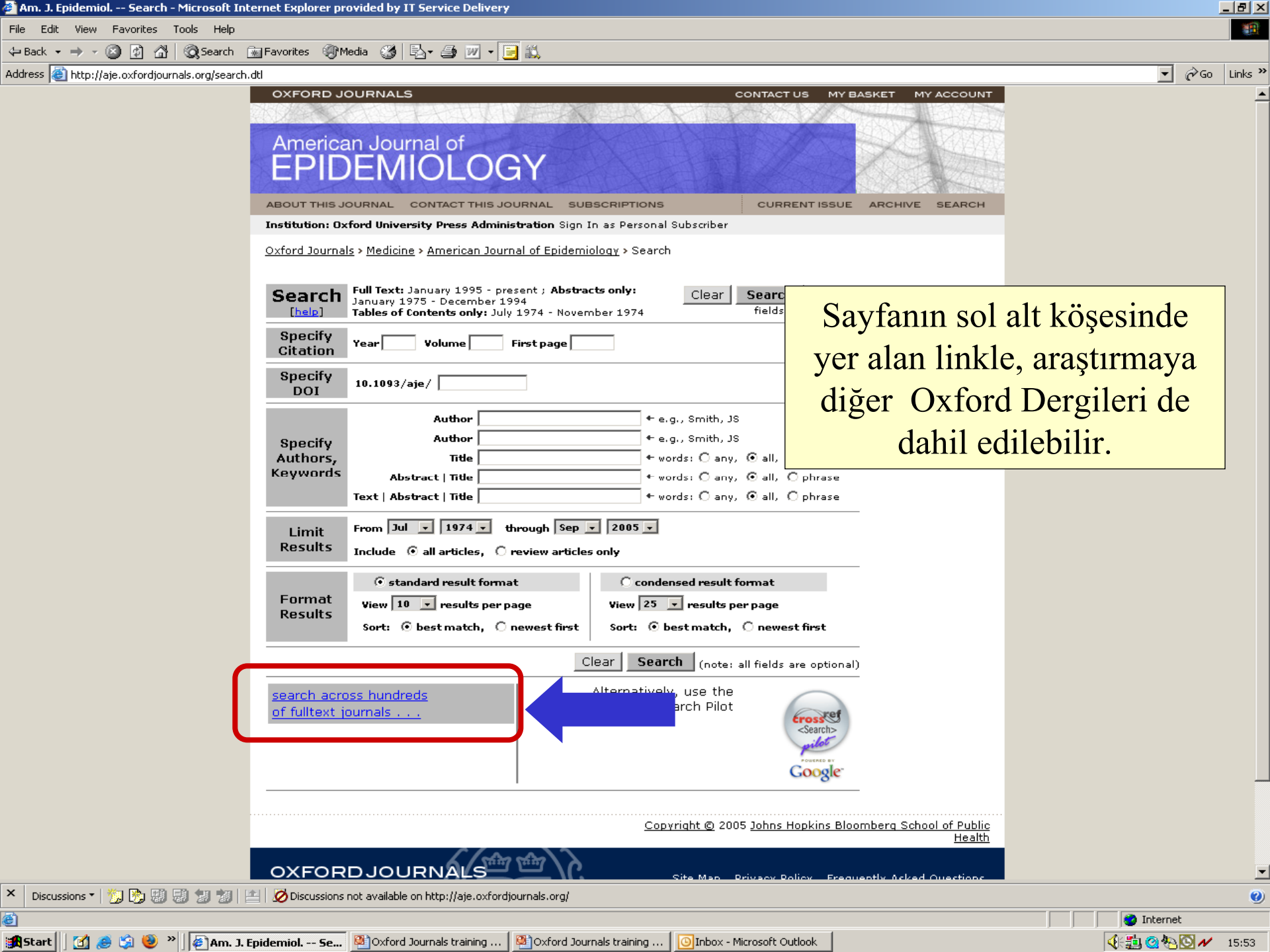
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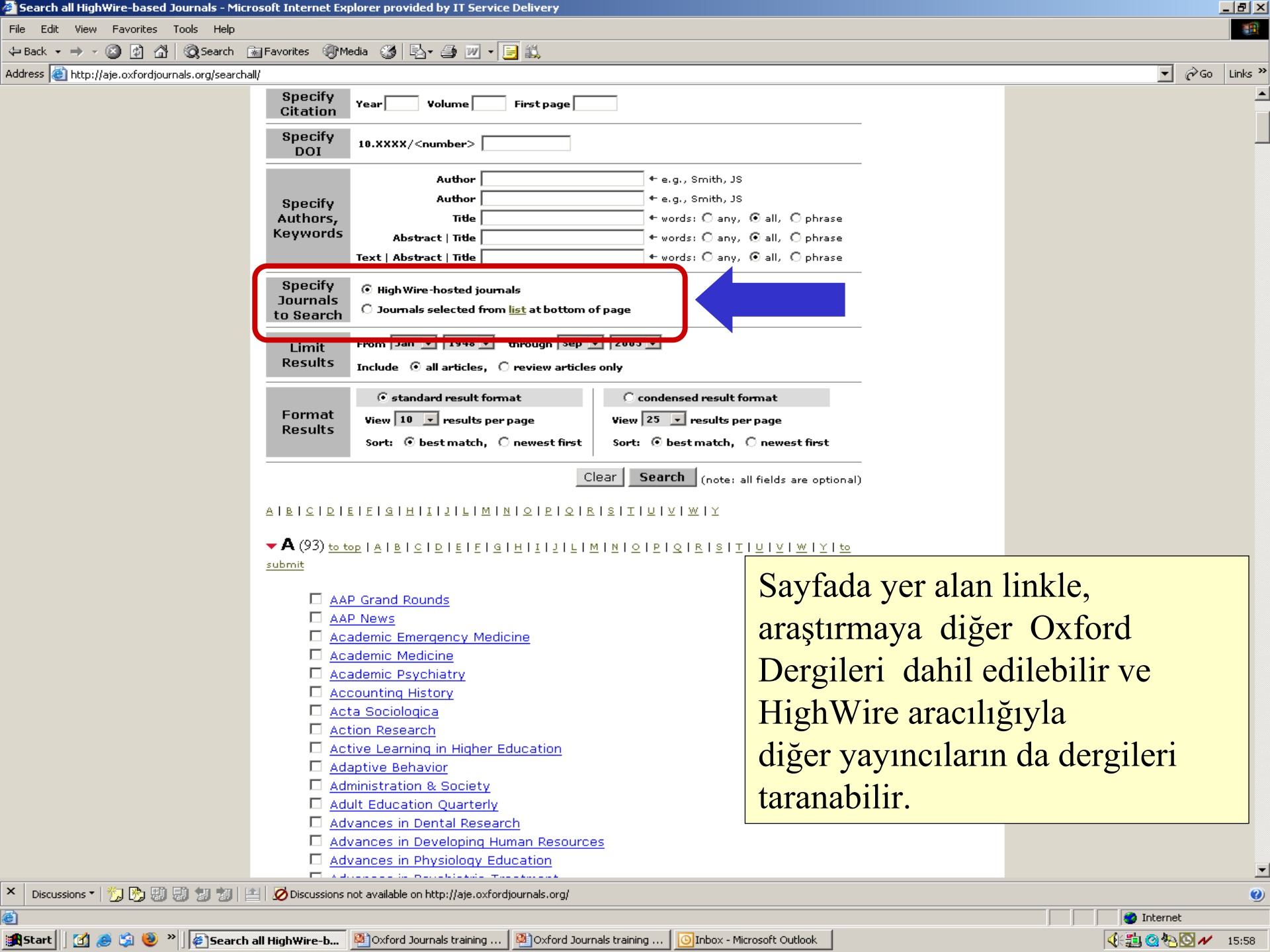
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