CHICKEN POX

Chicken pox is an infection caused by the Varicella zoster virus. It is a highly contagious illness and occurs most commonly in late winter or early spring. Chicken pox is a mild disease, especially in children, most of whom recover with no complications. Once the symptoms have cleared up, the virus remains dormant in the body and can reactivate later on in life as shingles. This causes painful skin blisters mainly on the chest and abdomen.

INCUBATION PERIOD
2 - 3 weeks (commonly 14 - 16 days). The period of infectivity starts from 1-2 days before the rash appears.

SIGNS AND SYMPTOMS
- Loss of appetite
- Decreased activity
- Low grade fever
- Itchy red spots on scalp, face and trunk, arms and legs (the spots become blisters, then open sores and finally crust).

Complications (rare):
- Pneumonia (viral & bacterial)
- Other secondary bacterial infections
- Haemorrhagic complications
- Encephalitis

TREATMENT
There is no effective treatment for children who develop uncomplicated chickenpox. In adults, antiviral treatment, prescribed by a medical doctor, if taken at an early stage of the illness is very effective. It helps to minimise the number of blisters and damage to the nerves, decreasing the risk of complications and post-herpetic neuralgia (where the nerve pain of shingles persists after the rash has gone).

MODE OF TRANSMISSION
From person to person
- By direct contact
- Droplet or airborne spread of secretions from the respiratory tract of chicken pox cases
- Vesicle (blister) fluid of chicken pox and shingles cases

Indirect contact:
- Through items freshly soiled by discharges from vesicles of infected persons

Dry Scabs are NOT infective.

WHO IS MORE SUSCEPTIBLE?
- Tends to be more severe in adults
• Leukaemia patients
• Newborn babies whose mother is not immune
• Cancer patients
• Immunosuppressed people

**CHICKENPOX IN PREGNANCY**
The pregnant mother should immediately inform her obstetrician if she develops chickenpox or comes into contact with a case, to discuss the necessary treatment. Risk to the unborn child depends on the stage of pregnancy.

Varicella infection during the first trimester of pregnancy can cause damage to the unborn child, as well spontaneous abortion but, overall, the risk is not significantly increased.

During the second trimester, the baby is unlikely to have any problems. The virus may show up as shingles in the first few years of life.

During the third trimester, maternal chickenpox can also cause chickenpox in the baby, and may lead to premature onset of labour. Maternal chickenpox within five days prior to delivery and up to 48 hours postpartum has been associated with a high mortality rate.

**PREVENTION**
Pregnant mothers who never had chickenpox or are unsure of whether they have had it are advised to immediately contact their doctor or obstetrician in the event of contact with a case of chickenpox. Their immunity may be assessed by a blood test.

Varicella Immunoglobulin can be used to help prevent development of chickenpox in:

a) Varicella zoster antibody negative pregnant mothers who come in contact with a case of chickenpox at any stage of pregnancy (within 10 days of initial exposure).

b) Newborn babies who come into contact with a case of chickenpox or whose mother had chickenpox 7 days prior to delivery up to 7 days after.

- Infected children and adults are required to stay at home for until the spots become dry and crusted, after which they can return to school or work. They should therefore be seen by a doctor prior to going back to school or work to verify this.
- Infected cases should not share clothes or towels between family members.

**CHICKENPOX VACCINE**
A vaccine is available for chickenpox. The chickenpox (Varicella) vaccine is a live attenuated vaccine. It is available on its own as a single component vaccine or in combination with measles, mumps and rubella (MMRV).

Vaccination may be started in children over the age of one and a 2-dose schedule is recommended at least 8 weeks apart. The Varicella vaccine is also recommended in adults and adolescents who have not had chickenpox before. The same dose schedule applies. Pregnancy should be avoided for at least 1 month following the second dose of vaccine.