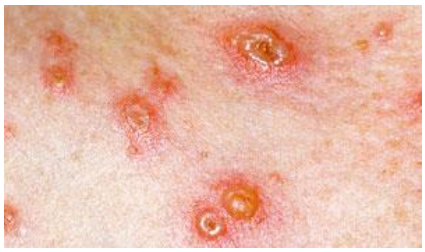
UK Health Security Agency

# General Information - Chickenpox (Varicella)



Chickenpox is a mild and common childhood illness that most children catch at some point.

It causes a rash of red, itchy spots that turn into fluid-filled blisters. They then crust over to form scabs, which eventually drop off.

Some children have only a few spots, but other children can have spots that cover their entire body. These are most likely to appear on the face, ears and scalp, under the arms, on the chest and belly, and on the arms and legs.

Chickenpox (known medically as varicella) is caused by a virus called the varicella-zoster virus. It's spread quickly and easily from someone who is infected.

Chickenpox is most common in children under the age of 10. In fact, chickenpox is so common in childhood that over 90% of adults are immune to the condition because they've had it before.

Children usually catch chickenpox in winter and spring, particularly between March and May.

**What to do**

To prevent spreading the infection, keep children off nursery or school until all their spots have crusted over.

Chickenpox is infectious from one to two days before the rash starts, until all the blisters have crusted over (usually five to six days after the start of the rash).

If your child has chickenpox, try to keep them away from public areas to avoid contact with people who may not have had it, especially people who are at risk of serious problems, such as newborn babies, pregnant women and anyone with a weakened immune system (for example, people having cancer treatment or taking steroid tablets).

**Chickenpox treatment**

Chickenpox in children is considered a mild illness, but your child will probably feel pretty miserable and irritable while they have it. Your child may have a fever for the first few days of the illness. The spots can be incredibly itchy.

There is no specific treatment for chickenpox, but there are pharmacy remedies that can alleviate symptoms. These include paracetamol to relieve fever, and calamine lotion and cooling gels to ease itching.

In most children, the blisters crust up and fall off naturally within one to two weeks.

**When to see a doctor**

For most children, chickenpox is a mild illness that gets better on its own.

However, some children can become more seriously ill with chickenpox and need to see a doctor.

Contact your GP straight away if your child develops any abnormal symptoms, such as:

- if the blisters on their skin become infected
- if your child has a pain in their chest or has difficulty breathing

**Chickenpox in adults**

Chickenpox may be a childhood illness, but adults can get it too. Chickenpox tends to be more severe in adults than children, and adults have a higher risk of developing complications.

Adults with chickenpox should stay off work until all the spots have crusted over. They should seek medical advice if they develop any abnormal symptoms, such as infected blisters.

**Who's at special risk?**

Some children and adults are at special risk of serious problems if they catch chickenpox.

They include:

- pregnant women
- newborn babies
- people with a weakened immune system

These people should seek medical advice as soon as they are exposed to the chickenpox virus or they develop chickenpox symptoms.

They may need a blood test to check if they are protected from (immune to) chickenpox.

**Chickenpox in pregnancy**

Chickenpox occurs in approximately 3 in every 1,000 pregnancies. It can cause serious complications for both the pregnant woman and her baby.

**Chickenpox and shingles**

Once you have had chickenpox, you usually develop antibodies to the infection and become immune to catching it again. However, the virus that causes chickenpox, the varicella-zoster virus, remains inactive (dormant) in your body's nerve tissues and can return later in life as an illness called shingles.

It's possible to catch chickenpox from someone with shingles, but not the other way around.

**Is there a vaccine against chickenpox?**

There is a chickenpox vaccine, but it is not part of the routine childhood vaccination schedule. The vaccine is only offered to children and adults who are particularly vulnerable to chickenpox complications.

The recommended two doses of the vaccine is estimated to offer 98% protection from chickenpox in children and 75% protection in adolescents and adults.
So it may be possible to develop the infection after vaccination. Similarly, there is a chance that someone who has received the vaccine could develop chickenpox after coming in close contact with a person who has shingles.

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# Factsheet on Hand, Foot and Mouth Disease

## What is Hand, Foot and Mouth Disease?

Hand, foot, and mouth disease is a viral illness. The causative virus is quite different from that of Foot and Mouth disease, a disease of animals.

## What is the incubation period?

The incubation period (this is from exposure to a case to development of the first signs and symptoms of the disease) is three to five days.

It is communicable immediately before and during the acute stage of the illness, and perhaps longer as the virus may be present in the faeces for weeks.

## What are the symptoms?

The onset of the disease generally presents as a fever, malaise, sore mouth, and development of a rash. Mouth lesions appear on the inside surfaces of the cheeks, gums and on the sides of the tongue. Raised pink spots that develop into blisters, which may persist for seven to ten days, can also occur as a rash, especially on the palms, fingers, soles and occasionally on the buttocks.

The disease is self-limiting and more common in summer and early autumn, mainly in children under ten years of age, but adult cases are not unusual. The disease frequently occurs in outbreaks in groups of children, in a nursery school for example.

The virus is spread by direct contact with nasal and throat secretions or faeces of the infected person. The virus can also be transmitted by aerosol spread, i.e. coughing and sneezing. Coughing and sneezing are also likely to contaminate hands which, if not washed thoroughly, may transmit infection.

## Preventing spread of the disease

Children do not need to be kept away from school/nursery unless they are unwell and there is no need to keep a child away from school/nursery until the last blisters have disappeared providing he/she is otherwise well.

A good standard of hand, personal and food hygiene should be maintained and care when handling articles contaminated with respiratory secretions or faeces, i.e. handkerchiefs, tissues, nappies etc., should be encouraged. Hands should be washed after contact with any of the above. These are measures which should be encouraged at all times to prevent this and many other infections.

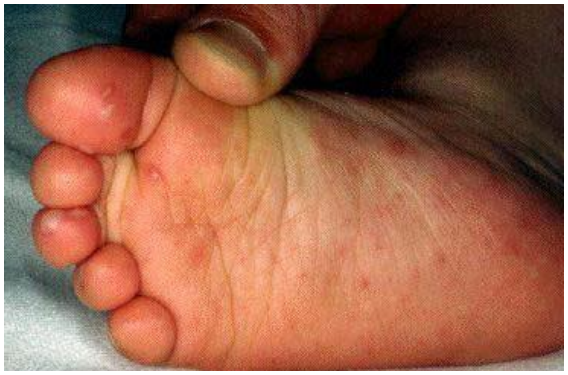
## Is there any effective treatment?

No specific treatment or immunisation is given for this disease. Investigation of contacts or the source of infection is of no practical value.

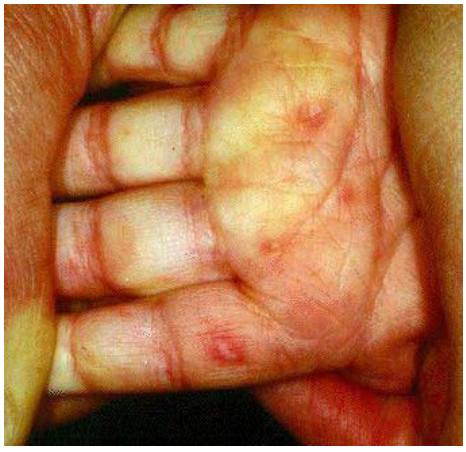
## Key Points

Children should remain away from school/nursery until they feel well.  Regular hand washing and drying should be encouraged.

## Blisters



Foot blisters from Dept Dermatology, Waikato Hospital, New Zealand



Hand blisters from Dept Dermatology, Waikato Hospital, New Zealand

If you think you may have hand, foot, and mouth disease, please contact your GP or pharmacist.

Further information can be obtained from your family doctor/GP, by calling NHS 111, and online via NHS Choices (www.nhs.uk).