

Local Resource 4 Chickenpox/Shingles (varicella-zoster virus)

What is it?

Chickenpox is an acute, generalised viral infection, commonly affecting children. The rash tends to affect central areas of the body, e.g. the trunk more than the limbs, also the scalp, mucous membrane of the mouth and upper respiratory tract and eye may be affected. It is infectious from about 2 days before, to 5 days after, the rash appears.

Shingles only occurs in people who have previously had chickenpox infection. Following chickenpox, the virus remains dormant in the body, usually in a sensory nerve root. In later months or years the virus reactivates and causes a shingles rash at the skin site supplied by the nerve. Therefore anyone with shingles must have had chickenpox in the past, even if they don't remember it. Shingles causes a rash of tiny blisters, usually affecting a clearly defined area of the body. After a few days, the blisters crust over and form scabs. The rash is not itchy but it can be very painful. The pain may start a day or so before the rash appears. It is infectious for about a week after the blisters appear or until 48 hours after the start of anti-viral treatment.

How are they spread?

Chickenpox is spread by contact with infected respiratory droplets or fluid from the blisters. It is very infectious to people who have not have chickenpox before. Shingles cannot be spread from person to person. However, the blister fluid contains the varicella virus and therefore people who have never had chickenpox should avoid contact with cases of both chickenpox and shingles.

Who is most at risk?

Certain individuals have additional risks if infected, including the immuno-compromised (e.g. those receiving steroids or cytotoxic drugs), non-immune pregnant women and neonates. If they have contact with a case during the infectious phase they may need immunoglobulin. Discuss the situation with occupational health, microbiologist or GP.

Non-immune care workers should be immunised against varicella. Non-immune care workers, who are exposed to the virus, should be aware of the symptoms which they may develop 8-21 days after contact with a case (28 days if immunoglobulin has been given).

The risk to the foetus/neonate depends when the mother is infected.

All non-immune pregnant care workers who have had contact with a case will be offered immunoglobulin.

How is spread prevented?

People with chickenpox should stay off work for at least 5 days from the onset of the rash.

People who are not immune to chickenpox should avoid contact with cases.

In care homes, keep service users with chickenpox/shingles in their room for 5 days after the onset of the rash.

Wear gloves if applying lotion to the rash.

In residential care settings treat laundry as infected. Seek medical advice if the rash involves the eye.

Further information can be found at:

<https://www.nhs.uk/Conditions/Chickenpox/#>

<https://www.nhs.uk/conditions/shingles/>

Please note that the internet version of this resource is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

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