Chickenpox

Chickenpox (varicella) is a highly contagious viral disease caused by varicella-zoster virus (VZV). The main symptom is a blistering skin rash. Outbreaks are more common in winter and early spring. A vaccine is available.

Chickenpox is spread by air-borne droplets from the upper respiratory tract (coughing, sneezing) or from the fluid in the skin blisters (lesions). An infected person is contagious for 1–2 days (possibly five days) before the onset of the rash and remains infectious until the blisters form scabs (usually around day five of the illness). Children with chickenpox should not go to school or kinder until the last blister has dried. You should tell your child’s school or kinder if your child gets chickenpox, as other children may need to be immunised or treated.

For most healthy people, chickenpox is mild and the person recovers fully without specific treatment. However, complications occur in approximately one per cent of cases. It is more severe in adults and anyone of any age with impaired immunity. Immunisation is the best way to prevent chickenpox.

Symptoms

The symptoms of chickenpox include:

- The person develops a low-grade fever.
- The person experiences general discomfort, illness or lack of wellbeing (malaise).
- A skin rash appears as little blisters surrounded by irregular-shaped patches of inflamed skin (‘dew drop on a rose petal’).
- The rash usually starts on the body, then progresses to include the head and limbs.
- Ulcers may develop in certain areas, including the mouth and vagina.
- The rash is intensely itchy.
- The little blisters burst and develop crusts, usually about day five.

How it is spread

Chickenpox is spread by air-borne droplets from the upper respiratory tract (when the infected person coughs or sneezes) or from touching the fluid in the skin blisters (lesions). An infected person is contagious for 1–2 days (possibly five days) before the onset of the rash and remains infectious until the blisters form scabs (usually around day five of the illness).

The time from infection to appearance of the rash (incubation period) for chickenpox is around 14–16 days. A few days prior to the rash appears, the person may feel feverish with a sore throat and headache. Their skin may be marked for some months after the rash has cleared.

Children with chickenpox should not go to school or kinder until the last blister has dried or until all blisters are covered. You should tell your child’s school or kinder if your child gets chickenpox, as other children may need to be immunised or treated.

Possible complications

The possible complications of chickenpox include:

- **Scarring** – chickenpox can leave pockmark scars on the skin.
- **Cellulitis** – a type of bacterial infection of the skin.
- **Pneumonia** – infection and inflammation of the lung can occur in adults and can be fatal.
- **Encephalitis** – usually mild, but sometimes severe.
• **Bleeding disorders** – these are rare but can be fatal.
• **Death** – in rare cases.

### High-risk groups

People at increased risk include:

- **Newborns** – there is an increased risk of severe illness in the first 28 days of life.
- **Pregnant women** – who have not had chickenpox or been immunised for chickenpox. If a pregnant woman acquires chickenpox in the first 20 weeks of pregnancy, there is risk of congenital varicella syndrome and this can cause abnormalities. After 20 weeks the risk is lower. However, having chickenpox around the time of delivery (five days prior to or within two days after delivery) can result in a high mortality rate of the newborn.
- **People who have depressed immunity** – people with leukaemia or Hodgkin’s disease, or those taking immunosuppressive drugs, are at risk of longer and more serious illness.

### Diagnosis

Chickenpox is usually diagnosed by physical examination. Tests to confirm the diagnosis, such as culturing the contents of blister fluids to check for the presence of the virus, may also be used.

### Treatment

In most cases, chickenpox is mild and resolves by itself without the need for specific treatment. Traditional treatment methods aim to relieve symptoms and include:

- Bed rest
- Extra fluids to drink – to avoid dehydration
- Paracetamol to bring down the fever – aspirin should be avoided because of a possible increased risk of complications
- Lukewarm baths with baking soda or oatmeal added to the water – a cup of oatmeal can be put into an old, clean pair of panty hose, tied and left in the bath while the water runs
- Cream, such as calamine lotion, to reduce the itching – if you have a skin problem like eczema, you may need to ask a health professional about other creams you can use
- Avoidance of salty or citrus foods
- Babies and young children may need to wear mittens to prevent scratching.

In cases of severe illness, treatment with an antiviral medication (such as acyclovir) may be needed.

### Immunisation

Protection against chickenpox is now available under the National Immunisation Schedule. In Victoria, it is given free of charge to:

- **Children at 18 months** – unless they have already had the chickenpox infection
- **Year 7 secondary school students** – who have not had chickenpox or received the vaccine.

Other people for whom immunisation would be recommended, but who must pay for it themselves, are non-immune people such as:

- People in high-risk occupations such as health care workers, teachers and childcare workers
- Women prior to pregnancy, to avoid congenital or neonatal chickenpox
- Women immediately after delivery
- Parents of young children
- People who share a house with someone who has impaired immunity.

### Chickenpox and shingles

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The varicella-zoster virus (VZV) responsible for chickenpox can also cause shingles. Following an attack of chickenpox, the virus becomes latent (lies dormant) in certain nerve cells known as dorsal root ganglia. It may reactivate and give rise to an attack of shingles later in life.

If a person who has never had chickenpox illness or been immunised comes in contact with the fluid in the blisters of a person with shingles, they may get chickenpox. They will not get shingles.

### Where to get help

- Your doctor
- Maternal and Child Health nurse
- Nurse-on-Call Tel. 1300 606 024 – for expert health information and advice (24 hours, 7 days)
- National Immunisation Infoline Tel. 1800 671 811
- Your local pharmacist
- Your local council immunisation service

### Things to remember

- Chickenpox (varicella) is a highly contagious viral disease; in most cases, it is mild and resolves by itself.
- The main symptom is the characteristic blistering skin rash.
- Treatment options aim to relieve symptoms and include bed rest, calamine lotion and lukewarm baths.
- A vaccine is available to protect against chickenpox.

This page has been produced in consultation with, and approved by:

Department of Health - Communicable Disease Prevention and Control Unit

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