CLINICAL GUIDELINE

Chickenpox in Pregnancy

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

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Approval Group:	Maternity Clinical Governance Group

Important Note:

The Intranet version of this document 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.

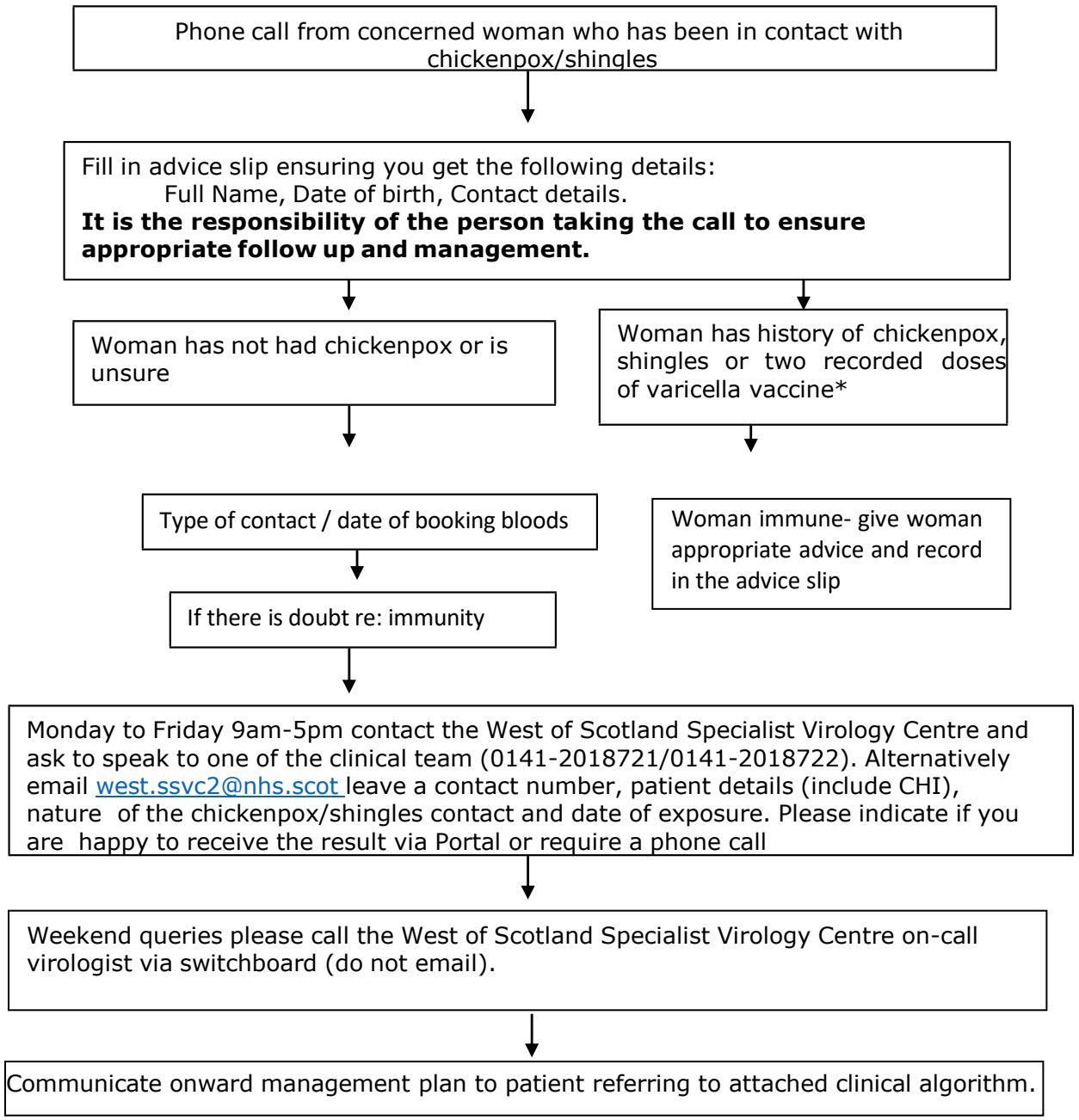
Greater Glasgow & Clyde Maternity Guidelines

Chickenpox in Pregnancy

Advice, reassurance and action points for the care of Pregnant Women who come into contact with Chickenpox or Shingles during pregnancy.

Key points to communicate

- Once you have had Chickenpox you cannot catch it a second time. You are immune.
- Most UK adults are immune to Chickenpox
- Chickenpox is very rare in pregnant women in the UK
- Although it affects very few babies in the womb, it can be very serious for them and/or their mother.
- If you are not immune to Chickenpox, or you are not sure whether you are immune, while you are pregnant do all you can to avoid coming into contact with people who may have it.
- If you have Chickenpox, avoid contact with other pregnant women and new babies until at least 5 days after the rash appears, or until all the blisters have crusted over.
- Pregnant women with shingles can infect others. The baby will be safe during pregnancy.



*Varicella antibody response after vaccination may be undetectable (VZV IgG negative) using current laboratory methods. If the woman has had two recorded doses of varicella vaccine she should be considered immune

Post Exposure Prophylaxis (PEP)

Oral acyclovir or valaclovir is now the first choice PEP for all susceptible pregnant women at any stage of pregnancy. Pregnant women who are exposed to chicken pox or shingles should be assessed (Figure 1) and for those identified as susceptible, antivirals should be given from day 7 to day 14 after exposure. Day of exposure is defined as date of onset of rash if the index is a household contact and date of first or only contact if exposure is on multiple or single occasions respectively.
If the pregnant woman presents after day 7 of exposure a 7 day course of anti-virals can be started up to date 14 after exposure if necessary. The incidence and severity of clinical varicella appears to be worse when PEP is started immediately after exposure compared to day 7 post exposure.

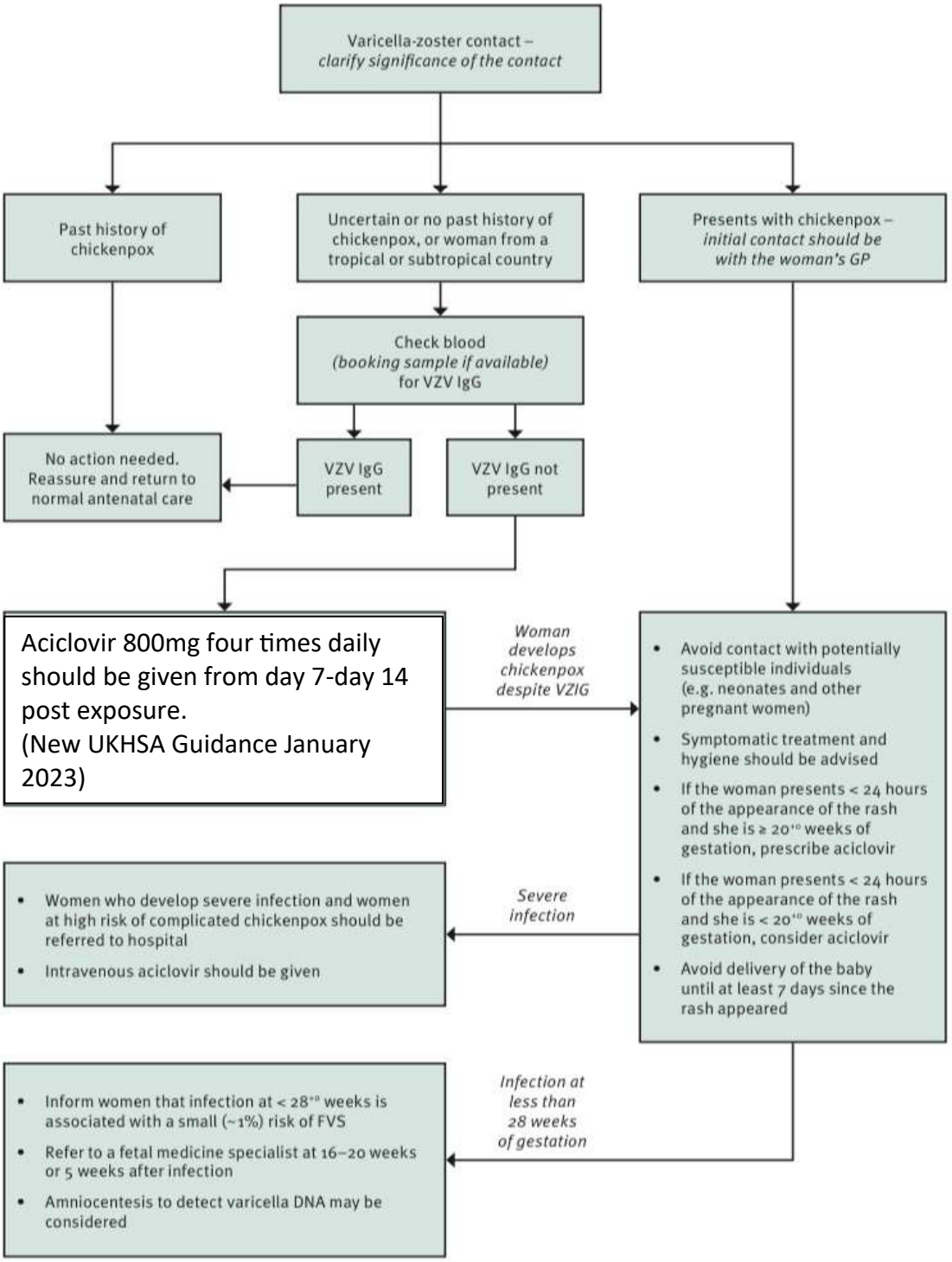
Table 1. Recommended doses of anti-virals

	Oral Aciclovir	**Oral Valaclovir**
Adults	800mg four times daily from day 7 to day 14 post exposure	1000mg three times daily, day 7 to day 14 post exposure

Contraindications/Cautions

The dose of aciclovir may need to be adjusted in women with renal impairment. Individuals with a glomerular filtration rate <10ml/minute/1.73m$_2$ may need the dose/frequency altered and VZIG may be considered as an alternative. VZIG may also be considered in individuals with significant intestinal malabsorption.

Appendix I: Algorithm for the management of varicella-zoster contact in pregnancy



Abbreviations: FVS fetal varicella syndrome; GP general practitioner; IgG immunoglobulin G; VZIG varicella-zoster immunoglobulin; VZV varicella-zoster virus

References

- RCOG Green-top Guideline 13 Chickenpox in Pregnancy January 2015 accessed 1.4.15 https://www.rcog.org.uk/globalassets/documents/guidelines/gtg13.pdf
- Acknowledgement APPENDIX 1 algorithm for management of varicella zoster contact in pregnancy reproduced from above guideline on following page.
- RCOG Chickenpox in Pregnancy patient information leaflet November 2008 accessed 1.4.15 https://www.rcog.org.uk/globalassets/documents/patients/patient-information-leaflets/pregnancy/chickenpox-in-pregnancy.pdf
- UK Health Security Agency. Guidelines on Post Exposure Prophylaxis (PEP) for Varicella and Shingles. January 2023

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