



Chickenpox

Patient Information

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Chickenpox is a common condition in childhood, most commonly occurring between 3-10 years old, but it can be caught at any age.

What Causes Chickenpox?

Chickenpox is caused by a virus called varicella-zoster virus. It is highly contagious and is infectious from 24-48 hours before the rash appears. It stops being infectious once all the blisters have scabbed over, normally five to six days after the start of the rash. It is spread by being in the same room as someone with it or through contact with fluid from the blisters.

It is often a mild condition however some children / adults are at a higher risk of developing serious complications:

- Newborn babies / babies less than four weeks old
- Pregnant women or those who have given birth in the last seven days
- People with a weakened immune system.

If this applies to you, your child or anyone your child has been in contact with, contact your GP or 111 out of hours for immediate medical advice.

Normal Symptoms

- Itchy red spots (spots may appear darker or the same colour as your child's skin depending on skin tone), developing into fluid filled blisters 12-24 hours after their first appearance.
 Followed by scabbing / crusting over of the spots.
- Spots can appear anywhere on the body.

Other symptoms before or after the rash appears include:

- High temperature (often 38c or above)
- Body aches
- Headache
- Nausea
- Feeling generally unwell
- Loss of appetite / reduced feeding in smaller children.

RED FLAG (WORRYING) SYMPTOMS

- Skin around the spots/blisters is hot to touch, painful and/or red (redness may be difficult to see dependant on skin tone)
- Spots/blisters appear infected.
- Dehydration decrease in wet nappies / frequency of passing urine.
- Feeding <50% of their usual amount.
- Chest pain
- Difficulty breathing
- Irritability
- High pitched cry in babies over six months
- Sudden worsening of symptoms.

Investigations and Treatment

There are no specific diagnostic tests for chickenpox. It is diagnosed through clinical assessment.

Caring for your symptoms at home

Most children can be managed at home under the supervision of their parent / carer.

- Stay off school / nursery / avoid all public areas until all spots have formed a scab / crusted over.
- Do not let your child near newborn babies, anyone who is pregnant or has a weakened immune system.
- Give small, frequent feeds.
- Encourage fluid intake (if the child has spots in their mouth they may not want to drink, try offering ice lollies, foods high in water content such as fruits to avoid dehydration).
- Apply cooling creams or gels to reducing itching.
- Dress children in loose clothing
- Bathe in cool (not cold) water baths / cool oat baths, when drying skin pat dry (do not rub).

- Encourage your child not to scratch the spots
- Ensure your child's nails are short to minimise skin damage or secondary bacterial infections from scratching.
- Paracetamol can be given to reduce pain and discomfort.
- Do NOT give Ibuprofen unless advised to do so by a medical clinician.

Previous research findings have suggested a potential link between the use of Ibuprofen and chickenpox complications, however for a number of reasons findings are uncertain.

Advice not to give Ibuprofen at home remains, as its use may ease symptoms that require medical assessment and therefore delay parents / caregivers seeking medical assessment for early complications of chickenpox.

If you are unable to manage your child at home with Paracetamol alone and feel further medication may be required, it is therefore suggested you seek medical assessment and Ibuprofen only be used following assessment and advice of a health care professional.

When to seek further help?

Return to CED if your child shows any of the red flag symptoms detailed above.

If you have concerns that your child is not showing signs of improvement or is worsening then please:

- Contact your own GP for reassessment
- Call 111 out of normal working hours for advice
- Return to CED.