

Chickenpox

Information for women who have chicken pox (varicella) during pregnancy or breastfeeding

The information provided below is for readers based in the United States of America. Readers outside of the United States of America should seek the information from local sources.

What is chickenpox?

Chickenpox is an infectious disease caused by a virus called *varicella-zoster*. It used to be a very common disease in school-aged children, for a couple of reasons, the first being that it is extremely contagious through sneezing or [coughing](#), or by direct contact. The second reason was that varicella was notorious for producing more serious disease in adults and teens, plus it was well-known that having the disease usually confers life-long immunity (although later a person can develop a disease called [shingles](#)). Knowing this, during school outbreaks of the virus, it was common for parents to expose uninfected siblings of infected children *on purpose* in order to finish with the virus for the entire household. However, this practice has subsided since the mid-1990s when a vaccine for varicella was licensed in the US and its use became more common.

Ironically, the availability of the vaccine for the past two decades means that chickenpox today is just as much an adult condition as a childhood condition. This is because young adults who have never been vaccinated are also likely to have never been exposed to the virus during childhood. Therefore, if they do happen to be exposed to the virus later in life, they will develop a severe case of chickenpox. This includes women who were children and teens in the late 1990s and early 2000s; in other words, women who are becoming pregnant today. If you are planning a pregnancy and have not received the varicella vaccine, and have never had chickenpox, it is recommended that you get vaccinated **prior** to pregnancy.

When chickenpox does develop, the classic symptoms are [fever](#), cough, loss of appetite, [headache](#), and most notoriously, a very itchy rash consisting of red or reddish pox marks throughout the body. If you are already pregnant when you develop chickenpox, you should not receive the vaccine at that point, but you also do not need to terminate your pregnancy, as there are ways to treat you safely.

How common is chickenpox during pregnancy?

The spread of chickenpox through populations has changed dramatically since the introduction of the varicella-zoster vaccine. About 4 million cases used to occur yearly in the United States and the disease used to account for 11,000 hospitalizations per year. Because of the available vaccine, the number of cases has dropped by 90 percent since the mid-1990s, meaning that today there are roughly 400,000 cases in the US each year and this number continues to decrease. Currently, the cases are limited to those who have problems with their immune system and those who have not been vaccinated. However, if you are not vaccinated against varicella-zoster, you are at just as much risk of developing chickenpox as someone who is not pregnant.

How is chickenpox during pregnancy diagnosed?

Chickenpox is a clinical diagnosis, meaning that it is diagnosed based on the symptoms that you develop, the history of being exposed to the virus without having immunity, and the timing of appearance of symptoms. The typical clinical expression of the disease includes itchy pox marks on the torso and scalp about 10 to 21 days after being exposed to another person who has chickenpox. Then, the rash spreads to the face, arms, and legs. Fever, headache, and loss of appetite develop in due course. If you develop these signs and symptoms if you had contact with somebody who had chickenpox recently, if you have never had chickenpox, and if you have never been vaccinated against it, the diagnosis of chickenpox is almost certain.

Does chickenpox cause problems during pregnancy?

Usually, chickenpox is a mild disease, but itching all over the body together with a fever can make you feel miserable, particularly while you are pregnant. Furthermore, a fraction of cases of chickenpox can develop severe complications. These include infections from scratching pox, which in some cases can spread from the skin into the body and lead to blood infection (septicemia), lung infection, and infection of bones or joints. The varicella-zoster virus itself can cause infections too, leading to [pneumonia](#) and even infection of the brain.

Does chickenpox during pregnancy cause problems for the baby?

First of all, the fever that develops with chickenpox can be harmful to the developing baby if you do not treat it immediately with a fever-lowering medication (such as [acetaminophen](#) or [paracetamol](#)). Second, the virus may harm the child directly, depending on how advanced in the pregnancy you are when you became infected. If you are infected with varicella-zoster during the first 20 weeks of

pregnancy, and especially from gestational week 8 to gestational week 20, there is a small but real chance (0.4 2 percent) that it can lead to what is called *congenital varicella syndrome* (CVS). CVS is a collection of very severe congenital defects that include underdeveloped legs and arms, a brain that is small and underdeveloped, and eye and skin problems. On the other hand, if it happens during the last few days before delivery, your baby could be born with neonatal varicella, which could be fatal.

What to consider about taking medications when you are pregnant or breastfeeding:

- Any risks to yourself and your baby if you do not treat chickenpox.
- The risks and benefits of each medication you use when you are pregnant
- The risks and benefits of each medication you use when you are breastfeeding

What should I know about using medication to treat chickenpox during pregnancy?

If you develop chickenpox while pregnant, your doctor may offer you an antiviral drug called [acyclovir](#) (or a related drug that works in the same way). If you have been exposed to the varicella-zoster virus within the past 10 days, but have not yet developed chickenpox, you will be offered an injection of what is called immune globulin, which contains antibodies that help protect against the virus. Both treatments are less risky for the developing baby than being exposed to maternal chickenpox. Acetaminophen and paracetamol, given for fever, are safe during pregnancy.

Who should NOT stop taking medication for chickenpox during pregnancy?

If you are offered an anti-viral medication, such as acyclovir, you should take it because the disease is far more dangerous than the drug.

What should I know about choosing a medication for chickenpox during pregnancy?

You may find Pregistrys expert reports about the individual medications to treat chickenpox [here](#). Additional information can also be found in the sources listed at the end of this report.

What should I know about taking a medication for my chickenpox when I am breastfeeding?

Acyclovir, the antiviral drug that is given for severe cases of chickenpox, is considered safe during breastfeeding. Acetaminophen and paracetamol are relatively safe for babies of mothers who breastfeed.

What alternative therapies besides medications can I use to treat my chickenpox during pregnancy?

Oatmeal baths can alleviate the itching from chickenpox.

What can I do for myself and my baby when I have chicken pox during pregnancy?

Discuss with your healthcare providers how to minimize the risks of chickenpox to yourself and your baby.

Resources for chickenpox in pregnancy:

For more information about **chickenpox** during and after pregnancy, contact <http://www.womenshealth.gov/> (800-994-9662 [TDD: 888-220-5446]) or read these articles from the following organizations:

- Mayo Clinic [Pregnancy Week by Week: What are the risks associated with chickenpox and pregnancy?](#)
- US Centers for Disease Control and Prevention: Chickenpox (Varicella) People at High Risk for Complications.

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General information

It is very common for women to worry about having a miscarriage or giving birth to a child with a birth defect while they are pregnant. Many decisions that women make about their health during pregnancy are made with these concerns in mind.

For many women these concerns are very real. As many as 1 in 5 pregnancies end in a miscarriage, and 1 in 33 babies are born with a birth defect. These rates are considered the background population risk, which means they do not take into consideration anything about the health of the mom, the medications she is taking, or the family history of the mom or the baby's dad. A number of different things can increase these risks, including taking certain medications during pregnancy.

It is known that most medications, including over-the-counter medications, taken during pregnancy do get passed on to the baby. Fortunately, most medicines are not harmful to the baby and can be safely taken during pregnancy. But there are some that are known to be harmful to a baby's normal development and growth, especially when they are taken during certain times of the pregnancy. Because of this, it is important to talk with your doctor or midwife about any medications you are taking, ideally before you even try to get pregnant.

If a doctor other than the one caring for your pregnancy recommends that you start a new medicine while you are pregnant, it is important that you let them know you are pregnant.

If you do need to take a new medication while pregnant, it is important to discuss the possible risks the medicine may pose on your pregnancy with your doctor or midwife. They can help you understand the benefits and the risks of taking the medicine.

Ultimately, the decision to start, stop, or change medications during pregnancy is up to you to make, along with input from your doctor or midwife. If you do take medications during pregnancy, be sure to keep track of all the medications you are taking.