- Red, warm and sore skin, or if the chickenpox rash changes to bigger open sores
- Chickenpox on the eyeball
- A fever that has lasted for more than five days.

Preventing the spread of chickenpox

Keep your child away from school or nursery and do not travel by air until five days from the onset of the rash.

Avoid contact with people who have weak immune systems (such as people having chemotherapy or taking steroid tablets), and infants aged less than four weeks. You should also avoid pregnant women who have not had chicken pox.

Chickenpox can sometimes be spread through contact with objects that have been infected with the virus, such as children's toys, bedding or clothing.

If someone in your household has chickenpox, you can try to stop the virus spreading by cleaning objects or surfaces with a sterilising solution and making sure that clothing or bedding is washed regularly.

At home it is not usually necessary to avoid contact with other children since chickenpox is contagious even before the rash appears and they are likely to have already been exposed.

Useful contacts

Your GP surgery on:.....(Please insert surgery number here)

GP Out of Hours: (After 6.30pm and before 8am). Ring **111** and you can speak to a doctor. If necessary, your child can be seen at one of their centres.

Bristol City Walk-in Centre at Broadmead Medical Centre located in Boots (Mon-Sat 8am-8pm, Sundays and Bank Holidays 11am-5pm) on: **0117 954 9828**

South Bristol NHS Community Hospital Urgent Care Centre (Every day 8am-8pm) on: **0117 342 9692** Visit www.nhs.uk to find your nearest centre.

If your child is seriously ill, you may be asked to attend the Children's Hospital emergency department.

For further copies of this leaflet, or if you would like it in other formats or languages, please contact 0117 900 2384.

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Parent's guide to chickenpox



What is chickenpox?

Chickenpox (medically known as varicella) is a common childhood disease that occurs mainly in the first ten years of life. Virtually all children catch chickenpox at some point.

It is caused by the varicella–zoster virus and there are often outbreaks in winter and spring. The virus can also cause shingles (an infection of a nerve and the skin around it).

In healthy children chickenpox is often a mild disease that usually gets better in about one week. Children with weakened immune systems, young infants, adolescents, adults and pregnant women often have a more severe illness.



What are the symptoms?

Before the rash appears, your child may have some mild flu-like symptoms, including feeling sick, a high temperature, aching muscles, headache, feeling generally unwell and loss of appetite.

Soon after the flu-like symptoms, an itchy rash appears. Some children may only have a few spots, but others are covered from head to toe. They can be anywhere on the body, even inside the ears and mouth. After about 12 hours the spots develop a blister on top and become itchier. After one to two days the fluid in the blisters gets cloudy and they begin to dry out and crust over. The crusted skin will fall off naturally after a week or two.

New spots can keep appearing in waves for three to five days after the rash begins. Therefore different clusters of spots may be at different stages of blistering or drying out.

Can it spread to others?

Chickenpox is very contagious (catching) and transmission occurs by direct contact with the fluid of the blisters or by coughing and sneezing. Symptoms start 10 to 21 days after exposure to another child with chickenpox.

If you have not had chickenpox before, you can also catch chickenpox from someone with shingles. However, it's not possible to catch shingles from someone who has chickenpox.

How is it treated?

Simple supportive care is sufficient for the majority of children. You should ensure that they drink plenty of fluids and try to keep them cool with paracetamol and not over dressing them.

It is important for children not to scratch the spots to avoid future scarring. Keeping fingernails clean and short and putting socks over your child's hands at night can help. Calamine lotion or cooling gels available from pharmacies are very safe to use and have a soothing, cooling effect.

The GP may decide to treat some children with an antiviral medicine called Aciclovir. This tends to be reserved for children at risk of a more severe illness and is only effective if given in the first 24 to 48 hours of the illness.

Speak to your GP or pharmacist if you are not sure which medicines to give your child.

Contact your GP (or call 111) again

If your child has:

- A severe headache, persistent vomiting, sensitivity to bright light or unusual sleepiness or confusion
- Problems breathing or persistent coughing