



Varicella Zoster Virus (VZV) and Immunity

Testing for immunity to varicella shows 1 of the 3 following results:

1. Immune Status
2. Equivocal Status (undetermined)
3. Non-Immune Status

If you test **non-immune** or **equivocal** status, the Physicians at NRM recommend you undergo vaccination. This involves a series of 2 doses of Varicella Vaccine 4 weeks apart. **Attempts to become pregnant must be delayed until 4 weeks after the last shot** because the vaccine utilizes a live virus. These recommendations are in accordance with the United States Adult Advisory Committee on Immunization Practices (ACIP).

Varicella infection in pregnancy

VZV infection results in a vesicular rash commonly called chickenpox. Primary infection with VZV during pregnancy potentially can significantly affect both the mother and the developing fetus.

- Women infected with varicella during pregnancy may develop varicella pneumonia, leading to breathing problems which can be severe and can result in death if untreated.
- If a woman acquires varicella infection during early pregnancy (weeks 8-20), the fetus is *at risk* for developing congenital varicella syndrome. This syndrome is characterized by limb hypoplasia (short or absent limbs), skin lesions, neurologic abnormalities, and structural eye damage.
- Importantly, not all women who are infected will have babies affected by congenital varicella:
The risk is thought to be <2%.
- If a pregnant woman is infected around the time of delivery, the baby is at risk for varicella infection which can range from mild to severe.



- Pregnant women do not have a higher chance of infection than non-pregnant women; however, the severity of the disease is worse during pregnancy.

“Shingles” or Herpes zoster, results in a localized skin infection. If a woman is infected with shingles during pregnancy, there is not a significant risk of the above congenital varicella syndrome, although there is still a small risk to the mother of severe infection.

How many women are infected with varicella during pregnancy?

1 to 5 cases of varicella infection occur in the US per 10,000 pregnancies; this incidence is low due to the high rates of vaccination.

How is varicella transmitted?

- Person to person: varicella is highly transmittable; patients are infectious from 1-2 days prior to the rash occurring until the lesions are crusted over.
- Bodily fluids are the most common means of transmission: nasal secretions and/or fluid associated with coughing commonly contain the virus.

What if I had chicken pox as a child? Do I need a vaccine?

Immunity may wane, or decline, over time. This may occur after either natural infection or vaccination.



Please initial below.

_____ I understand the above information regarding the risk of varicella infection during pregnancy.

_____ I understand that I have tested non-immune or equivocal to varicella zoster virus (VZV)

_____ I will undergo varicella immunization with my primary care provider.

_____ I decline varicella immunization for personal or other reasons. I understand that I am at risk for infection if I am exposed during pregnancy. I understand the risks to myself and to my baby if I become infected with varicella during my pregnancy.

_____ Patient Name _____ Date

_____ Provider MD/RN _____ Date