

Varicella Infection (Chickenpox)

This sheet is about having varicella infection (chickenpox) in pregnancy and while breastfeeding. This information is based on available published literature. It should not take the place of medical care and advice from your healthcare provider.

What is varicella (chickenpox)?

Varicella, commonly called chickenpox, is a viral infection that usually happens in childhood, but can happen anytime in life. Varicella is caused by the varicella-zoster virus (VZV). When a person gets VZV for the first time, it causes varicella. The most common symptom of varicella is a rash which first appears as small, reddish spots or pimples. These spots will blister and then scab over. New spots appear for up to 3-5 days. Often a fever and body aches happen before the rash appears.

Varicella is very contagious. This means that it can spread easily from person to person. A person who has varicella is contagious for 1-2 days before they break out in a rash and continues to be contagious until all their spots are scabbed over. If you have never had varicella before and someone in your household is infected, there is about a 90% chance that you will catch it as well. Infection happens less often after exposure in other places, such as in a school. It takes from 10 to 21 days after exposure to the virus for someone to develop varicella.

After a person gets varicella, the infection stays in the body, even when there are no longer symptoms (called a latent infection). Sometimes, a latent infection can reactivate (start causing symptoms again). When a VZV infection is reactivated, it causes herpes zoster (shingles).

How can I find out if I am infected with varicella?

Your healthcare provider can do a blood test to find out if you have an active varicella infection. They can also test to see if you have ever had varicella in the past. When a person has varicella, they make antibodies to the virus. These antibodies usually last a long time and keep a person from getting varicella again (the person becomes immune). People who are immune are not likely to develop symptoms if they are exposed to varicella again.

If you have recently been exposed to varicella and do not have immunity, talk to your healthcare provider about what steps you can take to avoid getting varicella, or to reduce how serious the symptoms are if you do get varicella.

I have varicella. Can it make it harder for me to get pregnant?

It is not known if varicella can make it harder to get pregnant.

Does having/getting varicella increase the chance of miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. It is not known if having/getting varicella can increase the chance of miscarriage.

Does having/getting varicella increase the chance of birth defects?

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. If a person gets varicella in the first or early second trimester of pregnancy, the fetus has up to a 3% (3 out of 100) chance of being born with congenital varicella syndrome. Features of congenital varicella syndrome include scars on the skin, eye problems, poor growth, underdevelopment of an arm or leg, small head size, or delayed development and/or intellectual disability. Some babies may have one or more of these problems, while others might have all these issues. However, most babies born to people who have varicella in pregnancy are healthy.

Does having/getting varicella increase the chance of other pregnancy-related problems?

Preterm delivery (birth before week 37) is more common in people who have varicella in the first half of their pregnancies.

My due date is in 3 weeks, and I have just been exposed to varicella. Is there any risk to my pregnancy?

If you already had varicella or the varicella vaccine, your past infection/vaccine should protect you. If you have not had

varicella or the vaccine, talk to your healthcare provider right away. If you are infected with varicella 5 days or less before delivery or 1-2 days after delivery, there is a chance your newborn could also develop varicella (called neonatal varicella). Neonatal varicella can be serious. Rarely, having varicella during pregnancy could also lead to an early development of shingles in the baby later.

If you are infected with varicella between 6 and 21 days before delivery, there is still a chance your newborn could develop neonatal varicella. However, because your baby will get some of your newly made varicella antibodies, the neonatal varicella is more likely to be mild.

Does having/getting varicella in pregnancy affect future behavior or learning for the child?

Most babies born to a person who had varicella in pregnancy are healthy. However, some children could have eye problems, small head size, or delayed development and/or intellectual disability.

Breastfeeding and varicella:

Breast milk might contain antibodies that can help to protect your baby from getting varicella. However, because varicella is very contagious, talk to your child's pediatrician right away if you become infected with varicella. It is important to prevent your baby from coming into direct contact with the rash or the affected areas. This can lower the chances of your baby getting the virus. If you suspect your baby has any symptoms that could be from varicella, contact the child's healthcare provider right away. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

If a male has varicella, can it affect fertility or increase the chance of birth defects?

Studies have not been done to see if varicella could affect male fertility (ability to get partner pregnant) or increase the chance of birth defects above the background risk. A study that tested semen in people while they had varicella did not find any signs of the virus in the semen. Infected partners can pass these viruses to a person who is pregnant. If you have been exposed to varicella and you have not had varicella or the vaccine, talk to your healthcare provider right away. For more information on paternal exposures, please see the MotherToBaby fact sheet at <https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/>.

Please click [here](#) for references.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://mothertobaby.org).

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). *OTIS/MotherToBaby encourages inclusive and person-centered language. While our name still contains a reference to mothers, we are updating our resources with more inclusive terms. Use of the term mother or maternal refers to a person who is pregnant. Use of the term father or paternal refers to a person who contributes sperm.* Copyright by OTIS, April 1, 2023.