



Rubella (German Measles)

What is rubella?

A mild viral infection usually lasting 3 days that is now rare in the United States because of routine immunization

What are the signs or symptoms?

- Many children have no signs or symptoms.
- Red or pink rash appearing first on the face and then spreading downward over the body.
- Swollen glands behind ears.
- Slight fever.
- May experience joint aches or pain (rare in children; more common in adults).

What are the incubation and contagious periods?

- Incubation period: 14 to 21 days; usually 16 to 18 days.
- Contagious period: May be spread 7 days before to 14 days after the rash; however, children are most contagious from 3 to 4 days before rash starts until 7 days after the rash.

How is it spread?

- Respiratory (droplet) route: Contact with large droplets that form when a child talks, coughs, or sneezes. These droplets can land on or be rubbed into the eyes, nose, or mouth. The droplets do not stay in the air; they usually travel no more than 3 feet and fall onto the ground.
- Contact with the respiratory secretions from or objects contaminated by children who carry the rubella virus.

How do you control it?

- Rubella is a vaccine-preventable infection. Immunize according to the current schedule—when a child is 12 to 15 months of age and with a second dose at 4 to 6 years of age.
- Review immunization status of all children.
- Unimmunized children should be excluded from educational settings if there is an outbreak.

What are the roles of the educator and the family?

- Report the infection to the staff member designated by the early childhood education program or school for decision-making and action related to care of ill children. That person, in turn, alerts possibly exposed family and staff members and parents of unimmunized children to watch for symptoms and notifies the Child Care Health Consultant.
- Report the infection to the local health department. The health professional who makes the diagnosis may not report that the infected child is a participant in an early childhood education program or school, and this could delay controlling the spread of the disease.
- Staff members of childbearing age who care for children should have rubella immunity documented because rubella infection during pregnancy can result in miscarriage, fetal death, or severe abnormalities in the fetus, including developmental delays.

Exclude from educational setting?

Yes.

- Rubella is a highly contagious illness for which routine exclusion of infected children is warranted.
- For outbreaks, exclude exposed children who have not been immunized (or, if older than 4–6 years, have received fewer than 2 doses of vaccine) or who lack evidence of rubella immunity by laboratory methods until they become immunized, or if they are not immunized because of an accepted exemption. Continue to exclude them until the local health department determines it is safe for them to return. Unimmunized or nonimmune children need to be excluded until 21 days after onset of the rash in the last case.

Readmit to educational setting?

Yes, when all the following criteria are met:

- Seven days after onset of rash
- When the child is able to participate and staff members determine they can care for the child without compromising their ability to care for the health and safety of the other children in the group

Comment

There is a congenital form of rubella. *Congenital* means babies are born with it, infected from their mothers during pregnancy. Babies with congenital rubella should be considered contagious for at least 1 year, unless the infant is 3 months or older and has 2 specimen results obtained 1 month apart that are negative for rubella virus. If female caregivers of these infected infants are themselves not immune to rubella, the caregivers should be made aware of a potential infectious risk to their unborn babies should they become pregnant.

