



## RUBELLA

### KEY POINTS

Rubella (german measles) is dangerous to the fetus if caught during pregnancy

All staff must be immunised through Occupational Health

Patients with undiagnosed exanthamous rashes must be isolated

### INTRODUCTION

Rubella (German measles) is highly infectious and the foetus of a pregnant woman may be severely affected if she acquires the disease early in pregnancy. It is only by ensuring that all staff (including males) are immune, that cross infection in the hospital environment can be prevented. The aim of ensuring that all staff are immune is to prevent the acquisition and spread of rubella by all health care workers and subsequent transmission to patients.

### OBJECTIVES

- Protection of female patients who may be, or who are known to be pregnant.
- Protection of female members of staff for their own future safety.

### STAFF

All staff will attend the appropriate Occupational Health Department before commencement (clerical and administrative staff must undergo rubella screening in order to determine their immunity. Screening consists of examining serum for antibodies. Those who are not immune will be given rubella vaccine as soon as is practicable. The screening will normally be done before employment commences. Staff already in post who have not been checked should attend the Occupational Health Department at the earliest opportunity. Medical Staff on rotational appointments or visiting staff must be included.

### MEDICAL SCHOOL STAFF AND STUDENTS

Rubella screening and immunisation should be done and documented before students start on the wards.

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## VOLUNTARY WORKERS


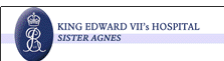



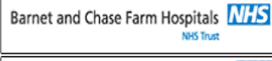






Voluntary Services Organisers should, wherever possible, encourage their volunteers to accept screening for rubella if they work in obstetric, gynaecology and children's departments. Screening is available from the Occupational Health Department.

## IMMUNISATION

Immunisation of Health Care Workers is now performed with a single dose of MMR (Measles – Mumps – Rubella) vaccine. Rubella vaccine alone is not available.

## GUIDELINES FOR THE MANAGEMENT OF PREGNANT WOMEN WHO COME INTO CONTACT WITH RUBELLA

- Establish previous rubella or rubella vaccination history in the pregnant woman.
- Take a clotted blood sample and request rubella antibody titre stating full history of contact, gestation of the pregnancy, any recent illness or rash, vaccination history and results of previous tests.
- If no antibodies are present, repeat tests will be needed at 28 days after exposure (or one week after the onset of an illness) to determine whether infection has been acquired.
- If there is a delay between the contact and the first specimen, it may be extremely difficult to determine the susceptibility of the mother to rubella at the time of contact.
- Detailed discussions with the virologists/microbiologists are then required.

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