

# Rubella

Learning objectives

Virology and epidemiology-1

Clinical features-2

Management and prevention-3

Complications-4

# :Rubella

Rubella is endemic in countries without universal vaccination- 1

.policies

.Out-breaks occur in spring and early summer-2

.Epidemic occur every 7-10 years- 3

.Transmission is through aerosol- 4

.Infectivity 1 week before and after the onset of rash- 5

In non immunized communities 80-85% of young adults have- 6

.evidence of past infection

.In children most cases are subclinical-7

:C/F

Initial infection via URT and local L.N is followed by viraemia to- 1  
.target organs such as skin, joints and placenta

Placental infection in the first trimester lead to a severe cong.- 2  
.Disease

- Adenopathy (lasting several weeks) with involvement of post- 3  
.auricular, post-cervical and sub-occipital

.Occasionally splenomegaly- 4

5- A maculopapular rash (non-confluent) start on the face and moves to the trunk.

.Petichial lesion (Forchheimer spots) appear on the soft palate- 6

.Occasionally mild coryza/ conjunctivitis- 7

.Fever (only on the first day)- 8

:Dx

Rubella- specific IgG with absent IgM indicates previous infection.  
Specific IgM or rising IgM is indicative of recent infection. (however, this may persist for 1-3 months and occur as a reaction in other .common rashes such as EBV and erythrovirus 19)

## :Complications

Arthritis/ arthralgia 30% of women and involves fingers, wrist- 1  
.and knees

.Encephalitis 1/5000 cases. (20-50% mortality)- 2

.A mild hepatitis is frequently seen- 3

. Haemorrhagic manifestations occur in 1:3000 cases- 4