Treating chicken pox

Chicken pox is a common childhood illness caused by a very contagious virus. The virus is passed from one person to another through contact with the saliva or with fluid from the lesions or sores that develop on an infected child's body. The virus is also present in the air and it is possible to catch it by being in a room with an infected child.

Diagnosing chicken pox

Children with chicken pox develop a very itchy rash. The rash appears as multiple small, red bumps which progress to small water blisters and then to open sores, which gradually dry and form crusts.
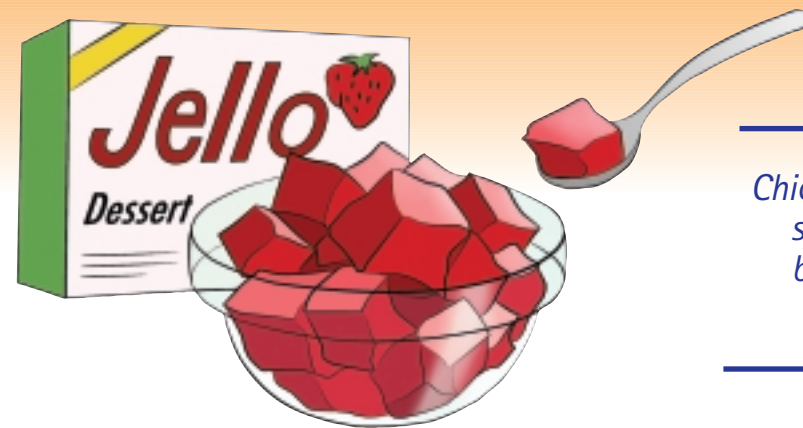
The rash usually starts on the trunk of the body then spreads to the face, the scalp and then the arms and legs. Some sores may develop in the mouth, on the eyelids and in the genital area.

Twenty-four hours before the rash appears, your child may not feel well, have a poor appetite and have a slight fever and runny nose.

Chicken pox usually lasts five to seven days. New skin eruptions occur every day for four to five days. Fever is usually highest on the third or fourth day. Your child will start to feel better and have less or no fever once new lesions stop developing.

Chicken pox may leave permanent scars especially if the lesions become infected or

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the child scratches them. Chicken pox can leave temporary marks on the skin that take six to 12 months to fade. Dark-skinned individuals may develop hypo-pigmented marks.

When to see a doctor?

You should consult a doctor if:
- signs of infection, redness or swelling develop around blisters;
- other symptoms are present (high fever, headache, vomiting more than three times);
- your child becomes confused, lethargic (difficult to wake up) or develops trouble walking.

Chicken pox may leave permanent scars especially if the lesions become infected or the child scratches them.

Treatment at home

Antibiotics are not prescribed for chicken pox. The following tips will help your child recover as quickly as possible:

- To relieve itchiness
  - bathe your child in a bath of Aveeno or Keri oil;
  - apply a soothing lotion (such as Calamine) or cool compresses to the lesions;
  - give a nonprescription antihistamine (such as Benadryl) if itching is severe.
- Give acetaminophen (such as Tylenol) for fever. **Do not give aspirin/ASA.**
- Keep fingernails short. If your child is still a baby, consider putting mittens on his hands at night to prevent scratching.
- Wash with soap to decrease the risk of infection.
- If your child has difficulty eating due to chicken pox in his mouth, offer him cold fluids and soft foods.

Prevent the spread of chicken pox

Your child should stay at home and rest. Children are contagious two days prior to the appearance of the rash and until all lesions have crusted over, which is usually 5 to 7 days after the rash first appears. If your child contracts chicken pox, please advise your daycare provider or school. Your child can return to daycare or school when he has enough energy to partake in regular activities.

A child may develop chicken pox 10 to 21 days after contact with the disease. If your child has not had chicken pox, he can catch it by spending more than an hour with an infected child during the first two days prior to the rash appearing or by spending 10 minutes with an infected child after the rash has appeared.

The varicella vaccine prevents chicken pox and is recommended for all children older than 12 months who have not had chicken pox.

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