Management of significant* exposure to varicella zoster virus during pregnancy

- **Previous maternal chickenpox**
  - No action required

- **No history or uncertain past history of chickenpox**
  - **Check serology urgently**
  - **Serology not available (or results will not available within 96 hours)**
    - Seropositive
    - Seronegative

  - **Elapsed time since exposure**
    - Less than 72 - 96 Hours
      - Passive immunization with ZIG
      - Advise to seek medical attention immediately if chickenpox develops**
    - Greater than 72 - 96 hours
      - No ZIG
      - Consider oral acyclovir if at risk of severe disease##

- If patient develops chickenpox, proceed to algorithm 2

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* Significant exposure is defined as living in the same household as a person with active chickenpox or herpes zoster or face-to-face contact with a person with chickenpox or zoster for at least five minutes

# Recommended time frame varies in literature, but most US authorities recommend administering up to 96 hours post-exposure

## Risk factors for severe maternal VZV infection are second half of pregnancy, underlying lung disease, immunocompromised, and smoker

** ZIG is ineffective and should not be given once clinical illness is established

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Additional References:
- Clinics in Family Practice Volume 3 Number 2 © 2001 W. B. Saunders Company