

Rubella (German measles)

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Rubella is a viral disease characterized as a mild illness, which may present few or no symptoms. Symptoms may include a rash, slight fever, joint aches, headache, discomfort, runny nose and reddened eyes. The lymph nodes just behind the ears and at the back of the neck may swell causing some soreness and/or pain. The rash, which may be itchy, first appears on the face and progresses from head to foot, lasting about three days. As many as half of all cases occur without a recognized rash. The incubation period for rubella is 12-23 days; in most cases, symptoms appear within 16-18 days.

While cases can occur throughout the year, most are reported during the winter and spring. In unvaccinated populations, rubella is primarily a childhood disease. However, where children are well-immunized, adolescent and adult infections become more evident. The disease is spread by direct contact with nasal or throat secretions of infected individuals and can be transmitted from seven days before to seven days after rash onset. Immunity acquired after contracting the disease is usually permanent.

Rubella infection is dangerous because of its ability to damage an unborn baby. Infection of a pregnant woman may result in a miscarriage, stillbirth or the birth of an infant with abnormalities, which may include deafness, cataracts, heart defects, liver and spleen damage and mental retardation. These abnormalities in the infant are classified as congenital rubella syndrome (CRS) and occur among at least 25 percent of infants born to women who have had rubella during the first trimester of pregnancy.

Maintaining high levels of rubella immunization in the community is critical to controlling the spread. Control of the spread of rubella is needed primarily to prevent the birth defects caused by CRS. Therefore, women of childbearing age should have their immunity determined and receive rubella vaccine if needed. Infected children should not attend school during their infectious period. Rubella vaccine is given on or after a child's first birthday, preferably in a one-shot combination vaccine that protects against measles, mumps and rubella (MMR).

For purposes of diagnosis confirmation rubella is an illness with all of the following characteristics: acute onset of generalized maculopapular rash; temperature above 37.2 C. (99F), if measured; arthralgia/arthritis, or lymphadenopathy, or conjunctivitis. A confirmed case is either lab confirmed or meets the clinical case definition and is epi-linked to a laboratory-confirmed case. *The only reliable evidence of acute rubella infection is the presence of rubella-specific antibody (IgM), specific rise in IgG antibody from paired acute (immediate) and convalescent (2-3 weeks following onset) or a positive viral culture. Culture should be obtained preferably from pharyngeal swabs or urine for virus isolation within 4 days of rash onset.*

Preliminary data shows the incidence in Florida is decreased from the 11 in 1996 to 3 confirmed cases in 1997 and 4 in 1998. With the exception of one case in a two-month-old, cases were among adults, one of who was pregnant. Case reporting, active surveillance and outbreak control should be aggressive to prevent exposure to susceptible pregnant women and prevent CRS. Florida has many visitors from parts of the world that do not promote immunization against this disease, which demonstrates the need to maintain high levels of immunization.