RUBELLA (GERMAN MEASLES) AND PREGNANCY

Rubella basics

Rubella (also called German measles) is usually a mild viral infection. An estimated 90% of young people in the United States are immune to rubella due to vaccination.

Symptoms of rubella include generalized skin rash, tiredness, headache, fever, and swollen glands in the area behind the ears and the neck (lymphadenopathy). It is estimated that 25% to 50% of persons infected with rubella may not have any symptoms.

Though rubella is usually a mild illness, there may be severe illness in adults who have not had the disease in the past or have not had the vaccine. Joint stiffness and/or joint pain may occur in up to 70% of adult women infected with rubella. Some of the other problems that may occur include a bleeding problem called thrombocytopenia and infection of the brain (encephalitis). For general fact sheets on rubella, see Section 6.

Rubella and pregnancy

It is recommended that all women be tested for rubella early in their pregnancy. If a susceptible woman gets rubella during the first trimester of pregnancy, there is an 85% chance of developing a fetal infection. Congenital rubella syndrome (CRS) may occur and result in miscarriage, stillbirth, and severe birth defects. A baby with CRS may have cataracts, blindness, heart defects, deafness, and mental retardation. After the 20th week of pregnancy if a woman develops rubella, most likely there will not be any problems for either the mother or the unborn baby.

Exposure to rubella during pregnancy

If pregnant women are exposed to rubella, they should consult their health care provider for information about diagnosis, possible lab tests, and follow-up.

Testing for rubella

A blood test can be done for rubella. The test may show that the patient:
- is immune (had rubella disease or vaccine in the past) and has no sign of recent infection. The patient does not need to be concerned about the exposure to rubella.
- is not immune and has not yet been infected. Standard infection precautions should be done when working with children. The woman may attempt to avoid contact with rubella cases during the pregnancy.
- is currently infected or had a recent infection. The infection should be discussed with the patient’s health care provider.

Rubella prevention

All adults working with children should know their vaccine history or immune status. To prevent rubella, women who are not immune and not pregnant should be vaccinated with MMR (measles, mumps, and rubella) vaccine. Pregnancy should be avoided for at least one month following immunization. Rubella vaccine should not be given to pregnant women.

If a non-immune woman is pregnant, she should receive MMR vaccine after the baby is delivered.

For more information, call Hennepin County HSPHD-Epidemiology at (612) 543-5230 or call your local health department.