

Roseola

What is roseola?

Roseola is a common contagious viral infection that can cause a fever and rash in babies and young children. It is also called roseola infantum, exanthem subitum, sixth disease or simply roseola. It is caused by a virus from the human herpes group, type 6.

How is roseola spread?

The virus is spread from person to person by droplets from the nose or mouth travelling through the air or by direct contact. The tiny droplets of fluid are expelled when an infected person talks, coughs, sneezes or laughs. If people touch these droplets and then touch their own noses or mouths they can become infected. The incubation period (time from contact to the appearance of symptoms) is 9 to 10 days and it is most infectious when the rash appears.

The risk to the child increases with exposure to a day care centre or to public places. There is no known way to prevent its spread.

Who gets roseola?

It typically affects children aged 6 months to 2 years. It is rare after the age of 2. Up to 95% of children have been shown to be infected with the virus by the age of 2, but only about one-third of these children will present with the rash of roseola. Roseola rarely affects adults, who usually develop immunity during childhood.

What are the symptoms and signs?

- Sudden onset of fever, sometimes very high
- Runny nose
- Irritability
- Drowsiness
- Swelling of lymph glands of the neck

The temperature falls after 3 to 5 days, then a red rash appears. Some children simply have the high temperature without a rash.

What is the nature of the rash?

- A bright red, spotted rash
- Mainly confined to the trunk (chest and back) and arms
- Usually sparse on the face and legs
- Appears as the fever subsides
- Disappears within 2 days
- Turns white (blanches) when pressed

Note: Sometimes the rash of roseola can be misdiagnosed as a drug reaction to an antibiotic such as penicillin if the patient is given it for the fever and runny nose. Spontaneous natural recovery within one week is the rule.

What are the risks?

The infection usually runs a mild course but febrile convulsions can occur because of the high temperature that can develop in some children. It is believed to cause up to one-third of febrile convulsions in children under 2 years of age.

Rare complications include inflammation of the brain or its coverings (meningitis) and hepatitis.

What is the treatment?

There is no special drug to treat roseola so the treatment is supportive and symptomatic.

- Get the child to drink plenty of fluids, especially water.
 - Give paracetamol for fever.
 - Rest at home during the fever.
 - Lukewarm baths for high temperatures.
- Antibiotics should be avoided.

When to seek help

Call your general practitioner or emergency service if your child:

- is very sleepy and hard to wake
- will not drink and is dehydrated
- has a convulsion, especially if it lasts more than 5 minutes.

