PAEDIATRIC DERMATOLOGY

CONGENITAL VARICELLA SYNDROME IN NEONATES DUE TO HERPES ZOSTER IN THE 32ND WEEK OF PREGNANCY: A CASE REPORT

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Introduction: Congenital Varicella Syndrome (CVS) is caused by a varicella-zoster virus (VZV) infection that generally occurs in early pregnancy (<20 weeks). The incidence of CVS was predicted as low as 0.59% and only 1 case was identified at more than 27 weeks of gestation. From 1947 to 2013 there have been only two CVS cases that resulted from a herpes zoster and both had bad prognosis.

Observation: A newborn baby had red spots all over the body. The baby's mother suffered from shingles at 32 weeks of gestation. The baby was born at 40 weeks with low birth weight, 2120 grams. In the whole body there were multiple erythematous, annular patches with distinct borders, which appeared directly after labor. CT scan showed ventriculomegaly with periventricular edema. Examinations of other organs were within normal limits. The baby was injected with acyclovir 20-mg/kg-body weight and then discharged with improved condition. Two months later the patient was re-hospitalized with shortness of breath and then died.

Key message: Limited CVS characteristics in this case were likely due to VZV infection in the form of herpes zoster at 32 weeks of gestation. These defects may appear as a single symptom or as a spectrum. The main therapy for CVS is varicella zoster immunoglobulin (VZIG) 125 U as soon as possible. This patient was only given acyclovir because of the unavailability of VZIG.