

**New Zealand Paediatric Surveillance Unit
CONGENITAL RUBELLA**

Background to Study

Congenital rubella is a potentially vaccine preventable condition. The existing mechanisms to ascertain cases of congenital rubella are inadequate. As most infants and children with congenital rubella are seen at some stage by a paediatrician the NZPSU will provide a useful mechanism for obtaining information on congenital rubella.

Factors that may lead to a suspicion of congenital rubella are:

- Single or multiple congenital anomalies, particularly sensorineural deafness, cataracts, retinopathy, glaucoma, microphthalmia, microcephaly and congenital heart disease. Other manifestations, include growth retardation, meningoencephalitis, hepatosplenomegaly, jaundice, interstitial pneumonitis and thrombocytopenia
- A history of viral illness (with or without rash) during pregnancy and/or a history of known maternal contact with rubella, especially in the first trimester of pregnancy
- Diagnosis of rubella during pregnancy, by a significant rise in specific antibody titre between acute and convalescent phase serum specimens, the presence of rubella-specific IgM indicating a recent infection, or isolation of rubella virus

Diagnosis of congenital rubella is confirmed by:

- The detection of specific IgM antibodies in a serum during the first months of life
- The persistence of rubella-specific IgG antibodies in a child aged 6 to 12 months, or in a child up to 2 years who has not been vaccinated
- Isolation of the virus which may be shed from the throat and urine for as long as a year

Objectives:

1. To more accurately define the present incidence of congenital rubella in New Zealand
2. To evaluate the reasons why mothers of children with congenital rubella have not been effectively vaccinated
3. To monitor the outcome of the rubella vaccination programme

CASE DEFINITION AND REPORTING INSTRUCTIONS

Any child or adolescent up to 16 years of age who in the opinion of the notifying paediatrician has definite or suspected congenital rubella, with or without defects, based on history, clinical and laboratory findings.

Please report any new patients with definite or suspected congenital rubella who you have seen this month.

Follow-up of positive returns:

A questionnaire requesting further details will be forwarded to practitioners who report a case.

If you have any questions please contact:

Prof Diana Lennon
Community Paediatrics
Middlemore Hospital
PO Box 9331
AUCKLAND
Ph: 09 276 0044 ext 8329 Fax: 09 270 4738
Email: d.lennon@auckland.ac.nz

Investigators: Prof Diana Lennon