

**What is roseola?**

Roseola is a common viral infection causing rash in infants and children. Children usually develop roseola between six months and 24 months of age, and most children have been infected by the age of four.

**Who is at risk for roseola?**

People of all ages can get roseola, but it occurs primarily in infants and children ages 6 to 24 months.

**What are the symptoms of roseola?**

The signs and symptoms of roseola include a very high fever (above 103° F) lasting three to seven days. The most common complication of infection is fever-related seizures, which happen in 10-15% of patients. However, the child often is not very ill when the fever is present. Roseola can also cause a red, raised rash lasting from hours to several days that becomes apparent the day the fever breaks (usually around the fourth day). Immunocompromised children are the most likely to have severe symptoms.

**How soon do symptoms appear?**

Usually about nine to ten days from the date of infection.

**How is roseola spread?**

Roseola spreads from person to person through contact with an infected person's respiratory secretions or saliva. Roseola is contagious even if no rash is present. That means the condition can spread while an infected child has only a fever.

**When and for how long is a person able to spread the disease?**

It is unknown the exact length that a person can spread this disease.

**How is a person diagnosed?**

A health-care provider will diagnose roseola. Laboratory tests are available, but are not always used because treatment of symptoms will not change based on a positive test.

**What is the treatment?**

A health-care provider may recommend supportive treatment (treatment to relieve symptoms).

Immunocompromised people who are infected with roseola may need additional treatment.

## **Does past infection make a person immune?**

Usually someone who has had roseola in the past will not develop symptoms again, although they may carry the disease in their body for life.

## **Should children or others be excluded from child care, school, work or other activities if they have roseola?**

Yes, if the child has a fever and a behavior change the child should be excluded from child-care until seen by a health-care provider. The child may return to child-care once the fever has gone, even if the rash is present.

Otherwise children may attend child care unless the staff determines that they cannot care for the child without compromising their ability to care for the health and safety of the other children in the group.

All others can attend work and other functions as long as they are well enough to do so. As always, good hand hygiene and respiratory etiquette are recommended.

## **What can be done to prevent the spread of roseola disease?**

The only action necessary to prevent the spread of roseola is to practice proper hand washing regularly.

## **Additional Information:**

Additional information is available at [www.ndhealth.gov/disease](http://www.ndhealth.gov/disease) or by calling the North Dakota Department of Health at 800.472.2180.

## Resources

1. American Academy of Pediatrics. [Children in Out-Of-Home Care]. In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30<sup>th</sup> ed. Elk Grove Village, IL: American Academy of Pediatrics; 2015: 132-151.
2. American Academy of Pediatrics. [Human Herpesvirus 6 (Including Roseola) and 7]. In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30<sup>th</sup> ed. Elk Grove Village, IL: American Academy of Pediatrics; 2015: 449-452.