Public Health England

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Infection report

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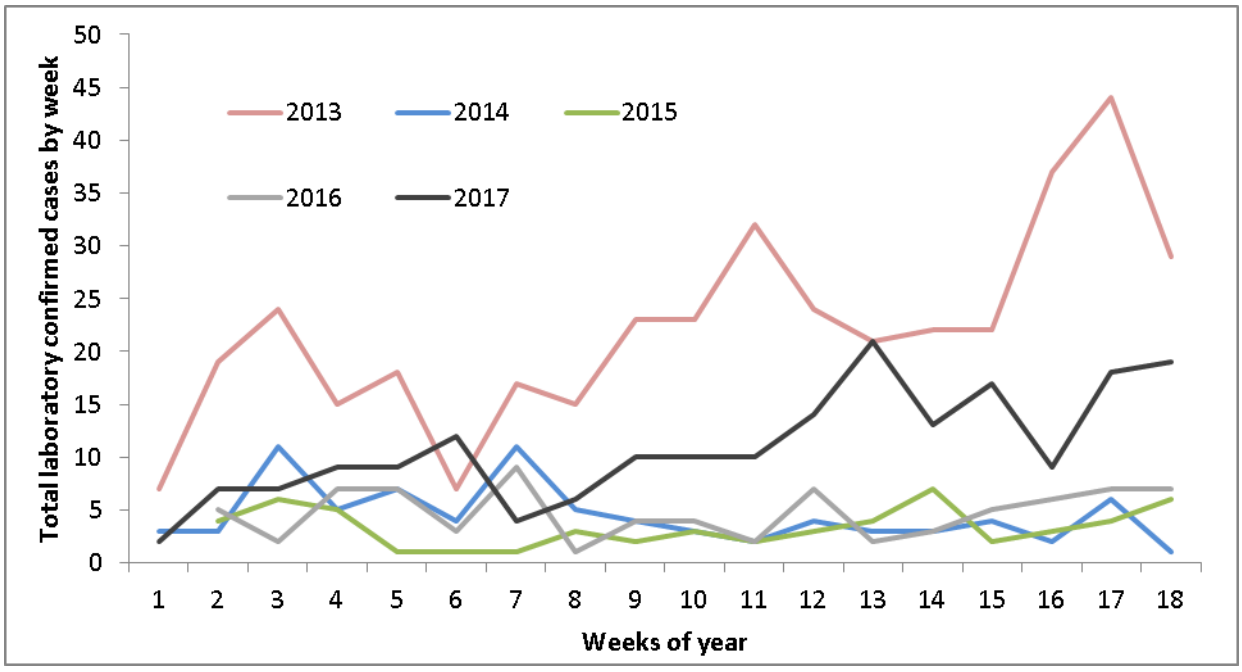
Raised levels of parvovirus B19 activity in England and Wales

Parvovirus B19 causes the common childhood illness, erythema infectiosum or fifth disease [1] – widely known as “slapped cheek” due to the typical presentation of erythematous cheeks which, together with rash and fever, are characteristic of this disease. Accurate diagnosis on a clinical basis can be difficult however and parvovirus B19 infection cannot be clearly differentiated from other infections such as rubella. There has been an increase in reported cases of parvovirus B19 in the early weeks of 2017 although activity has not reached the levels seen in 2013, the previous peak year (Figure). Parvovirus B19 is not a notifiable disease and testing practice is likely to vary around the country: with the exception of women presenting with a rash illness in pregnancy, there is no recommendation for routine testing for parvovirus B19.

Weekly laboratory confirmed reports of Parvovirus B19 infection in women aged 15-44 years: weeks 1-18, 2013-2017 England and Wales



Source: Confirmed infections reported to SGSS.

Infection in the first 20 weeks of pregnancy is associated with increased risk of intrauterine death and hydrops fetalis. Infection usually presents as a mild febrile illness but in patients with increased red blood cell turnover (ie underlying haemolytic haemoglobulinopathies such as sickle cell disease) infection can lead to transient aplastic crisis, and in patients who are immunocompromised infection may lead to pure red cell aplasia and chronic anaemia. Both these groups of patients have high level viraemia and should be considered infectious. Health Protection Teams and clinicians should be aware that there are NICE Clinical Knowledge Summaries [2] and national guidelines for managing the infection in healthcare settings, the community [3] and in pregnant women [4].

References

1. Brown KE. Parvovirus B19 infection in the fetus and child (2007). In: David TJ (editor). *Recent advances in paediatrics*, RSM Press (London), 209-22.
2. NICE Clinical Knowledge Summaries: Parvovirus B19 infection, https://cks.nice.org.uk/parvovirus-b19-infection.
3. Crowcroft NS, Roth CE, Cohen BJ, Miller E (1999). Guidance for control of Parvovirus B19 infection in healthcare settings and the community. *J Public Health* **21**(4): 439-446.
4. PHE website. Parvovirus B19: Guidance, Data and Analysis (health protection detailed guide) https://www.gov.uk/guidance/parvovirus-b19.

PHE publications gateway number: 2017083.