

## **Latest Updates from Wellbeing and Public Health for Cornwall and the Isles of Scilly**



### **URGENT - Scarlet fever and Group A Streptococcal infections**

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We are writing to inform you of a recent national increase in notifications of scarlet fever to the UK Health Security Agency (UKHSA), above seasonal expected levels.

We would like to take this opportunity to remind you of the signs, symptoms and the actions to be taken if you become aware of cases or an outbreak at your school or nursery.

#### **Signs and symptoms of scarlet fever**

Scarlet fever is a common childhood infection caused by *Streptococcus pyogenes* or group A *Streptococcus* (GAS). It is not usually serious but should be treated with antibiotics to reduce the risk of complications (such as pneumonia) and spread to others. The early symptoms of scarlet fever include sore throat, headache, fever, nausea and vomiting. After 12 to 48 hours, the characteristic red, pinhead rash develops, typically first appearing on the chest and stomach, then rapidly spreading to other parts of the body, and giving the skin a sandpaper-like texture. The scarlet rash may be harder to spot on darker skin, although the 'sandpaper' feel should be present. Patients typically have flushed cheeks and be pale around the mouth. This may be accompanied by a bright red 'strawberry' tongue.

#### **Strep Throat**

Strep throat is a bacterial infection in the throat and tonsils caused by bacteria called group A *Streptococcus* (GAS). It can make your throat feel sore and scratchy and can be spread by talking, coughing, or sneezing. The symptoms of strep throat include a sore throat accompanied by tender, swollen lymph glands, a sore throat that lasts longer than 48 hours, a fever, a sore throat accompanied by a rash.

It's possible to have many of these signs and symptoms but not have strep throat. The cause of these signs and symptoms could be a viral infection or some other illness. That's why a doctor generally tests specifically for strep throat.

#### **Invasive Group A Strep (iGAS)**

The same bacteria which cause scarlet fever can also cause a range of other types of infection such as skin infections (impetigo) and sore throat. In very rare cases, the bacteria can get into the bloodstream and cause an illness called invasive Group A strep (iGAS). Whilst still uncommon, there has been an increase in iGAS cases this year, particularly in children under 10 years old. It is very rare for children with scarlet fever to develop iGAS infection. Parents are advised to trust their judgement when their child is unwell; if their child seriously deteriorates, they should speak to their GP or call 111 for advice.

**Infection control advice**

In schools and nurseries, infections can be spread through direct physical contact between children (and staff) and through shared contact with surfaces such as table tops, taps, toys and handles. During periods of high incidence of scarlet fever there may also be an increase in outbreaks in schools, nurseries and other childcare settings. As per national [‘Health protection in children and young people settings, including education’](#) guidance, children and adults with suspected scarlet fever should be **excluded** from nursery / school / work for **24 hours** after the commencement of appropriate antibiotic treatment. Children or nursery/school staff who refuse treatment with antibiotics should be excluded until resolution of symptoms. Good hygiene practice such as hand washing, regular cleaning of classrooms and equipment and good ventilation are the most important steps in preventing and controlling spread of infection.