

# Public Health & Communities

# **Director of Public Health**

## **Director of Children's Services**

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Dear Parent,

## Increase in Scarlet Fever and Invasive Group A Streptococcus (iGAS) cases

We are writing to update you of a recent national increase in notifications of scarlet fever to the UK Health Security Agency (UKHSA), which is above expected levels for the time of year, and to provide you with some advice and guidance to follow.

We would like to take this opportunity to remind you of the signs and symptoms of scarlet fever as well as what to do if you suspect your child is unwell.

#### **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.

## Signs and symptoms of Scarlet Fever

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.

The symptoms are the same for children and adults, although scarlet fever is less common in adults.

There's no evidence to suggest that getting scarlet fever during pregnancy will harm your baby.

#### Stop the spread

You can help stop the spread of infection through frequent hand washing and by not sharing eating utensils, clothes, bedding and towels. Use tissues to trap germs from coughs/sneezes and bin tissues as quickly as possible

During periods of high incidence of scarlet fever, there may also be an increase in outbreaks in schools, nurseries and other childcare settings. Children and adults with suspected scarlet fever should stay off nursery / school / work until 24 hours after the start of appropriate antibiotic treatment.



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## If you think you, or your child, might have scarlet fever:

- contact your GP or NHS 111 as soon as possible
- make sure that you or your child take(s) the full course of any antibiotics prescribed. Although
  you or your child will feel better soon after starting the course of antibiotics, you must complete
  the course to ensure that you do not carry the bacteria in your throat after you have recovered •
- stay at home, away from nursery, school or work for at least 24 hours after starting the antibiotic treatment, to avoid spreading the infection

## 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 very 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

## Advice to Parents

You should contact your GP or NHS111 as soon as possible if you suspect that you or your child may have scarlet fever or seems seriously unwell. Contact NHS 111 or your GP if:

- your child is getting worse
- your child is feeding or eating much less than normal
- your child has had a dry nappy for 12 hours or more or shows other signs of dehydration.
- your baby is under 3 months and has a temperature of 38°C, or is older than 3 months and has a temperature of 39°C or higher
- your baby feels hotter than usual when you touch their back or chest, or feels sweaty
- your child is very tired or irritable

#### Call 999 or go to A&E if:

- your child is having difficulty breathing you may notice grunting noises or their tummy sucking under their ribs
- · there are pauses when your child breathes
- your child's skin, tongue or lips are blue
- your child is floppy and will not wake up or stay awake

If attending the GP Practice please ring beforehand so they can make sure you do not pass the disease to others in the waiting room.

A person with scarlet fever is infectious and will require at least 24 hours of antibiotics prior to returning to school or nursery settings. It is important that the full course of antibiotics is completed.

Please inform your GP or clinician if your child attends school, nursery or other care setting.

Yours Sincerely,

Stuart Keeble & Allan Cadzow

Director Public Health Suffolk, Director Children's Services