

## **Scarlet Fever and Group A Streptococcus (GAS)**

We are writing to ensure you have the latest UK Health and Security Agency (UKHSA) guidance about Scarlet Fever, Group A Streptococcus (GAS) and the more serious Invasive Group A Strep (iGAS).

Scarlet fever is caused by the GAS bacteria, which also causes other respiratory and skin infections such as Strep throat and impetigo. GAS is a common bacteria which many people carry in their throats and on their skin. It doesn't always result in illness, but it can cause mild and more serious infections. The most serious of these are iGAS, which are infections caused by the bacteria getting into parts of the body where it is not normally found, such as the lungs or bloodstream. In rare cases an iGAS infection can be fatal. Whilst iGAS infections are still uncommon, there has been an increase in cases this year, particularly in children under 10 and sadly, a small number of deaths.

The current information from UKHSA is that there is no evidence that a new strain is circulating. It says the increase is most likely related to high amounts of circulating bacteria and social mixing and lots of viruses that cause sore throats, colds and coughs circulating which should resolve without medical intervention. However, UKHSA advice states that children can on occasion develop a bacterial infection on top of a virus which can make them more unwell.

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

Parents and carers and school staff should look out for early symptoms of scarlet fever in children which include sore throats, headaches, fever, nausea and vomiting.

After 12 to 48 hours the characteristic red, pinhead rash develops, typically first appearing on the chest and stomach and then rapidly spreading to other parts of the body 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.

Children will also typically have flushed cheeks and pallor around the mouth, which may be accompanied by a 'strawberry tongue'.

Parents should contact NHS 111 online, or call NHS 111 or their GP if they suspect their child has scarlet fever, because early treatment with antibiotics is important to reduce the risk of complications, such as pneumonia or a bloodstream infection.

### **Infection control advice**

GAS is spread by close contact with an infected person and can be passed on through coughs and sneezes or from a wound.

Children should be encouraged to wash their hands properly with soap and warm water for 20 seconds, using a tissue to catch coughs and sneezes, and keeping away from others when feeling unwell, they will be able to reduce the risk of picking up, or spreading, infections.

Any children with suspected scarlet fever should stay at home until at least 24 hours after the start of antibiotic treatment to avoid spreading the infection to others.