



Fact Sheet for Education Settings and Parents/Carers about Group A Streptococcus (GAS) and Scarlet Fever.

What is Group A Streptococcus?

Group A Streptococcus or *Streptococcus pyogenes* is a bacterium that can be found in the throat and on the skin. People may carry it and have no symptoms of illness or may develop infection.

How is it spread?

Group A Streptococcus survives in throats and on skin for long enough to allow easy spread between people through sneezing and skin contact. People who are currently carrying the bacteria in the throat or on the skin may have symptoms of illness or they may have no symptoms and feel fine. In both cases, these bacteria can be passed on to others.

What kinds of illnesses are caused by Group A Streptococcus?

Most Group A Streptococcus illnesses are relatively mild, with symptoms including a sore throat ("strep throat"), scarlet fever or a skin infection such as impetigo. However, on rare occasions, these bacteria can cause other severe and sometimes life-threatening diseases.

Although scarlet fever is usually a mild illness, it should be treated with antibiotics to minimise the risk of complications and reduce the spread to others. Children should **stay at home until at least 24 hours after starting the antibiotic treatment** to avoid spreading the infection.

The **symptoms** of scarlet fever include a sore throat, headache, fever, nausea, and vomiting. This is followed by a fine red rash which typically first appears on the chest and stomach, rapidly spreading to other parts of the body. On white skin the rash looks pink or red. On brown and black skin, it might be harder to see a change in colour, but you can still feel the sandpaper-like texture of the rash and see the raised bumps. The face can be flushed red but pale around the mouth. As the rash fades, the skin on the fingertips, toes and groin area can peel.

Children who have had **chickenpox** or **influenza ('flu)** recently are more likely to develop more serious infection during an outbreak of scarlet fever and so parents should remain vigilant for symptoms such as a persistent high fever, cellulitis (skin infection) and arthritis (joint pain and swelling). If you are concerned for any reason, please seek medical assistance immediately.

What is invasive Group A Streptococcal (iGAS) disease?

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.

As a parent, you should trust your own judgement.

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 38C, or is older than 3 months and has a temperature of 39C 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

Do contacts of a case of scarlet fever require antibiotics?

Contacts of Scarlet Fever cases (including siblings or household members) who are well and do not have symptoms **do not** require antibiotics and can continue to attend the setting. They should seek treatment if they develop symptoms.

There is no increased risk of complications for pregnant women but if you are concerned, please discuss with your midwife.

If anyone has an underlying condition which affects their immune system or specific clinical vulnerabilities, they should seek advice from their GP or clinical team.

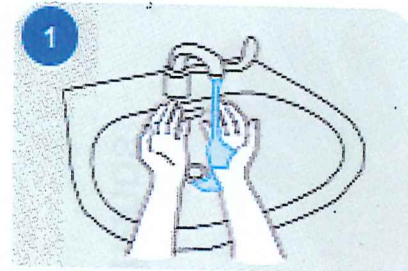
What else can I do to prevent my child from becoming unwell?

Because Group A Streptococcal disease is spread through coughing, sneezing and skin contact, it is important to have good hand hygiene and catch coughs and sneezes in tissues and throw these away. If you are unwell, stay at home and seek medical advice. This will all help limit the spread of other infections, which are common this time of year.

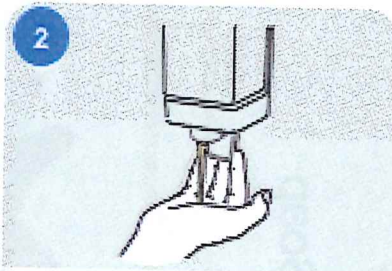


Best Practice: How to hand wash step by step images

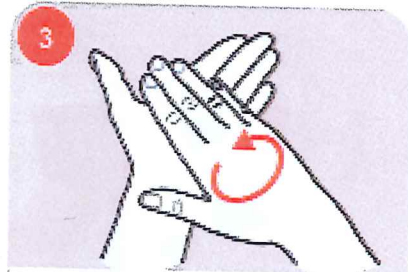
Steps 3-8 should take at least 15 seconds.



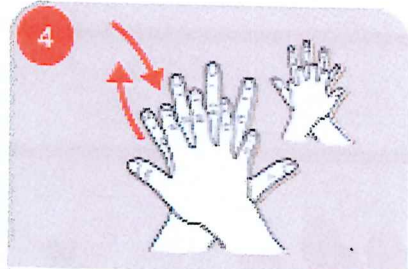
Wet hands with water



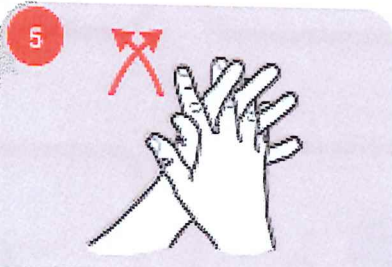
Apply enough soap to cover all
hand surfaces.



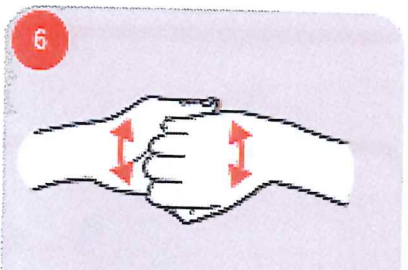
Rub hands palm to palm.



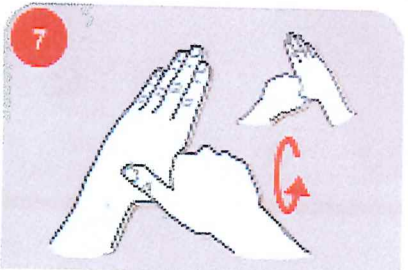
Right palm over the back of the
other hand with interlaced fingers
and vice versa.



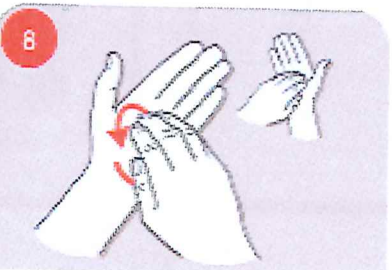
Palm to palm with fingers
interlaced.



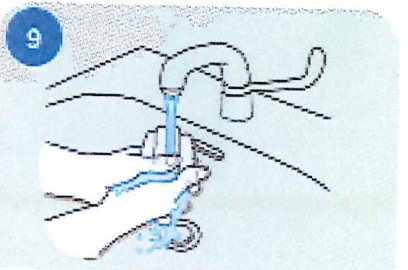
Backs of fingers to opposing palms
with fingers interlocked.



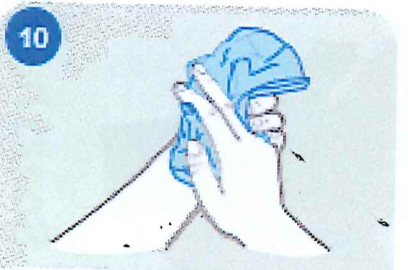
Rotational rubbing of left thumb
clasped in right palm and vice
versa.



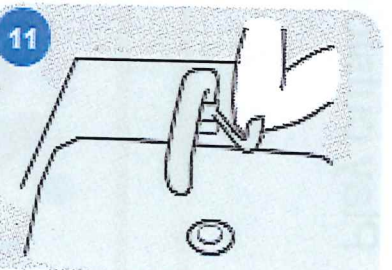
Rotational rubbing, backwards and
forwards with clasped fingers of right
hand in left palm and vice versa.



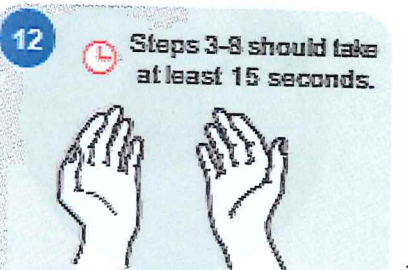
Rinse hands with water.



Dry thoroughly with towel



Use elbow to turn off tap.



... and your hands are safe*.

