Dr Tim Allison, Director of Public Health & Health Policy

Larch House

Stoneyfield Business Park Inverness, IV2 7PA Telephone: 01463 717123 Fax: 01463 717666



Textphone users can contact us via Typetalk: Tel 0800 959598 www.nhshighland.scot.nhs.uk

Date: Wednesday 7th December 2022

Enquiries to: Health Protection Team
Direct Line: 01463 704886
Email: Hpt.highland@nhs.scot

Dear Parent/Guardian,

Re: Increase in Group A Streptococcal (GAS) infections (including scarlet fever)

As you will have seen in the media, this year we have seen higher than usual numbers of group A streptococcal (GAS) infections in Scotland and persistently high numbers of cases of scarlet fever which is a common presentation of this infection among children. We are keen to try to further raise awareness of the signs and symptoms of this infection and the actions to take if you suspect your child has Group A Streptococcal (GAS) infection.

What is Group A Streptococcal (GAS) infection?

Group A Streptococcus is a bacterium often found in the throat and on the skin. Streptococci survive in throats and on hands for long enough to allow easy spread between people through sneezing, coughing and skin contact. People may carry group A streptococci in the throat or on the skin and have no symptoms of illness. This is sometimes known as being colonized.

Most group A streptococcal infections are relatively mild illnesses such as a sore throat, scarlet fever or a skin infection such as impetigo. Rarely, these bacteria can cause severe and even lifethreatening diseases.

As previously highlighted, we are seeing a high number of cases of scarlet fever in children this year. It is a common infection in children and can cause the following symptoms:

- Headache
- Sore throat
- High temperature
- Swollen tongue
- Distinctive pink-red rash which feels like sandpaper to the touch
- Swollen neck glands
- Loss of appetite and nausea or vomiting



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Trusted health advice on scarlet fever and other GAS infections can be found on <u>NHS Inform</u>. Children with suspected scarlet fever should be seen by a health professional as soon as possible so that a diagnosis can be made and any treatment can be given. Although most cases of scarlet fever clear up after about a week, treatment is recommended as it reduces the length of time that someone is infectious, speeds up recovery and lowers the risk of complications.

What is invasive group A streptococcal (iGAS) disease?

Most GAS infections such as scarlet fever don't cause complications. However, in rare circumstances, when bacteria get into parts of the body where they are not usually found, such as the blood, muscle, or the lungs, serious life-threatening disease may occur. These types of serious infection are called invasive Group A Streptococcal disease (iGAS). Invasive group A streptococcal infections occur when the bacteria get past the defenses of the person who is infected. This may occur when a person has sores or other breaks in the skin that allow the bacteria to get into the tissue, or when the person's ability to fight off the infection is weakened because of chronic illness or medication. The type of disease that a person develops also depends on the strain of the bacteria as some strains are more likely to cause severe disease than others.

When there are high levels of both group A streptococcus and chickenpox, there is an increased risk of complications due to invasive infection because of the breaks in the skin from chickenpox. Please do contact a healthcare professional if your child has both chickenpox and a GAS infection such as scarlet fever.

How is this infection spread?

Infections can be spread by respiratory droplets, through direct physical contact and through shared contact with surfaces such as tabletops, taps, toys and handles. This can be rapid in schools and nurseries where there can be close contact amongst children and staff.

Good hygiene practices such as hand washing and cough hygiene remain the most important steps in preventing and controlling spread of infection. Children and adults should cover their mouth and nose with a tissue when they cough or sneeze and then wash their hands with soap and water after using or disposing of tissues.

Exclusion of children with GAS infections such as scarlet fever

Children and adults with suspected scarlet fever should be excluded from nursery, school or work until 24 hours after the commencement of appropriate antibiotic treatment.

There is no requirement for wider family or social contacts of cases to isolate unless they too have suspected scarlet fever or other GAS infection.

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Where can I find more information?

Trusted health advice on scarlet fever and other GAS infections can be found on NHS Inform.

If you have any queries around this letter, please do not hesitate to contact myself using the contact details above.

Yours faithfully,

Dr Jenny Wares

Consultant in Public Health Medicine (Health Protection)

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