



UK Health
Security
Agency



2.2.2023

Dear parents, guardians and carers,

Re: Increase in scarlet fever and Group A Streptococcal infections

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 think that you or your child might have scarlet fever.

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.

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
- children or nursery/school staff who refuse treatment with antibiotics should be excluded until resolution of symptoms

You can help stop the spread of infection through frequent hand washing and by not sharing eating utensils, clothes, bedding and towels. All contaminated tissues should be disposed of immediately.

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.

Contact NHS11 or your GP if you or your child has any of these signs and symptoms:

- 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
- problems breathing or swallowing
- if strep has been diagnosed, a lack of improvement after taking antibiotics for 48 hours

It's possible for you or your child 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 your doctor generally tests specifically for strep throat.

- cases can attend nursery / school when they no longer have a fever AND have taken antibiotics for at least 24hrs
- children or nursery/school staff who refuse treatment with antibiotics should be excluded until resolution of symptoms

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.

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

Stop the spread

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. Good hygiene practice such as hand washing remains the most important step in preventing and controlling spread of infection.

Yours faithfully,



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Regional Deputy Director for South West
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Director of Public Health for Cornwall and the
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Annex: Resources

- NHS information on scarlet fever: <https://www.nhs.uk/conditions/scarlet-fever/>
- UKHSA advice on the diagnosis and treatment of scarlet fever:
<https://www.gov.uk/government/publications/scarlet-fever-symptoms-diagnosis-treatment>
- UKHSA guidance on the management of scarlet fever outbreaks in schools:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1110540/Guidelines_for_the_public_health_management_of_scarlet_fever_outbreaks.pdf
- UKHSA guidance on Health protection in education and childcare settings:
<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z>
- Additional resources to promote hand and respiratory hygiene in schools:
<http://www.e-bug.eu/>