

Strep A- advice for parents/carers

Please read all this information

Strep A is a bacteria that causes infections such as sore throat, scarlet fever, and skin infections like impetigo. Strep A infections are seen every year, usually in the early spring, and the bacteria is spread through snot and spit.

Most Strep A infections are very mild and can be easily treated with antibiotics. In very rare cases, the bacteria can get into the bloodstream and cause an illness called *invasive* Group A strep (iGAS). These are the cases that have been in the news recently.

This year, we are seeing an increase in scarlet fever (caused by Strep A) earlier than we might expect. Whilst still very rare, we are also seeing an increase in invasive Group A Strep cases.

There are also several other winter bugs going around; so not all poorly children will have Strep A. Many of these other winter bugs are caused by viruses and cannot be treated with antibiotics. Most winter bugs, with coughs, sneezing, and sore throat, can be managed at home.

We have described the symptoms of scarlet fever and what you should do below.

Symptoms of scarlet fever:

- High fever (feeling hotter than usual on the back or chest, feeling sweaty)
- Difficulty swallowing
- Sore swollen lymph nodes (glands)
- Sore neck or throat
- Headache
- Feeling sick
- Being sick
- Feeling tired or unwell
- Flushed red face, but pale around the mouth

Followed 12-48 hours later by:

- Small, red, widespread rash. The rash gives the skin a rough sandpaper-like feel.
- Tongue rash has strawberry-like appearance.
- On darker skin the rash may be more difficult to see but will still have a sandpaper-like feel. Please see [NHS online](#) for more information.

Complications from scarlet fever are rare and the risks made less by antibiotic treatment. However, they can happen during or in the weeks after the infection, and can include ear infection, throat swelling, sinusitis, lung infection, meningitis, and rheumatic fever (which can affect the joints and heart).

What should I do if my child has these symptoms, or I am worried?

You should contact your GP if your child has the symptoms of scarlet fever.



The GP will assess your child and decide whether they need antibiotics. If your child is prescribed antibiotics, you should make sure they take the full course.

If your child has another winter bug caused by a virus, antibiotics will not be prescribed, as they do not work on viruses.

If you think your child is seriously unwell, trust your judgement.

How can I stop the spread of infection?

You can help to stop the spread of scarlet fever and other winter bugs by asking your child to cover their nose and mouth with a tissue (or sleeve) when sneezing or coughing, put the tissue in the bin, and then wash their hands.

You should also encourage your child to wash their hands. Children should use soap and water or alcohol hand gel often, and always before eating or touching food, after using the toilet, and after coughing or sneezing.

Children should not share cutlery, towels, clothes, bedding, or baths.

These actions are important for preventing lots of different infections, please also consider getting your child the free flu vaccine. All 2- and 3-year-olds can get a free flu vaccine from the GP. Primary aged children and children in Y7, Y8 and Y9 will be offered the free flu vaccine at school. More information about the children's free flu vaccine can be found [here](#), information about the adult's free flu vaccine can be found [here](#).

If your child missed the flu vaccine at school and you would like them to have it, please contact 01283 707178 or DCHST.immunisation@nhs.net

When should children with symptoms of scarlet fever stop coming to school, nursery, or college?

Children with scarlet fever can return to their school, nursery or college 24 hours after taking their first dose of antibiotics if they are well enough. They must not come back before starting antibiotics as they will be infectious for several weeks without treatment.

