

07 December 2022

Dear Parent / Carer

### **Scarlet Fever / Group A Streptococcus Infection**

You may well have heard in the news about the increase in number of children with Scarlet Fever for the time of the year, and the reports of a small number of very sad deaths due to the much more rare, Invasive Group A streptococcus infection. This is of course causing anxiety and concern for many so we are providing here a summary of the current advice and information.

GPs and hospitals have been alerted so they will be vigilant for the signs / symptoms and will prescribe antibiotics if they think necessary based on the clinical assessment.

I have taken the opportunity to provide below the current communications as recommended by Newham Local authority.

If you are concerned please do follow the guidance as detailed below.

Yours sincerely,



Geoffrey Fowler

**CEO & Principal**

## **What is Scarlet Fever and Group A Streptococcus ?**

Scarlet fever is usually a mild illness, but it is highly infectious.

Look out for symptoms in your child, which include a sore throat, headache, and fever, along with a fine, pinkish or red body rash with a sandpapery feel.

On darker skin, the rash can be more difficult to detect visually but skin will have a sandpapery feel. Scarlet fever should be treated with antibiotics, so if you see those symptoms Contact NHS 111 or your GP. Early treatment of scarlet fever with antibiotics is important to reduce the risk of complications such as pneumonia or a bloodstream infection.

If your child has scarlet fever, keep them at home until at least 24 hours (1 whole day) after the **start of antibiotic treatment** to avoid spreading the infection to others.

Scarlet fever is caused by bacteria called group A streptococci. These bacteria also cause other respiratory and skin infections such as strep throat and impetigo.

In very rare occasions, the bacteria can get into the bloodstream and cause an illness called invasive Group A strep (iGAS). While still uncommon, there has been an increase in invasive Group A strep cases this year, particularly in children under 10.

The antibiotic used to treat scarlet fever is usually Pencillin V, sometimes Amoxicillin or Azithromycin for those with penicillin allergy. NICE treatment guidance is here:

<https://cks.nice.org.uk/topics/scarlet-fever/management/management/>

<https://www.nhs.uk/conditions/scarlet-fever/>

<https://www.gov.uk/government/news/ukhsa-update-on-scarlet-fever-and-invasive-group-a-strep>

## **How do I prevent it ?**

Good hand and respiratory hygiene are important for stopping the spread of many bugs. Learners should wash their hands properly with soap for 20 seconds, use a tissue to catch coughs and sneezes, and keep away from others when feeling unwell. This will reduce the risk of picking up or spreading infections.

## **How do I know if my child or a child in my care has the invasive version?**

As a parent, or carer if you feel that your child seems seriously unwell, you should trust your own judgement and contact NHS 111 if you are worried.

<https://www.gov.uk/government/news/ukhsa-update-on-scarlet-fever-and-invasive-group-a-strep>