

Update on Scarlet Fever and Strep A

Following the latest information and updated data on an increase in scarlet fever and Strep A in children from the UK Health Security Agency (UKHSA), we are issuing advice to schools and early years settings to help manage cases and inquiries. This briefing note includes details of the signs and symptoms for parents and carers to look out for and guidance on seeking medical assistance. If you require further information please contact UKHSA using the contact details below.

Scarlet fever cases continue to remain higher than we would typically see at this time of year. There were 851 cases reported in week 46, compared to an average of 186 for the preceding years.

Scarlet fever is usually a mild illness, but it is highly infectious. Therefore, 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 will have a sandpapery feel. Contact NHS 111 or your GP if you suspect your child has scarlet fever, because 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 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. Whilst still uncommon, there has been an increase in invasive Group A strep cases this year, particularly in children under 10. There were 2.3 cases per 100,000 children aged 1-4 compared to an average of 0.5 in the pre-pandemic seasons (2017 to 2019) and 1.1 cases per

100,000 children aged 5-9 compared to the pre-pandemic average of 0.3 (2017 to 2019) at the same time of the year.

So far this season there have been 5 recorded deaths within 7 days of an iGAS diagnosis in children under 10 in England. During the last high season for Group A Strep infection (2017/18) there were 4 deaths in children under 10 in the equivalent period.

Investigations are also underway following reports of an increase in lower respiratory tract Group A Strep infections in children over the past few weeks, which have caused severe illness.

Currently, there is no evidence that a new strain is circulating. The increase is most likely related to high amounts of circulating bacteria and social mixing. There are lots of viruses that cause sore throats, colds and coughs circulating. These should resolve without medical intervention. However, children can on occasion develop a bacterial infection on top of a virus and that can make them more unwell.

Guidance for parents and carers:

As a parent, if you feel that your child seems seriously unwell, you should trust your own judgement. Contact NHS 111 if 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

Good hand and respiratory hygiene are important for stopping the spread of many bugs. By teaching your child how to wash their hands properly with soap

for 20 seconds, using a tissue to catch coughs and sneezes, and keeping away from others when feeling unwell, they will be able to reduce the risk of picking up, or spreading, infections.

Dr Colin Brown, Deputy Director, UKHSA, said:

“We are seeing a higher number of cases of Group A strep this year than usual. The bacteria usually causes a mild infection producing sore throats or scarlet fever that can be easily treated with antibiotics. In very rare circumstances, this bacteria can get into the bloodstream and cause serious illness – called invasive Group A strep (iGAS). This is still uncommon however it is important that parents are on the lookout for symptoms and see a doctor as quickly as possible so that their child can be treated and we can stop the infection becoming serious. Make sure you talk to a health professional if your child is showing signs of deteriorating after a bout of scarlet fever, a sore throat, or a respiratory infection.”

Contact information

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