



Dear Parent(s) / Carer(s),

Re: Increase in scarlet fever

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 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

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.

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 sincerely,

Dr Yimmy Chow
**Consultant in Health Protection
and Head of NWL Health Protection Team, UKHSA**

Kelly O'Neill
**Director of Public Health
London Boroughs of Hounslow and Hillingdon**

Resources

[NHS – Scarlet Fever](#)

[Scarlet fever: symptoms, diagnosis and treatment](#)

[Health protection in education and childcare settings](#)

[Hand hygiene resources for schools](#)



UK Health
Security
Agency

UKHSA Group A streptococcus Communications Support Pack

December 2022

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Background

- Group A streptococcus (GAS) is a common bacteria. Lots of us carry it in our throats and on our skin and it doesn't always result in illness. However, GAS does cause a number of infections, some mild and some more serious.
- The most serious infections linked to GAS come from invasive group A strep, known as iGAS.
- These infections are caused by the bacteria getting into parts of the body where it is not normally found, such as the lungs or bloodstream. In rare cases an iGAS infection can be fatal.
- Whilst iGAS infections are still uncommon, there has been an increase in cases this year, particularly in children under 10 and sadly, a small number of deaths.

Background

- Investigations are 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.

Background

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

Spread and prevention

- GAS is spread by close contact with an infected person and can be passed on through coughs and sneezes or from a wound.
- Some people can have the bacteria present in their body without feeling unwell or showing any symptoms of infections and while they can pass it on, the risk of spread is much greater when a person is unwell.
- 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 and warm water 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.

Key messages: Symptoms

Look out for symptoms in your child, which include:

- Sore throat
 - Headache
 - Fever
 - A fine, pinkish or red body rash with a sandpapery feel.
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- On darker skin the rash can be more difficult to detect visually but will have a sandpapery feel.
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- Contact NHS 111 or your GP if you suspect your child has scarlet fever, because early treatment with antibiotics is important to reduce the risk of complications, such as pneumonia or a bloodstream infection.
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- 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.

Key Messages: Action

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

Key Messages: Action

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

Visual assets

- Over the coming days, visual assets will be added to the [online resource centre](#).
- The images below are designed to be used as a deck, and can be used on social media, or for circulation.
- Materials for display in settings will be available shortly.

UK Health Security Agency #GroupAStrep

Group A Strep (GAS)

GAS is a common bacteria which causes a range of infections including scarlet fever. These infections are usually mild.

Invasive Group A Strep (iGAS)

It can also cause a rare, more serious infection called Invasive Group A Strep (iGAS). This occurs when GAS bacteria gets into parts of the body where it causes serious disease, like the lungs or bloodstream.

UK Health Security Agency #GroupAStrep

Group A Strep (GAS)

Parents should trust their judgement when their child is poorly. Speak to your GP or call 111 if your child is poorly and getting worse.

Always call 999 or go to A&E if your child:

- ▶ Is having difficulty breathing - such as grunting noises or their tummy sucking under their ribs
- ▶ there are pauses when your child breathes
- ▶ child's skin, tongue or lips are blue
- ▶ is floppy and will not wake up or stay awake.

UK Health Security Agency #GroupAStrep

Group A Strep (GAS)

Cases of Invasive Group A Strep (iGAS) are rare. Some current cases are presenting with sepsis-like symptoms.

Be aware of important sepsis symptoms:

- ▶ Blue, pale or blotchy skin, lips or tongue - on darker skin, check for blueness on the lips, tongue or gums, under the nails or around the eyes
- ▶ rash that doesn't fade when you roll a glass over it
- ▶ difficulty breathing
- ▶ weak, high-pitched cry - not like their normal cry
- ▶ not responding like normal, not interested in feeding or normal activities
- ▶ being sleepier than normal or difficult to wake.

Resources

UKHSA Press release – Friday 02 December 2022

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

UKHSA Blog post – Group A Strep – what you need to know

<https://ukhsa.blog.gov.uk/2022/12/05/group-a-strep-what-you-need-to-know/>

Guidance for the public health management of scarlet fever outbreaks in schools, nurseries and other childcare settings

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

Guidance for health protection in children and young people settings, including education

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

UKHSA Health Protection Report – Friday 02 December 2022

<https://www.gov.uk/government/publications/group-a-streptococcal-infections-activity-during-the-2022-to-2023-season/group-a-streptococcal-infections-report-on-seasonal-activity-in-england-2022-to-2023>