

5th March 2018

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Gwefan/Web: www.iechydcyhoedduscymru.org
www.publichealthwales.org

To:

Pre-school nurseries
Primary and secondary schools
Local authority education departments (Health and Safety)

Dear colleagues,

Re: Increase in scarlet fever notifications 2018

We are writing to inform you of a recent increase in notifications of scarlet fever to Public Health Wales. There were 476 notifications in the first 8 weeks of 2018, compared to 295 in the same period in 2017.

We are notifying schools and nurseries as this infection mostly affects children aged under 10 years, and outbreaks can occur in schools and nurseries. Older children are also susceptible to streptococcal sore throats, but may not have the rash of scarlet fever.

Signs and symptoms of scarlet fever

Scarlet fever, sometimes called scarlatina, is an infectious disease caused by group A streptococcus (GAS) bacteria (also known as *Streptococcus Pyogenes*).

It is highly infectious and can be caught through direct contact with an infected person or through the air via droplets from coughs or sneezes.

The characteristic symptom of scarlet fever is a widespread, fine pink-red rash that feels like sandpaper to touch. Other symptoms include a high temperature, a flushed face and a red, swollen tongue.

Treatment is straightforward and usually involves a course of penicillin antibiotics.

Complications of scarlet fever

Most cases of scarlet fever cause no complications, especially if the condition is properly treated. However, complications in the early stages of the disease can include ear infection, throat abscess, sinusitis, pneumonia and meningitis.

Very rare complications include rheumatic fever, kidney damage, liver damage, bone infection, blood poisoning and toxic shock syndrome which can be life-threatening.

Recommended actions

- Staff should be aware of the possibility of this infection in children who become ill with a fever, sore throat or rash
- Parents of unwell children should be advised to seek medical advice for diagnosis and treatment
- Where there are 2 or more cases of scarlet fever in the institution within the same 10 day period, please notify the Health Protection Team on 0300 00 300 32 for further guidance
- Scarlet fever circulating with **chickenpox or influenza** can be particularly dangerous- please report this to the Health Protection Team as above
- Advise **exclusion** from nursery / school / work for **24 hours** after the commencement of appropriate antibiotic treatment
- Good hand hygiene and avoidance of spread of respiratory secretions (as per influenza- "catch it, bin it, kill it") can help to prevent the spread of infection

Yours sincerely,



Dr Gwen Lowe
Consultant in Communicable Disease Control

References:

NHS Direct Wales website information on scarlet fever

<https://www.nhsdirect.wales.nhs.uk/encyclopaedia/s/article/scarletfever>

Public Health Wales information on scarlet fever

<http://howis.wales.nhs.uk/sitesplus/888/page/63112>

Infection prevention and control for childcare settings and schools

<http://www.wales.nhs.uk/sitesplus/888/page/75726>

Public Health England guidance on outbreaks of scarlet fever in schools and nurseries

<https://www.gov.uk/government/publications/scarlet-fever-managing-outbreaks-in-schools-and-nurseries>

Appendix: Sample letter for parents/guardians (adapted from PHE guidance)

Dear parent / guardian,

We have been informed that a small number of children who attend [] school / nursery have been diagnosed with suspected / confirmed scarlet fever.

Although scarlet fever is usually a mild illness, it should be treated with antibiotics to reduce the risk of complications and spread to others. The symptoms of scarlet fever include a sore throat, headache, fever, nausea and vomiting. This is followed by a fine red rash, which typically first appears on the chest and stomach, rapidly spreading to other parts of the body. On more darkly pigmented skin, the scarlet rash may be harder to spot, but it should feel like 'sandpaper'. The face can be flushed red but pale around the mouth.

If you think you, or your child, have scarlet fever:

- See your GP or contact NHS 111 as soon as possible
- Make sure that you/your child takes the full course of any antibiotics prescribed by the doctor.
- Stay at home, away from nursery, school or work for at least 24 hours after starting the antibiotic treatment, to avoid spreading the infection.

Treatment is straightforward and usually involves a course of penicillin antibiotics.

Complications

Children who have had chickenpox recently are more likely to develop more serious infection during an outbreak of scarlet fever and so parents should remain vigilant for symptoms such as a persistent high fever, cellulitis (skin infection) and arthritis (joint pain and swelling). If you are concerned for any reason please seek medical help immediately.

If your child has an underlying condition which affects their immune system, you should contact your GP or hospital doctor to discuss whether any additional measures are needed.

Yours sincerely,