## **Message from Professor Matt Ashton (Director of Public Health)**

Scarlet fever cases remain higher than normal across the North West and nationally. The bacteria which causes scarlet fever also can cause a serious invasive infection called invasive Group A Streptococcus (iGAS), and there has been an increase in these infections too.

- Scarlet fever is usually a mild illness but can be serious if left untreated. It can be treated easily with antibiotics. It spreads very easily through coughing and sneezing.
- The first signs are flu-like symptoms such as high temperature, sore throat and swollen neck glands. A bumpy rough feeling rash usually appears after 12 to 48 hours on the chest and tummy. If you think your child may have scarlet fever, contact your local GP or NHS111 for advice.
- If the doctor prescribes antibiotics, take the full course. Stay away from nursery, school or work for 24 hours after taking the 1<sup>st</sup> dose of antibiotics.
- To prevent spread, please encourage children to wash their hands often with soap and water, and use tissues to cover coughs and sneezes. Put used tissues quickly in the bin. Clean and cover cuts and scrapes to prevent infection invading the body.
- Keep shared surfaces like table-tops, toys, taps and handles clean.
- Whilst scarlet fever is circulating it is important that any children and adults with chickenpox do stay off school or nursery until all their blisters have dried over, which is usually 5 days after they first appeared.

Scarlet Fever update from the UK Health Security Agency – rates of scarlet fever are higher than would be expected for this time of year. The same pattern has been noted for cases of invasive group A streptococcus (iGAS), particularly in children under 10 years. iGAS is a far less common infection caused by the same bacteria as scarlet fever but can lead to more serious illness. 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. Patients typically have flushed cheeks and pallor around the mouth. This may be accompanied by a 'strawberry tongue'. As the child improves peeling of the skin can occur.

Children and adults with suspected scarlet fever should not attend nursery / school / work until 24 hours after starting appropriate antibiotic treatment. Whilst scarlet fever is circulating it is important that any children and adults with chickenpox do stay off school or nursery until all their blisters have dried over, which is usually 5 days after they first appeared.

For further information and guidance about scarlet fever please see the following NHS link Scarlet fever information.

**Scarlet Fever Information**