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Iechyd Cyhoeddus
Cymru
Public Health
Wales

**Tîm Amddiffyn Iechyd
Health Protection Team**

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Your ref:

Our ref:

Date:

Gwefan/Web:

www.iechydcyhoedduscymru.org
www.publichealthwales.org

To:

Pre-school nurseries

Primary and secondary schools

Local Authority Education Departments

Health Boards for the attention of: Public Health Team; Health Visitors; Primary Care; School Health Nurses

Dear Colleagues,

Re: Increase in scarlet fever and invasive streptococcal disease in 2022

We are writing to inform you of a recent increase in notifications of scarlet fever and invasive streptococcal disease. There were 1,512 notifications of scarlet fever in the first 47 weeks of 2022, compared to 948 in the same period in 2019. There were lower numbers of scarlet fever notifications across 2020 and 2021 (likely due to changes in transmission and behaviour during this period).

We are notifying schools and nurseries as this infection mostly affects children aged under 10 years, and so 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 and streptococcal infection

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.

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

There has been an increase in severe disease caused by this bacterium (invasive group A streptococcal infections) in late 2022, including some fatal cases in children. Invasive disease may occur without a person having had scarlet fever or sore throat first. Early signs of invasive disease include: high fever, severe muscle aches, local muscle tenderness, or redness at the site of a wound. If there are any concerns about invasive disease, then urgent medical advice must be sought.

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
- **A person with scarlet fever should withdraw** from your setting for **24 hours** after the commencement of appropriate antibiotic treatment
- Where there are 2 or more cases of scarlet fever in your setting within the same 10-day period, please notify the Health Protection Team on 0300 00 300 32 for further guidance
- Scarlet fever circulating at the same time as **chickenpox or influenza** can increase the risk of invasive disease - please report this to the Health Protection Team as above
- 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

Many thanks for your assistance.

Yours sincerely,

Dr Rhianwen Stiff
Consultant in Communicable Disease Control

Source of advice:

NHS 111 Wales scarlet fever webpage
<https://111.wales.nhs.uk/encyclopaedia/s/article/scarletfever>