

6<sup>th</sup> December 2022

## **Re: Increase in group A streptococcal infections (including scarlet fever)**

This year we have seen higher than usual numbers of **group A streptococcal (GAS)** infections in Scotland and persistently high numbers of cases of **scarlet fever** (a common presentation of this infection) among children. Robust information related to this infection including signs, symptoms and action to consider if you become aware of a case or an outbreak of scarlet fever at your school or nursery, may be helpful.

### **Signs and symptoms of scarlet fever**

Scarlet fever is a common infection in children caused by *Streptococcus pyogenes*, or group A *Streptococcus* (GAS). Scarlet fever can cause the following symptoms: headache, sore throat, high temperature and raised pink/purple spots that join up to produce a skin rash, which feels like sandpaper to the touch. The scarlet rash may be harder to spot on darker skin, although the 'sandpaper' feel should be present. Although scarlet fever is usually a mild illness, in very rare occasions the bacteria can enter the bloodstream and cause a more serious invasive illness.

Trusted health advice on scarlet fever can be found on [NHS Inform](#). Children with suspected scarlet fever should be seen by a health professional.

### **Infection control advice**

Infections can be spread by respiratory droplets, through direct physical contact and through shared contact with surfaces such as tabletops, taps, toys and handles. This can be rapid in schools and nurseries where there can be close contact amongst children and staff or if good hygiene practices are not in place.

Good hygiene practice such as hand washing remains the most important step in preventing and controlling spread of infection. Measures should be put into place that

encourages children and staff to wash their hands at the start of the school day, after using the toilet, after play, before and after eating, and at the end of the school day.

Liquid soap via a soap dispenser should be available and there should be a plentiful supply of paper towels.

Children and adults should cover their mouth and nose with a tissue when they cough or sneeze and then wash their hands with soap and water after using or disposing of tissues.

During an outbreak your local health protection team (see below) will advise on enhanced cleaning measures.

Further infection, prevention and control advice can be found:

- [Infection Prevention and Control in Childcare Settings](#)
- [UKHSA: Health protection in children and young people settings](#)

### **Exclusion of staff and children with scarlet fever**

Children and adults with suspected scarlet fever should be excluded from nursery, school or work until 24 hours after the commencement of appropriate antibiotic treatment.

There is no requirement to exclude social or family contacts of cases from school or nursery unless they too have suspected scarlet fever.

### **Recommended actions if you suspect an outbreak at your school or nursery**

During periods when reports of GAS infection (scarlet fever) are high, it is likely that more outbreaks in schools, nurseries and other childcare settings will be identified. If you suspect or have been informed of two or more cases of scarlet fever in your nursery or school in the last 10 days, please contact your Health Protection Team – [NHS Lothian Health Protection Team](#) via email [health.protection@nhslothian.scot.nhs.uk](mailto:health.protection@nhslothian.scot.nhs.uk) - for advice.

Your Health Protection Team will risk assess the situation and make recommendations on next steps.