

Dear parents

We are writing to share the UKHSA's update on scarlet fever and invasive Group A strep, the signs and symptoms to look out for, and where to get help and support if needed.

Signs and symptoms

Scarlet fever is usually a mild illness, but it is highly infectious. Look out for symptoms in your child, which include a sore throat, headache, and fever, along with a fine, pinkish or red body rash with a sandpapery feel.

On darker skin the rash can be more difficult to detect visually but will have a sandpapery feel.

Where to get help and information

Contact NHS 111 or your GP if you suspect your child has scarlet fever, because early treatment of scarlet fever with antibiotics is important to reduce the risk of complications such as pneumonia or a bloodstream infection.

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.

What is scarlet fever?

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. The latest data from UKHSA show that scarlet fever cases continue to remain higher than we would typically see at this time of year. There were 851 cases reported in week 46, compared to an average of 186 for the preceding years.

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.

So far this season there have been 5 recorded deaths within 7 days of an invasive Group A strep diagnosis in children under 10 in England. During the last high season for Group A Strep infection (2017/18) there were 4 deaths in children under 10 in the equivalent period.

Investigations are also underway following reports of an increase in lower respiratory tract Group A Strep infections in children in England over the past few weeks, which have caused severe illness.

Why is there a recent increase in cases?

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.

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

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

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 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.

We will continue to keep you updated with any further information from the UKHSA. You can also find information on the Government's [website](#), and their guidance for managing infectious diseases is [here](#).