



STREP THROAT & SCARLET FEVER

Group-A *Streptococci* are bacteria that can cause a variety of illnesses, the most common of which are strep throat, scarlet fever and impetigo.

Strep Throat is a sore throat caused by this bacterium. Cold viruses, not strep bacteria, cause the vast majority of sore throats in both children and adults. Strep sore throats tend to be accompanied by fever, tender swollen neck glands, headache and stomach ache, but can also occur with cough, runny nose, or other cold symptoms.

Scarlet Fever is a form of strep infection caused by bacteria that produce a substance, which causes a skin rash. The rash is usually red with fine bumps that feel like sand paper and is most noticeable on the neck, chest, groin, or on the inner surface of the knees, thighs and elbows. The rash does not usually involve the face, but cheeks are flushed and there is paleness around the mouth. The tongue may be reddish and look like the surface of a strawberry. The rash may only last a few hours. Scarlet fever is no more serious than strep throat.

Treatment of strep infections with antibiotics may not dramatically change the length or severity of the sore throat symptoms or rash. It is important to treat strep infections in children to prevent its spread to others and the possible development of rheumatic fever.

Note: Rheumatic Fever (i.e., abnormalities of the heart valves and inflammation of the joints) is very rare in the United States today, but can develop five to six weeks after any type of untreated strep infection. In rare instances, kidney disease can also occur following a strep infection.

Who can get this disease?

Anyone can get strep throat or scarlet fever, but it is uncommon in children under three years of age (as is rheumatic fever). It is most common in school-aged children, in winter months and in crowded situations (e.g., schools, childcare centers). Often if one person in a family gets it, other do also, especially brothers and sisters.

How is it spread?

During infections, strep is in nose and mouth secretions so it can be coughed, sneezed or smeared around on hands, dishes, food, toys and similar objects. The incubation period is two to five days. Unlike colds, children are probably not infectious during this incubation period. Children are most likely to pass strep to others when they have symptoms and until they have been on antibiotic treatment for 24 hours.

How soon do symptoms appear?

The symptoms generally appear within one to three days.

How are they diagnosed and treated?

The diagnosis of strep throat is made by a throat culture. It usually takes 24-48 hours to grow the bacteria. There are several recently developed rapid tests, which can diagnose a strep infection in less time. Strep infections are treated with an oral antibiotic for 10 days. Occasionally a healthcare provider may give a single long-lasting injection. Depending on the symptoms, the healthcare provider may give antibiotics immediately or wait for the throat culture results.

STREP THROAT & SCARLET FEVER (cont.)

How can the spread of this disease be prevented?

1. Enforce handwashing and general cleanliness in the childcare facility. If a case of strep throat has been diagnosed, it is particularly important to remember that:
 - a. Staff and children should wash their hands after wiping/blowing noses and before eating or preparing food.
 - b. Toys and surfaces should be washed and disinfected daily.
 - c. Each child should have his/her own cup; preferably, disposable cups should be used.
 - d. Food should not be shared.
 - e. All eating utensils should be carefully washed in hot, soapy water, disinfected and air-dried. A dishwasher is best.
2. Keep children's noses clean and dry; wash hands immediately after wiping noses.
3. Teach children to cough/sneeze to one side toward the floor and into a tissue. They need to wash their hands afterward.
4. If there is a case of strep throat in the facility, children and staff who develop sore throat symptoms should be seen by their healthcare provider to be tested for strep. Generally, children and staff who do not have symptoms do not need to be cultured.

Who should be excluded?

Children and staff should be excluded until 24 hours after beginning antibiotic therapy and until there is no fever present.

Reportable?

No, this type of Streptococcal infection is not reportable by New Hampshire law to the Division of Public Health Services, Communicable Disease Control Section. However, Public Health Professionals are available for consultation at (603) 271-4496 or 800-852-3345 ext. 4496.