

# **Lightning Learning:** Scarlet Fever



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Section 1
Section



## STOP!

There are on average 1-2K cases of scarlet fever each winter in the UK. Children between 4-8 years are amongst the most affected.

It is caused by Streptococcus pyogenes (Group-A). This invasive bacteria can spread causing...

- 1) Peritonsillar abscess
- 2) Septicaemia
- 3) Meningitis
- 4) Pneumonia
- 5) Osteomyelitis



Post-streptococcal complications also include...

- 6) Rheumatic fever
- 7) Glomerulonephritis

Peak occurrence is seasonal from December to April annually.

## LOOK

1) 24-hour prodrome Sore throat. fever, headache, muscle ache, tummy ache, nausea & vomiting.

Followed by...



Red, generalised, pinhead rash spreading from the trunk, with a sandpaper-like texture which in the flexures causes "Pastia's lines."

3) Oropharyngeal signs

White coated or Strawberry tongue including flushed cheeks, perioral pallor, inflamed tonsils +/- exudate.







# **LEARN**

### What Next?

- ✓ Consider throat swab
- ✓ Prescribe antibiotic without delay (10 day course Pen V or macrolide)
- ✓ Advise on self care (rest, fluids, hygiene, paracetamol)
- ✓ Advise exclusion from nursery, school, work for at least 24 hours
- ✓ Notify public health England

### **Further Reading**

Scarlet Fever (DFTB)

http://bit.ly/2WDQitL

**Quick Tips: Scarlet Fever module** (BMJ) http://bit.ly/2GeYveW

Managing Scarlet Fever (BMJ)

http://bit.ly/2SdAj34

Scarlet fever: Guidance and Data (GOV.UK) http://bit.ly/2SbculZ

Scarlet Fever scenario (NICE)

http://bit.ly/2GaP3cr