

Scarlet Fever

What is it?

Scarlet fever is one of a range of conditions caused by a toxin from a germ called streptococcus. Most often these germs cause a sore throat alone. However, scarlet fever is a form of streptococcal disease characterised by a skin rash. This germ is commonly found on the skin or in the throat, where they can live without causing problems. Under some circumstances, however, this germ can cause this condition. This infection is mainly a childhood disease and is most common between the ages of two and eight years.

How do I know if someone has it?

The main symptoms include a sore throat and fever and a fine, raised, red rash, which feels like sandpaper and disappears momentarily when pressed. The rash appears most commonly on the neck, chest, under the arms, elbows and inner thighs. The rash does not usually affect the face, which is flushed, paleness around the mouth can occur. During convalescence, the skin usually peels on the fingers and toes. The rash resembles that of several other illnesses, such as measles or slapped cheek disease. Diagnosis can be confirmed by doing a throat swab.

Is it infectious?

Yes, to close contacts of the patient. Rarely, it can be contracted by indirect contact through objects. Period of infectiousness is prolonged in untreated cases

What is the incubation period (the time between being infected and feeling ill)? Usually 2 to 5 days, but sometimes longer

What should I do if someone has the illness?

- Consult your doctor who will confirm the diagnosis and decide about treatment
- The infected person should rest while they have a fever
- Keep a child with a fever cool by reducing clothing and bed clothes and by giving paracetamol as directed on the bottle. Sponging a child down with tepid water will help to bring a high temperature down.

Treatment

Penicillin reduces the length of the illness and the possibility of rare complications (such as rheumatic heart disease). There are alternatives for people allergic to penicillin.

How can spread be avoided?

- If possible, babies and people with low resistance to infection (immunosuppression) should avoid contact with the patient
- Good personal hygiene
- Antibiotic treatment

How soon can someone return to school/work?

24 hours after commencing antibiotics and they are well enough to attend