



Scarlet Fever



Causative agent

Scarlet fever is a bacterial infection caused by Group A *Streptococcus*. It mostly affects children.

Clinical features

Early symptoms often include sore throat, fever, headache, nausea and vomiting. The tongue may have a distinctive "strawberry"-like (red and bumpy) appearance. A "sandpaper" texture-like rash would commonly appear on the neck, underarm and groin area on the first or second day of illness. Over time, it would spread over the body. It usually subsides in about one week and is followed by skin peeling over fingertips, toes and groin areas.

Scarlet fever is sometimes complicated with middle ear infection, throat abscess, pneumonia, meningitis, bone or joint problems, damage to kidneys, liver and heart, and rarely toxic shock syndrome.

Incubation period

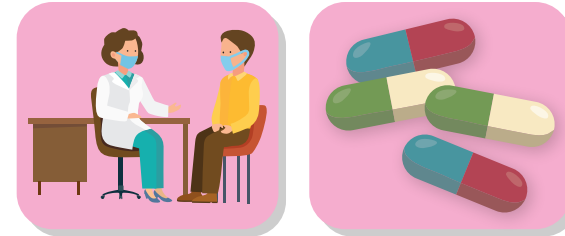
The incubation period ranges from 1 to 7 days, usually 2 to 5 days.

Mode of transmission

The bacteria are present in the mouth, throat and nose of the infected person. They are transmitted through either respiratory droplets or direct contact with infected respiratory secretions.

Management

Scarlet fever can be effectively treated with antibiotics. If symptoms of scarlet fever develop, consult the doctor promptly and take antibiotics according to doctor's advice. Symptoms may be relieved by parallel use of fever-lowering drugs, more rest and replenishment of fluids.



Prevention

There is no vaccine available against scarlet fever. Members of public are advised to reduce their chance of getting infection by adopting the following measures:

Maintain good personal and environmental hygiene

- Perform hand hygiene frequently, especially before touching the mouth, nose or eyes; after touching public installations such as handrails or door knobs; or when hands are contaminated by respiratory secretion after coughing or sneezing.
- Wash hands with liquid soap and water, and rub for at least 20 seconds. Then rinse with water and dry with a disposable paper towel or hand dryer. If hand washing facilities are not available, or when hands are not visibly soiled, hand hygiene with 70 to 80% alcohol-based handrub is an effective alternative.

- Cover your mouth and nose with tissue paper when sneezing or coughing. Dispose of soiled tissues into a lidded rubbish bin, then wash hands thoroughly.
- Avoid sharing personal items e.g. eating utensils and towels.
- Regularly clean and disinfect frequently touched surfaces.
- Maintain good indoor ventilation.



Children suffering from scarlet fever should refrain from attending school or child care setting until fever has subsided and they have been treated with antibiotics for at least 24 hours.

