



Department of Health & Social Care

From Maria Caulfield MP
Parliamentary Under Secretary of State
Department of Health and Social Care

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To All MPs

9 December 2022

Dear Colleague,

Scarlet fever and invasive group A streptococcal disease (iGAS)

I am writing to inform you of recent developments regarding the increased incidence of scarlet fever and invasive group A streptococcal disease (iGAS) in children that is occurring earlier than usual this season. This letter is for your awareness in the event you are asked questions by your constituents about this increased incidence.

Group A *Streptococcus* (GAS) is a bacterium which can be carried in our throats and on our skin. Whilst GAS does not always result in illness it can cause a number of relatively mild conditions such as scarlet fever, sore throat and impetigo which are readily treated with antibiotics. These are common in children and can lead to outbreaks in schools and nurseries. In very rare cases, the bacteria can get into the bloodstream and cause a serious invasive infection called invasive Group A streptococcal (iGAS) infection.

The bacteria are spread by close contact with an infected person and usually passed on through respiratory particles or through skin-to-skin contact. The GAS bacterium can cause serious infections including pneumonia, joint and bloodstream infections (septicaemia). Invasive group A strep (iGAS) is uncommon but serious and between 10 to 15% of people with iGAS will die within 7 days of diagnosis. Between 1500 to 3000 people in England develop iGAS infection each year. The elderly typically have the highest risk of invasive disease and death, although people of all ages, including fit and otherwise healthy people, can be affected.

So far this GAS season (mid-September 2022 to mid-September 2023), a total of ten deaths have been recorded within 7 days of an iGAS infection diagnosis (from any cause) in children <10y in England. We are also aware that there has been three deaths in a children aged 10 to 14 in England and the death of one child <10y in Wales. Notifications of scarlet fever disease in England and data from iGAS surveillance will be updated on Gov.uk - [Group A streptococcal infections: activity during the 2022 to 2023 season - GOV.UK \(www.gov.uk\)](https://www.gov.uk/group-a-streptococcal-infections-activity-during-the-2022-to-2023-season)

Currently, there is no evidence that a new strain is circulating. However, further detailed laboratory work, including genomic analysis, to compare the strains circulating this season compared to previous seasons is underway. The increase is most likely related to high amounts of circulating bacteria. Scarlet fever and iGAS infection are both notifiable, we have good surveillance systems to detect changes in disease incidence in England. A reminder to clinicians regarding their legal duty to notify cases and the importance of this

in facilitating urgent public health actions was included in the professional alert issued 02/12/22.

UKHSA Regional Health Protection Teams are triaging a high volume of enquiries and risk assessing cases, clusters and outbreaks to ensure effective public health response in line with [published guidance on scarlet fever](#) and [severe invasive infections](#). Working proactively with local partners and stakeholders, including Local Authority Directors of Public Health, the NHS and the media, UKHSA will continue to provide expert advice and evidence-based information. UKHSA are working in partnership with health protection agencies in Scotland, Wales and Northern Ireland to ensure a consistent approach across the four nations. Where there are clusters of cases in settings such as nurseries, primary schools and care homes, UKHSA will work with local Directors of Public Health to support a risk assessment and provide advice on whether individuals who were in potential close contact require antibiotic prophylaxis.

UKHSA Communications delivered an initial tranche of media and social media activity to raise awareness amongst parents, carers and schools from 02/12/22, which continued over the weekend and into this week. UKHSA are working with health and public health colleagues across the devolved administrations to ensure that there is a sharing of knowledge, information and guidance.

These lines may be useful in communications with your constituents regarding concerns over GAS.

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 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 38°C, or is older than 3 months and has a temperature of 39°C 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.

The Chief Pharmacist also wrote to all pharmacists yesterday reassuring colleagues on antibiotic supply. There is no supplier shortage of antibiotics available to treat Strep A, however local pharmacy teams may be experiencing a temporary interruption of supply of some relevant antibiotics due to increased demand. The department are working urgently with manufacturers and wholesalers to expedite deliveries and bring forward stock they have to help ensure it gets to where it's needed, to meet demand as quickly as possible and support access to these vital medicines.

My thoughts are with the families, friends, schools and communities impacted by GAS and iGAS. I would like to assure you and your constituents that the UK Health Security Agency, the NHS, and the Devolved Administrations are rapidly responding.

Should you have any detailed questions please refer them to MPHelpline@ukhsa.gov.uk and any public queries to enquiries@ukhsa.gov.uk.

Kind regards,

A handwritten signature in blue ink, appearing to read "Maria Caulfield".

MARIA CAULFIELD