Scarlet fever

DESCRIPTION

Scarlet fever begins suddenly, sometimes causing a convolution in a very young child. It begins with a sore throat, high temperature and frequent vomiting. This is followed within 12-36 hours by a fine red rash on the limbs and trunk and reddening of the tongue (strawberry tongue). This appears first on the neck and chest, rapidly spreading over the body, finally reaching the legs. During the recovery from the infection, the skin may peel off the fingers and toes.\(^{105}\)

Scarlet fever is caused by a streptococcal infection (see "Sore throats and strep throat on page 50").

It is spread directly by contact with airborne droplets (coughing and sneezing), or indirectly by contaminated hands, tissues, eating utensils, toys or other articles freshly soiled by the nose and throat discharges of an infected person.

INCUBATION PERIOD

Usually 1-3 days.

INFECTIOUS PERIOD

For about 24 hours after appropriate treatment begins. Untreated people remain infectious as long as they are sick. This is usually 3-7 days.

EXCLUSION PERIOD

Exclude until the child has received antibiotic treatment for at least 24 hours and they feel well.

RESPONSIBILITIES OF PARENTS

Advise the parent to seek medical assessment and treatment as untreated scarlet fever may result in serious illness. Parents must keep the child home for the exclusion period.

CONTROLLING THE SPREAD OF INFECTION

Follow good personal cleanliness practices. Cover the nose and mouth when coughing or sneezing. Dispose of soiled tissues appropriately. Always follow this with proper hand washing. Do not share eating utensils, food or drinking cups. Wash toys that infants and toddlers put in their mouths.

TREATMENT

Penicillin or other effective antibiotics as prescribed by a doctor. Take the full course of antibiotics.

RESPONSIBILITIES OF CHILD CARE PROVIDERS/STAFF

Report the infection to the director.
Sore throats and streptococcal sore throat (strep throat)

DESCRIPTION

Sore throats are caused by viruses or bacteria. Children do not commonly complain of a sore throat. However, they may have a fever or be reluctant to eat or drink. Children with a sore throat should see a doctor to assess any need for antibiotics.

A 'strep sore throat' is a bacterial infection of the throat caused by *Streptococcus pyogenes*. Possible complications of a strep throat include:

- **Scarlet fever**
  The child shall have all the symptoms of throat infection plus a fine red rash on the limbs and trunk and reddening of the tongue ('strawberry tongue'). During the recovery from the infection, the skin may peel off the fingers and toes.56

- **Quinsy**
  An abscess (collection of pus) next to a tonsil.

- **Rheumatic fever**
  A rare complication. Fever, joint pain and a skin rash develop soon after a sore throat. Later, inflammation of the heart (rheumatic carditis) or shaking and unsteadiness (Sydenham's chorea or St Vitus' dance) may occur.

- **Inflammation and reduced function of the kidney**
  A rare complication.

Viral and bacterial throat infections are spread directly by contact with airborne droplets (coughing and sneezing), or indirectly by contaminated hands, tissues, eating utensils, toys or other articles freshly soiled by the nose and throat discharges of an infected person.

INCUBATION PERIOD

Usually 1–3 days.

INFECTION PERIOD

**Bacterial sore throats:** Untreated people remain infectious for 2 to 3 weeks after becoming ill.57 Treated people are not infectious about 24 hours after appropriate antibiotic treatment begins.

**Viral sore throats:** As long as organisms are being spread by coughing, sneezing, etc. Viral tonsillitis and sore throats may last several days.

EXCLUSION PERIOD

Exclude a child with a strep sore throat until the child has received antibiotic treatment for at least 24 hours and they feel well.

Exclude a child with a viral sore throat until the child is feeling well.46

RESPONSIBILITIES OF CHILD CARE PROVIDERS/STAFF

Report the infection to the director. Advise the parent to seek medical assessment and treatment. Parents must keep the child home for the exclusion period.

RESPONSIBILITIES OF THE PARENTS

Keep the child home for the exclusion period and until the child is feeling well.

CONTROLLING THE SPREAD OF INFECTION

Exclude the person until they have received antibiotic treatment for at least 24 hours and they feel well.

To control the spread of germs, children should be encouraged to either:

- a) Cover their mouth and nose with a tissue when they sneeze or cough, then dispose of the used tissue appropriately. Wash their hands with soap and water, and dry thoroughly; or
b) Cough or sneeze into their upper sleeve, or elbow, not into their hands. Then wash their hands with soap and water, and dry thoroughly.

Ensure staff wash and dry hands after contact with soiled tissues or contact with nose and throat discharges.

Do not share eating utensils, food or drinking cups. Thoroughly wash toys that infants and toddlers put in their mouths.

**TREATMENT**

A bacterial sore throat is treated with penicillin or other antibiotics as prescribed by a doctor. To prevent potential complications such as rheumatic fever, the full course of antibiotics should be completed.

Antibiotics are not appropriate for viral sore throats.