



## Scarlet Fever

A suspected case of scarlet fever was diagnosed among one of the children attending your child's school. The Infectious Disease Prevention and Control Unit have prepared this sheet for your information, to increase awareness and to put your minds at rest.

**Scarlet fever** is a **throat infection** associated with a **rash** which usually affects school children between the ages of 3 and 12. It is caused by a type of bacteria called *Streptococcus Pyogenes*, and is **easily treatable with antibiotics**.

**Symptoms** can appear within 1-5 days of the child becoming infected.

These include:

- Fever;
- Red and sore throat;
- Fine red rash most commonly on the trunk, but also on the limbs, which usually appears within 2 days of having a fever or sore throat and may feel like sand paper;
- Flushing of the face with a whitish circle around the mouth;
- Swollen red tongue – strawberry tongue.



Photo: [https://upload.wikimedia.org/wikipedia/commons/4/4a/Strawberry\\_tongue.jpg](https://upload.wikimedia.org/wikipedia/commons/4/4a/Strawberry_tongue.jpg)

Strawberry tongue in scarlet fever

The infection causing scarlet fever is **spread by saliva**, by sneezing and coughing, sharing sweets, drinking cups and bottles, as well as sharing pencils, rubbers... which they may put in their mouth. The risk of getting scarlet fever is similar to that of getting a cold or any other ordinary throat infection, and there is no risk to pregnant women or their baby.

**Hand washing** is the best way to prevent the spread of many germs and infections – children should be encouraged to wash their hands often - before eating, after eating, after playing, after playing with their pets and after going to the toilet. Simple soap and water is enough.

Children (classmates and affected children's siblings) should attend school as usual. However parents should not send their children to school if they are ill, and seek advice from their doctor, bringing to his attention that there was a case of Scarlet fever at school. We recommend that children diagnosed with Scarlet fever must be kept at home for 5 days after starting antibiotics, which are usually given for a duration of 10 days.



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Typical rash in scarlet fever

DO NOT WORRY! Should you have any questions contact your General Practitioner for advice. Further information can be obtained from the Infectious Disease Prevention and Control Unit on 21332235, 23266146, 23266111 from Monday to Friday between 8am - 3pm.

<http://www.gov.mt/frame.asp?l=1&url=http://www.health.gov.mt/dsu>





## L-Iskarlatina

L-Iskarlatina hija infezzjoni fil-grizmejn assoċjata ma' raxx u li ġeneralment tolgot tfal bejn it-tliet snin u l-ħdax-il sena. Hija kkawżata minn mikrobu jismu *Streptococcus Pyogenes* u tiġi **faċilment trattata bl-antibijotiċi** (*antibiotics*).

Is-sintomi jistgħu joħroġu bejn 1 - 5 ġranet wara li t-tfal jiġu infettati.

Dawn is-sintomi jinkludu:

- Deni
- Uġiġħ fil-grizmejn / grizmejn ħomor
- Raxx irqiġ ħamrani li joħroġ l-aktar fuq is-sider, iż-żaqq u d-dahar, imma anki fuq l-idejn u s-saqajn. Dan ir-raxx li jista' jinħass aħrax qisu *sand paper*, ġeneralment joħroġ jumejn wara li jkun ħareġ id-deni u l-uġiġħ fil-grizmejn
- Wiċċ ruxxan b'ċirku bajdani madwar il-ħalq
- Ilsien ħamrani u minfuħ (*strawberry tongue*)



Photo: <https://upload.wikimedia.org/wikipedia/commons/4/4a/Iskarlatina.jpg>

'Strawberry tongue' fl-iskarlatina

L-infezzjoni li tikkawża l-iskarlatina tinxtered mill-bżieq, bl-għatis u s-sogħla, mit-tazzi u l-fliexken li nixorbu minnhom, u affarijiet li t-tfal imdorrijin iselfu bħal lapsijiet, gommom u rigi, li jagħmluhom f'ħalqhom. Ir-riskju li wieħed taqbd u l-iskarlatina huwa l-istess bħal dak ta' meta wieħed taqbd u infezzjoni normali fi grizmejh. M'hemm l-ebda riskji għal nisa li jkunu qed jistennew tarbija u għat-tarbija tagħhom.

**Il-ħasil ta' l-idejn hija l-aktar ħaġa importanti biex ma nxerrdux hafna tipi ta mikrobu u infezzjonijiet.** It-tfal għandhom jiġu mgħallma jaħslu idejhom spiss – qabel u wara l-ikel, wara l-logħob, anki logħob mal-annimali, u wara li jkunu marru t-tojlit. Huwa biżżejjed li naħslu idejna bl-ilma u ftit sapun normali.

It-tfal (dawk tal-klassi, kif ukoll l-aħwa ta' min ikun infettat) għandhom jibqgħu jattendu l-iskola normali. Madanakollu l-ġenituri m'għandhomx jibagħtu t-tfal l-iskola jekk dawn ikunu ma jifilħux, u għandhom jieħdu parir mingħand it-tabib tagħhom, u jiġbdulu l-attenzjoni li kien hemm każ ta' l-iskarlatina go l-iskola. Nirrakkomandaw li tfal li jkollhom l-iskarlatina jinżammu d-dar għal ħamest ijiem wara li dawn ikunu bdew l-antibijotiċi, li ġeneralment jingħataw għal għaxart ijiem, li bihom jgħaddi kollox fi zmien ftit ijiem.



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Raxx tipiku tal-iskarlatina

**TOQGHODX TINKWIETA!** Jekk għandek xi diffikulta ħu parir mingħand it-tabib tiegħek. Għal aktar informazzjoni tista' ċċempel lill-*Infectious Disease Prevention Control Unit* fuq 21332235, 23266146, 23266111 mit-Tnejn sal-Ġimgħa bejn it-tmienja ta' filgħodu u t-tlieta ta' wara nofsinhar.

<http://www.gov.mt/frame.asp?l=1&url=http://www.health.gov.mt/dsu>

