



FACT SHEET: GROUP A STREPTOCOCCAL DISEASE

Group A streptococcus (GAS) is a naturally occurring bacteria found in many people's throats or on their skin. It causes many common infections including "strep throat," tonsillitis, scarlet fever (a collection of symptoms including sore throat, fever, rash and a "strawberry tongue"), and impetigo (a skin infection).

Group A streptococcus (GAS) can also be found in unusual places such as the blood, the fluid surrounding the brain and spinal cord (called cerebral spinal fluid), the lining of the muscles, or in the joints. GAS found in unusual places is called "invasive disease."

Invasive disease can result in severe invasive GAS infections such as:

- Necrotizing fasciitis ("flesh eating disease"), an infection that can destroy skin, fat, and the tissue covering the muscles within a very short time;
- Myositis, an infection of the muscles;
- Meningitis, an infection of the lining of the brain and spinal cord; or
- Streptococcal toxic shock syndrome (STSS), collapse of several systems in the body including the liver and kidneys.

HOW IS GAS SPREAD?

Approximately 10 to 15% of people carry GAS in their throat without experiencing symptoms. The bacteria are spread when the nose or throat secretions (mucous) of a person with GAS come into contact with the nose or mouth of a susceptible person. Sharing food or objects that may be contaminated with another person's nose or throat secretions should be avoided at all times.

The bacteria may also be spread when a person comes into direct contact with infected lesions on the skin; for example, by touching a wound or by sharing contaminated needles. GAS is not spread through the air and infected persons are generally not contagious after 24 hours of treatment with appropriate antibiotics.

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WHAT ARE THE SIGNS AND SYMPTOMS?

The symptoms of invasive GAS disease depend on the type of infection. They may include the following:

- Necrotizing fasciitis or myositis: fever, severe pain, swelling and/or redness of the muscles or soft tissue;
- Meningitis: fever, severe pain on movement of the neck, nausea and/or vomiting; or
- Streptococcal toxic shock syndrome: fever, a general feeling of unwellness, dizziness, confusion and/or a flat red rash on the body.

HOW CAN INVASIVE GAS INFECTION BE PREVENTED?

- **Hand hygiene**
Practice good hand hygiene by washing hands with soap and water, especially after sneezing or coughing and before preparing foods and eating. Alcohol-based hand sanitizers (that have >60% alcohol content) can be used when hands are not visibly soiled.
- **Protect yourself from chickenpox**
The risk of getting an infection is higher for people who are ill with chickenpox. Consider getting the Varicella vaccine if you have not had chickenpox in the past. The two-dose vaccine is publicly funded for children who are 15 months and 4-6 years of age; otherwise, a cost may be involved. Consult Southwestern Public Health for more information about the Varicella vaccine.

ADDITIONAL PREVENTION MEASURES

Antibiotics may be prescribed to **close contacts** of someone with a severe invasive GAS infection to prevent them from getting the infection. The risk period for acquiring the infection after exposure to an ill person is 7 days before their symptoms appear and up to 1 day after their treatment begins. Close contacts are those people who are likely to have been exposed to the nose or throat secretions or wound discharge of the sick person. They include:

- Those living in the same household;
- Those who share the same sleeping space or had sexual relations with the sick person;
- Those who have had direct contact with the sick person through mouth to mouth resuscitation, open mouth kissing, or touching an open skin lesion;
- Injection drug users who have shared needles with the sick person.

Classroom, daycare, workplace, and casual social contacts are generally not considered close contacts.

Antibiotics, if prescribed should be administered within 24 hours of case diagnosis and no later than 7 days after last contact with ill person. Close contacts of invasive GAS should seek immediate medical attention if they begin to feel unwell within 30 days after their last contact with the ill person.

REFERENCES

- Heymann DL. Control of Communicable Diseases Manual. 20th ed. Washington, DC: American Public Health Association; 2015.
- Ministry of Health and Long Term Care. Group A Streptococcal disease, invasive. Infectious Diseases Protocol; 2013.
- Public Health Agency of Canada. Supplement: Guidelines for the Prevention and Control of Invasive Group A Streptococcal Disease. CDR 2006;32S2:1-26

MORE INFORMATION



Southwestern Public Health

St. Thomas Site

519-631-9900

Woodstock Site

519-421-9901

1-800-922-0096 | www.swpublichealth.ca