

Group A Streptococcal Infections (Invasive)

What are Group A Streptococcal Infections?

Group A Streptococcal (GAS) infections are caused by bacteria that are commonly found on the skin or in the upper respiratory tract (nose and throat). The bacteria can cause a variety of common infections such as sore throat (strep throat), skin infections (impetigo and cellulitis), and scarlet fever. Sometimes the bacteria get into areas of the body where bacteria are not usually found, such as the blood, muscle, or the lungs. These infections are called “invasive” Group A Streptococcal Infections and are the most serious. Necrotising fasciitis (a severe infection where areas of soft tissue below the skin start to die) and Streptococcal Toxic Shock Syndrome (rapidly worsening symptoms from failure of many organs within the body) are two of the most severe but very rare types of the invasive disease.

What are the symptoms?

People may carry Group A Streptococci in the throat or on the skin and show no symptoms of illness. Early signs of non-invasive Group A Streptococcal infection may include sore throat, fever, rash or a skin infection that is red, swollen, warm and tender to the touch. The early signs and symptoms of invasive disease are high fever; severe pain, swelling and redness of the affected area; dizziness and confusion; widespread red rash; nausea, vomiting and abdominal pain. The development of symptoms is rapid in invasive disease.

How is Group A Streptococcal Infection spread?

These bacteria are spread from person to person through close personal contact with secretions from the nose or throat of infected person such as kissing or through contact with infected wounds or sores on the skin. Most people who come into contact with bacteria remain well or develop mild throat or skin infections. Contracting invasive Group A Streptococcal disease from a relative or household member is very rare.

How is Streptococcus Group A Beta-Hemolytic (Invasive) diagnosed?

Diagnosis is based on assessment of clinical symptoms by a health care provider and laboratory testing.

Who is at risk of Group A Streptococcal Infection (invasive)?

Invasive Group A Streptococcal infections occur when there are cuts or breaks in the skin allowing the bacteria to get into the tissue (includes injection drug users or recent chickenpox infection), or when the person is unable to fight off the infection because of a chronic disease or an illness that affects the immune system.

How can Group A Streptococcal Infection (invasive) be prevented?

Always wash minor cuts well in warm, soapy water and keep it clean and dry with a bandage to reduce the chance of infection. Seek medical attention as soon as symptoms occur. Antibiotics are recommended for close contacts (person living in the same household) of a person who recently had Invasive Streptococcus Group A disease.

How is Group A Streptococcal Infection treated?

All Group A Streptococcal infections may be treated with antibiotics. If you have symptoms, consult your health care provider for advice and treatment. Early treatment improves the outcome of invasive disease.

What is the Public Health response?

Health-care providers, hospitals and laboratories, schools and childcare centres are required to notify cases to Public Health. Public Health staff may investigate to find out how the infection occurred, identify other people who may be at risk of infection, provide advice as necessary and assess the need for preventive antibiotics.

Further Information

Please contact your health-care provider, local Public Health office or Tele-Care 811.