



All things are possible if you believe

Mark 9:23

Mottram Church of England Primary School

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Dear Parent/Carer

We have been informed that a number of children who attend Mottram Primary School have been diagnosed with scarlet fever and/or chickenpox.

Chickenpox

Chickenpox is a mild and common childhood illness that most children catch at some point. It causes a rash of red, itchy spots that turn into fluid-filled blisters. They then crust over to form scabs, which eventually drop off. To prevent spreading the infection, keep children off nursery or school until all the spots have crusted over, this is usually 5 days after the spots first appeared.

For most children, chickenpox is a mild illness that gets better on its own. But some children can become more seriously ill and need to see a doctor. Contact your GP straight away if your child develops any abnormal symptoms, for example:

- if the blisters on their skin become infected
- if your child has a pain in their chest or has difficulty breathing

Scarlet fever

Scarlet fever is also a mild childhood illness but unlike chickenpox, it requires antibiotic treatment. Symptoms include a sore throat, headache, fever, nausea and vomiting, followed by a fine red rash which typically first appears on the chest and stomach, rapidly spreading to other parts of the body. On more darkly-pigmented skin, the scarlet rash may be harder to spot, but it should feel like 'sandpaper'. The face can be flushed red but pale around the mouth. As the rash fades the skin on the fingertips, toes and groin area can peel.

If you think you, or your child, have scarlet fever:

- See your GP or contact NHS 111 as soon as possible
- Make sure that you/your child takes the full course of any antibiotics prescribed by the doctor.
- Stay at home, away school for at least 24 hours after starting the antibiotic treatment, to avoid spreading the infection





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Complications

Children who have had chickenpox recently are more likely to develop more serious infection during an outbreak of scarlet fever and so parents should remain vigilant for symptoms such as a persistent high fever, cellulitis (skin infection) and arthritis. If you are concerned for any reason, please seek medical assistance immediately. If your child has an underlying condition which affects their immune system, you should contact your GP or hospital doctor to discuss whether any additional measures are needed.

You can find more information on chickenpox and scarlet fever on the NHS Choices website at <http://www.nhs.uk/conditions/Scarlet-fever>

Scarlet fever

Scarlet fever is a bacterial illness that causes a distinctive pink-red rash. It is usually mild.

The characteristic symptom of scarlet fever is a widespread, fine pink-red rash that feels like sandpaper to touch. It may start in one area, but soon spreads to many parts of the body, such as the ears, neck and chest. The rash may be itchy. Other symptoms include a high temperature, a flushed face and a red, swollen tongue.

Symptoms of scarlet fever usually develop two to five days after infection, although you will be contagious before showing signs of the illness. Read more about the symptoms of scarlet fever.

Scarlet fever is also known as scarlatina, although this often refers to a milder form of the disease.

It usually follows a sore throat, or a skin infection (impetigo) caused by particular strains of streptococcus bacteria.





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When to seek medical advice

See your GP as soon as possible if you suspect you or your child has scarlet fever. Your GP can usually diagnose scarlet fever by looking at the characteristic rash and other symptoms, although a sample of saliva will need to be taken from the back of the throat (throat swab) and tested in a laboratory to confirm the diagnosis.

There is no evidence that catching scarlet fever when pregnant will put your baby at risk. However, heavily pregnant women should tell healthcare staff if they have been in contact with someone who has scarlet fever.

How it spreads

Scarlet fever is extremely contagious and can be caught by:

- breathing in bacteria in airborne droplets from an infected person's coughs and sneezes
- touching the skin of a person with a streptococcal skin infection
- sharing contaminated towels, baths, clothes or bed linen

It can also be caught from carriers - people who have the bacteria in their throat or on their skin but do not show any symptoms.

Who is affected

Anybody can catch scarlet fever, but it usually affects children aged two to eight years old. As it is so contagious, scarlet fever is likely to affect someone in close contact with a person with a sore throat or skin infection caused by streptococcus bacteria.

Between 2,000 and 4,000 cases of scarlet fever are diagnosed each year in England.

You will only develop the symptoms of scarlet fever if you are susceptible to toxins produced by the streptococcus bacteria. Most children over 10 will have developed immunity to the toxins from streptococcal bacteria.

It is possible to catch scarlet fever more than once, although this is rare.





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How it is treated

Scarlet fever used to be a very serious disease, but most cases today are mild. This is because scarlet fever can easily be treated with antibiotic tablets. These must be taken for 10 days, even though most people recover after four to five days. With proper treatment, further problems are very unlikely. However, there is a small risk of the infection spreading to other parts of the body, such as the ear, sinuses and lungs.

Preventing it from spreading

If your child has scarlet fever, do not let them go to school and keep them away from other people until they have been on a course of antibiotics for at least 24 hours. All tissues and cloths that someone with scarlet fever has coughed or sneezed into should be washed or disposed of immediately. Wash your hands thoroughly with soap and water if you have touched any of these. Avoid sharing contaminated eating utensils, cups and glasses, clothes, baths, bed linen or towels

