

PATIENT INFORMATION · PAEDIATRICS

Scarlet fever and Strep A

one of the childhood rashes that always needs antibiotics

Scarlet fever is caused by group A streptococcus, the same bacterium behind most bacterial sore throats. Unlike the viral rashes of childhood, it needs a full course of antibiotics — both to shorten the illness and to prevent complications that were once common and are now rare precisely because we treat it.

Call 999 or go to an emergency department if a child

- is **breathing very fast, or working hard to breathe**
- has **severe muscle aches or pain out of proportion** to what you can see
- is **very drowsy, floppy, confused or difficult to rouse**
- has **cold hands and feet with mottled or blue skin**
- has **not passed urine for 12 hours**, or has no tears when crying
- has an area of skin that is **rapidly becoming red, hot and severely painful**

Invasive group A strep is rare but serious and can develop quickly, sometimes after chickenpox or a minor skin injury. Trust your judgement about how unwell a child looks rather than the rash itself. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

Recognising scarlet fever

- **Sore throat and fever** first, often with headache, vomiting and abdominal pain
- A **fine pink-red rash appearing 12 to 48 hours later**, typically starting on the chest and abdomen and spreading. It feels like **sandpaper** to the touch — the texture is more reliable than the colour, particularly on darker skin
- **Flushed cheeks with a pale ring around the mouth**
- A **white coating on the tongue that peels to leave it red and bumpy** — strawberry tongue
- The rash is more intense in skin creases, at the elbows, armpits and groin
- Skin peeling from the fingertips, toes and groin in the weeks afterwards

Treatment

- **A ten-day course of antibiotics**, usually penicillin. The full course matters even though the child feels better within a day or two — the point of the last days is preventing complications, not treating symptoms.
- Paracetamol or ibuprofen for fever and throat pain.
- Plenty of cool drinks; soft food if swallowing hurts.
- Calamine or an antihistamine if the rash is itchy.
- Keep fingernails short to limit scratching.

Do not give ibuprofen if there is chickenpox as well

Anti-inflammatory medicines during chickenpox are associated with severe streptococcal skin and soft tissue infection. Strep A infection following chickenpox is a recognised and dangerous combination. If your child has chickenpox and develops a fever that returns, or an area of skin that becomes red, hot and very painful, seek help urgently and use paracetamol only.

School, nursery and spread

24 hours

off school after starting antibiotics

2-5 days

incubation from exposure

Notifiable

we report cases to public health

- Children can return **24 hours after starting antibiotics**, provided they are well enough.
- Without antibiotics, someone remains infectious for two to three weeks.
- Wash hands frequently, bin used tissues, and do not share cups, cutlery or towels.
- Scarlet fever is a notifiable disease — we are required to inform public health, which is how outbreaks in schools are identified and managed.
- Tell the school or nursery, particularly if other children have sore throats.

Why the full course matters

Untreated streptococcal infection can be followed by rheumatic fever, affecting the heart valves, and by a kidney condition called glomerulonephritis. Both are now uncommon in the UK, and that is a direct consequence of treating streptococcal infection properly. It is also why a child who cannot tolerate the medicine, or vomits it repeatedly, should be reviewed rather than left to see how it goes.

Book an appointment if your child has a sore throat with a rash, is not improving after 48 hours on antibiotics, develops a fever that returns after settling, or you would like a throat swab. We see children seven days a week and can swab and treat in a single visit.

Throat swabs and same-day treatment

Children seen seven days a week, 9am–7pm, on Whitechapel Road.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London

97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**

info@mhwclinic.co.uk

Open 7 days, 9am–7pm

In an emergency

Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency

Call NHS 111 or visit 111.nhs.uk.

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This leaflet is based on current NHS, NICE and UKHSA guidance on scarlet fever and group A streptococcal infection. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.

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