

Invasive Group A Strep – At-a-Glance

Definition	Group A Streptococcus (GAS) is a bacterium which can colonise the throat, skin and genital tract. It is a common cause of tonsillitis and impetigo. More rarely GAS producing endotoxin causes Scarlet fever resulting in a typical ‘sandpaper’ rash and mucocutaneous changes, particularly in children under 10. <u>Invasive GAS (iGAS)</u> is an infection where the bacteria is isolated from a normally sterile body site, such as the blood. Clinical presentation of iGAS may vary between cases and can be associated with development of streptococcal toxic shock syndrome, meningitis and necrotising fasciitis, as well as respiratory infection
Management	Patient with a high clinical suspicion or proven iGAS infection should be isolated and antibiotic therapy should be commenced. <u>Contact precautions</u> to be used. Hand Hygiene is crucial to reduce risk of transmission. • Use the Trust Contact Precautions isolation sign (see IPC intranet for guidance) • Use Hand Hygiene as per the WHO Five Moments • Aprons and gloves to be worn by all staff at all times. (Relatives and visitors do not need to wear gloves and aprons but be asked to wash their hands before leaving the room and not visit patient areas). • Linen should be placed in a red alginate bag and then in a white bag prior to removing from the patient’s room. • Inform the patient of their infectious status and explain why they are isolated • Ensure receiving area are aware of infectious status • Washing and/or dressing of the deceased should be avoided and a body bag should be used. If respiratory symptoms are present then Droplet precautions and signage are to be used. A surgical mask to be worn for routine care and FFP3/hood for aerosol generating procedures (AGP’s) see (National Infection Prevention and Control manual, 2022) list of AGP’s.
Cleaning	Dedicated equipment or single use equipment for their use. Clean re-usable equipment with green Clinell wipes. Enhanced clean of the room daily requested through help desk A terminal clean of the room is required when the patient is discharged from the room.

Stop isolation when?	Patient can be removed from isolation <u>after completing 24hours of appropriate antibiotic therapy</u> For further information or advice please contact Infection Prevention & Control on Bleep 1747 or out of hours contact Microbiology via Switchboard.
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Infection Prevention & Control Service
December 2022 SW