

ACUTE RHEUMATIC FEVER

Acute rheumatic fever (ARF) can affect the heart, joints, brain, and skin. Acute rheumatic fever can develop if skin or throat infections are not treated properly.

Q What is acute rheumatic fever? How do you get it?

A Rheumatic fever develops in some people when they get an infection with a bacteria called *Group A Streptococcus*. This bacteria can cause a delayed immune response, causing a reaction in their joints, heart and brain and this is what we call acute rheumatic fever.

Q Where does this germ come from?

A The *Group A Streptococcus* germ spreads from person to person through contact with the tiny respiratory droplets produced by a person with *Group A Strep* sore throat. These respiratory droplets are spread when an infected person talks, coughs or breathes. It also spreads person-to-person by contact with infected skin sores. It rarely spreads from animals, or from water.

Q How does a person know if they have acute rheumatic fever?

A It is difficult to know if a person has acute rheumatic fever. See a doctor promptly if you have any of these symptoms:

- Fever
- Painful, swollen joints (one or more joints)
- Feeling tired and fatigued
- Involuntary twitches or movements
- A raised skin rash
- Lumps under the skin
- Heart problems such as a racing heart, breathlessness, or chest pain.

Q How is acute rheumatic fever diagnosed?

A It is important to diagnose and treat a case of acute rheumatic fever early. At the hospital or clinic your doctor or nurse will:

- Ask about your symptoms and history of past acute rheumatic fever, sore throat and skin sores
- Examine for signs of these conditions
- Take a throat swab
- Do blood tests
- Take a chest x-ray
- Check how your heart is working, with an ECG
- Refer for further heart scans (echocardiogram).

Q Does everyone who gets the bacterial infection get rheumatic fever?

A No, only some people will develop an immune reaction that makes them develop acute rheumatic fever.

Q Can you treat acute rheumatic fever?

A The treatment for acute rheumatic fever involves management of symptoms and prevention of recurrent episodes. Antibiotics will be given to prevent recurrent episodes of *Group A Strep* infections. Paracetamol and ibuprofen may be given to treat joint pain.

Q Why do people with acute rheumatic fever need antibiotics for such a long time?

A When a person has had acute rheumatic fever, they are more susceptible (at risk) of developing acute rheumatic fever again. The antibiotic injections (LA Bicillin®) will protect them from getting infections with *Group A Strep* and will therefore prevent them from getting acute rheumatic fever.

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Q At what age do people usually get acute rheumatic fever?

A It is most common in children and young adults between 5 and 14 years.

Q What do I do if I think that I or someone else has rheumatic fever?

A If you think that you or someone else may have acute rheumatic fever, it is important that you see a doctor. Ask your doctor if you have acute rheumatic fever so that you can receive treatment.

Q If I have had acute rheumatic fever before, can I get it again?

A Yes. If you have had acute rheumatic fever before, it is possible to get it again. If you get infected with the germ again, it can trigger another episode of acute rheumatic fever. With every episode of acute rheumatic fever there is a risk of damaging the heart and worsening previous heart damage.

Q Can non-Indigenous people get rheumatic fever?

A Yes, people from all backgrounds can get acute rheumatic fever. Historically, rheumatic fever used to be common in all populations in Australia. It has become less common as socio-economic conditions improved and people had better access to medical care and treatment for infections.

Q Why do more Aboriginal and Torres Strait Islander communities get acute rheumatic fever and rheumatic heart disease?

A Most cases of acute rheumatic fever in Australia are seen in Aboriginal and Torres Strait Islander people who live in communities where there is social, cultural and economic inequity, over-crowding and barriers to accessing health care.

Q Is there anything my family and household can do together to prevent us getting sick from acute rheumatic fever?

A The most important thing is to avoid the germ that can cause rheumatic fever. You can limit your risks by:

- Washing hands to avoid spreading illness in your household
- Seeing a doctor whenever you have a sore throat or skin sores so that you can receive treatment
- Ensuring you have working taps and hot water at home.

Q What are the risk factors for acute rheumatic fever?

A Your risk of getting acute rheumatic fever is higher if you have:

- An overcrowded household
- Individual risk factors for *Group A Strep* throat to develop into acute rheumatic fever
- Recurring *Group A Strep* throat infections (in children).

Q Can I lead a healthy life if I have acute rheumatic fever?

A With prompt diagnosis and treatment many people with acute rheumatic fever can lead a healthy life.

FOR MORE INFORMATION

Contact the Darling Downs Health Public Health Unit on 07 4699 8240.



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