



7 December 2022

## **MESSAGE FOR PARENTS FROM PROFESSOR MATTHEW ASHTON, DIRECTOR OF PUBLIC HEALTH**

We are seeing lots of children with winter infections. This message is to give you information about how to protect your child from common winter infections, and when you should seek medical attention. To prevent your child picking up or spreading infection, please encourage your child to wash their hands properly with soap for 20 seconds and use a tissue to cover coughs and sneezes. Clean and cover cuts and scrapes to prevent infections getting into the body. Make sure your child gets their flu vaccination as flu can make children poorly and more likely to get other infections.

The vast majority of coughs, colds and sore throats are caused by viruses, and children usually get better without any medical treatment. Often when a child has a sore throat caused by a virus they have a runny nose, cough and sometimes earache too. You can give plenty fluids and paracetamol to help your child feel better. They may find it easier to swallow soft foods. Antibiotics do not work on viruses.

You may have heard on the news that some children are becoming poorly with bacteria called Group A Strep. These infections are usually mild and may cause a strep throat or scarlet fever which can be treated easily with antibiotics. There is more scarlet fever than usual at the moment – but most sore throats are not scarlet fever.

Watch out for the signs of scarlet fever. This is when children get a combination of a sore throat, with fever, headache and a rough rash on the body which feels like sandpaper. If you see this combination of signs in your child, contact NHS 111 or your GP as your child may need antibiotics. If your child has scarlet fever, keep them at home until at least 24 hours after the start of antibiotic treatment to avoid spreading the infection to others. It spreads very easily through coughing and sneezing.

Rarely some children get more severe infections because the bacteria get into the lungs or into the blood stream (called “invasive GAS” or iGAS). Sadly, a small number of children in the UK have died from this.

**If you feel that your child seems seriously unwell, you should trust your judgement.**

Contact NHS 111 or your GP if your child is getting worse despite paracetamol or ibuprofen if:

- the temperature has lasted more than 5 days
- your child is feeding or eating much less than normal, especially if they are drooling or appear in pain when swallowing
- your baby has had a dry nappy for 12 hours or more, or is crying without tears
- or your child shows other signs of dehydration
  - feeling thirsty
  - dark yellow, strong-smelling pee
  - peeing less often than usual
  - feeling dizzy or lightheaded
  - feeling tired
  - a dry mouth, lips and tongue
  - sunken eyes (dark circles under eyes)
- your baby is under 3 months and has a temperature of 38°C, or is older than 3 months and has a temperature of 39°C or higher
- your baby feels hotter than usual when you touch their back or chest, or feels sweaty  
your child is drowsy (much more sleepy than normal) or irritable (unable to settle them with cuddles, toys, TV or snacks – especially if they remain drowsy or irritable despite any fever coming down)

Call 999 or go to A&E if:

- your child is having difficulty breathing – you may notice grunting noises or their tummy sucking under their ribs or using their neck muscles to breathe
- there are long pauses (more than 10 seconds) when your child breathes
- your child's skin, tongue or lips are blue
- your child feels very cold or clammy to touch
- your child is difficult to wake up or keep awake
- your child has severe pains in their arms, legs neck or back
- your child has a painful, red area of skin, especially if it is getting bigger quickly

*Professor Matthew Ashton*

Director of Public Health, Liverpool