



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

Group A Streptococcal Infection v3

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Patient Information

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What is Group A Streptococcus?

Group A Streptococcus (GAS) is a bacterium that is commonly found in the throat and on the skin. In some cases, a person may carry it without any symptoms of illness; this is known as being colonised. In other cases, the germ can cause illness; this is known as being infected. Most people who come into contact with GAS remain well and symptom-free or may develop mild throat or skin infections.

How does it spread?

The bacterium may be spread from one person to another through close contact, such as sneezing, kissing and skin contact. It can also be spread via hands which have had contact with an infected person or their equipment.

Who is at risk of GAS infections?

Anyone can become infected with GAS. However, people with long-term illnesses such as cancer, diabetes, and kidney disease, and those who use medications such as steroids, are at higher risk of invasive GAS disease. Breaks in the skin, such as surgical wounds or cuts, can also provide an opportunity for the bacterium to enter the body and cause infection.

What kinds of infections are caused by GAS?

Most GAS infections are relatively mild illnesses, such as sore throat (otherwise known as 'strep throat'), impetigo (a crusted skin infection, usually around the mouth, that often affects children) and cellulitis (an infection causing redness of the skin). Most cases of throat infection will pass without the need for treatment, and skin infections may require a short course of antibiotics.

On rare occasions, GAS can cause severe diseases called invasive GAS disease.

What is invasive GAS disease?

Invasive GAS disease occurs when the bacterium enters parts of the body where it is not usually found, such as the blood, muscle, or lungs. Two of the most severe, but rare, forms of invasive GAS disease are Necrotising Fasciitis (a deep tissue infection with tissue destruction requiring surgery) and Streptococcal Toxic Shock Syndrome (an illness with some of the following: high fever, low blood pressure, body rash, diarrhoea and vomiting, difficulty breathing, kidney or liver damage and blood clotting problems).

Why does invasive GAS disease occur?

Invasive GAS infection occurs when the bacterium breaches the body's natural defences. This may occur when sores or other breaks in the skin allow the GAS bacteria to get into the bloodstream and deep tissue, or when a person's ability to fight off infection is decreased because of long-term illness or an illness that affects the immune system. Some types (called 'strains') of GAS are more likely to cause severe disease than others.

I have been told I have GAS disease - what will happen to me now and how will it be treated?

Depending on where the GAS infection has been identified and how severe the symptoms are, you will be given antibiotics to treat the infection. Very occasionally, immunoglobulin (antibodies that will help you fight the infection, obtained from blood donors) may be given.

To prevent the spread of infection to other patients, it will be necessary to care for you in a single room and not in a shared patient bay for a minimum of 24-hours . However, if the infection is more severe, it may be necessary for you to remain in a single room for a longer period.

Hospital workers caring for you will wear disposable gloves, aprons and on occasion a mask when in contact with you. The protective clothing worn will depend on your site of infection and the task being undertaken.

To help prevent GAS infection spreading to others, it is very important that you wash your hands frequently with soap and water, or use the alcohol hand rub. If you have a GAS throat infection, it is important that you cough/sneeze into disposable tissues, dispose of them promptly, followed by hand-washing or using the alcohol hand rub.

Are my relatives, visitors, household contacts at risk of getting GAS disease from me?

Most people in close contact with GAS remain well and symptom free, though some develop a sore throat or mild skin infections. Although healthy people can get invasive GAS disease from a relative or a member of their household with GAS, it is very rare.

If your visitors are helping with your care activities, they may be required to wear disposable aprons or gloves and should discuss with nursing staff if this is necessary. It is very important that visitors and carers wash their hands or use the alcohol hand rub frequently, especially when leaving your room.

Other important times for them to wash their hands or use the hand rub are: on entering and exiting the ward/department, before eating and drinking, after going to the toilet, and before and after helping you with personal care activities.

How would they know if they have developed the infection?

The early signs and symptoms of invasive GAS disease may include:

- High fever

- Severe muscle aches
- Pain in one area of the body
- Redness at the site of a wound
- Vomiting or diarrhoea

What should they do if they develop any of these symptoms?

Contact their GP or seek medical advice urgently. Advise the GP they have been in contact with a person recently diagnosed with invasive GAS disease and have developed symptoms that are causing concern. It is likely that the GP will request to see them in the surgery. If they are too unwell to visit the surgery or it is closed, they should not delay seeking medical advice. It would be advisable to contact the out of hours GP service, or call the NHS 111 service for further assessment.

Remember, most people who come into contact with GAS remain well and symptom-free or may develop mild throat or skin infections.

Contracting invasive GAS disease from a relative or household member is very rare.

If you have any further questions, speak to the ward staff, or ask them to contact the hospital Infection Prevention and Control Team.



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