



Invasive Group A Streptococcal Infections (iGAS) Facts



What is invasive group A streptococcal infection (iGAS)?

Group A streptococci are bacteria. You can have this bacteria in your throat or on your skin and be healthy with no symptoms of disease. This germ usually causes relatively mild infections such as strep throat, wound infections and scarlet fever. Rarely, this germ can cause serious illness such as necrotizing fasciitis (flesh eating disease) and streptococcal toxic shock syndrome. Necrotizing fasciitis is an infection that destroys fat or muscle tissue. Streptococcal toxic shock syndrome is an infection that damages organs like your kidneys, liver and lungs. When the infection is this serious, it is called invasive group A streptococcal disease (iGAS).

How is iGAS spread?

Invasive group A streptococcal disease can be spread from an infected person from about a week before they show symptoms until about 24 hours after they start treatment. It can be spread by droplets when an infected person coughs or sneezes and from the discharge in wounds or breaks in the skin of an infected person. Any activities in which these body fluids from an infected person are passed to

another person can cause infection, including mouth-to-mouth resuscitation, open mouth kissing, sexual intercourse or sharing needles.

What are the symptoms of iGAS?

Some of the symptoms of iGAS are fever, rapid breathing, bad muscle pain or aches, swelling that increases rapidly, chills, sore throat, dizziness, confusion, a rash over the body or abdominal pain. Sometimes a swab of the infected area or a blood test will be taken to see if iGAS is present. Your healthcare provider will decide what tests are required based on your symptoms.

Who is most at risk of iGAS disease?

Few people who come in contact with group A streptococcus will develop invasive disease (iGAS); most will have a routine throat or skin infection and some may have no symptoms at all. Although healthy people can get invasive GAS disease, people with chronic illnesses like cancer and diabetes, or who are on kidney dialysis, and those who use medications such as steroids, are at higher risk.

Also, breaks in the skin, like cuts, surgical wounds or chickenpox, may provide a way for the bacteria to enter the body. The risk of a person with iGAS spreading it to people who are casual contacts is very small.

How is iGAS treated?

When someone is sick with invasive group A streptococcal disease they need hospital care. The treatment will include antibiotics.

How can I reduce the risk of iGAS?

You can stop the spread of iGAS by washing your hands after coughing or sneezing, before preparing foods and before eating. If you have a sore throat, see your doctor to find out if you have “strep throat”. Wash any wounds and if they become red, draining or become sore and you have a fever, see your doctor. If someone close to you is diagnosed with either necrotizing fasciitis or streptococcal toxic shock syndrome, you might need to take antibiotics to prevent you from getting sick.

Adapted from: Simcoe-Muskoka Public Health Unit

