

## Rheumatic Fever - Acute



### What Is It?

This disease is a rare after-effect of the bacterial throat infection commonly known as "strep throat" (streptococcal pharyngitis). It occurs in patients that are not treated with antibiotics or are only partially treated with antibiotics for their throat infection. Strep throat is caused by the bacteria known as Group A streptococcus. Less than one half of one percent of the people who experience strep throat develop Acute Rheumatic Fever.

Acute Rheumatic Fever has become rare in the more developed countries, though incidents have increased in recent years, perhaps because of the development of more resistant strains of streptococcus.

This disease is most common in children between the ages of 5 and 15. It is uncommon in adults, and rare in children under the age of 4.

### What Are Its Effects?

This disease begins with a throat infection caused by Group A streptococcus. It usually takes from 1 to 5 weeks (average is 19 days) after the strep symptoms have gone for Acute Rheumatic Fever to appear. Symptoms can persist for months and may reoccur at a later time if strep throat reoccurs.

The symptoms of Acute Rheumatic Fever include high fever, carditis (inflammation of the heart or its linings), polyarthritis (arthritis that affects more than one of the body's joints), and rashes (erythema marginatum). In addition, involuntary movements in the face, hands, or feet (known as chorea) may begin to occur some months after the acute phase of the disease has passed.

The most potentially serious affect of Acute Rheumatic Fever is the progressive damage it may cause to the heart, especially to the heart valves, and to other tissues in the body.

These affects may not become apparent until years after recovery from the disease and may worsen during each recurrence of symptoms.

### How Is It Treated?

Diagnosis of this disease is not straightforward. A recent strep throat infection and the presence of Acute Rheumatic Fever symptoms are the main indicators. The best way to avoid the disease is to

treat strep throat infections promptly, especially in the cases of children and people who live in crowded conditions.

Treatment of a patient with acute rheumatic fever starts with eradicating the streptococcus from the site of infection with appropriate antibiotics. The inflammation of Rheumatic Fever may be effectively treated with aspirin or other anti-inflammatory medications. In addition, steroids may be prescribed. Bed rest is recommended for the duration of the illness.

Individuals who have had an attack of rheumatic fever are at high risk for recurrence of the disease. Long-term treatment with antibiotics is aimed at preventing recurrences of rheumatic fever by preventing recurrent streptococcal infections. This is usually achieved with daily oral penicillin or monthly shots of penicillin.

Because of the risk of damage to the heart's valves, which may not become evident until years later, it is important to undergo regular medical examinations. The highest risk of occurrence is during the first 5 years after the initial infection.

If there has been damage to the heart valves, the lifelong taking of antibiotics may be necessary, with additional antibiotics (antibiotic prophylaxis) before invasive medical or dental procedures.