

## Invasive Group A *Streptococcal* (IGAS) Infection

### What is IGAS Infection?

Invasive Group A streptococcal (IGAS) infection is caused by the Gram-positive coccus bacteria, *S. pyogenes*. Certain *S. pyogenes* strains cause severe outcomes such as streptococcal toxic shock syndrome, necrotizing fasciitis, and meningitis. More common illnesses resulting from Group A *Streptococcal* infection includes strep throat, skin infections, ear and sinus infections and infections in the lymph glands.

### What are the symptoms of IGAS infection?

**Toxic shock syndrome (TSS):** rare and severe IGAS infection outcome. Symptoms include fever & redness of skin, shock, diarrhea, vomiting, and severe muscle pain. The bacteria produce toxins which targets body organs, resulting in TSS. 1 in 20 cases of IGAS results in TSS in BC. Children, older adults, those with chickenpox, diabetes, chronic heart or lung disease, dependent on alcohol or illicit drug use are more at risk.

**Necrotizing Fasciitis:** also known as flesh-eating disease. Death can occur within 18 hours as the bacteria spreads readily through the flesh surrounding muscles. The original infection site may be a minor wound or injury such as a small cut, insect bite or bruise.

### How is IGAS spread?

IGAS is spread when there is contact of the oral/nasal mucous membranes with infectious respiratory droplet secretions or exudates from wounds/skin lesions. Direct/indirect contact of non-intact skin to exudates from skin/wound or infectious respiratory secretions also leads to transmission. Transmission via contaminated equipment or patient care products has been rarely reported.

### When is a person infectious?

The infected individual is contagious for 10 to 21 days if untreated. Transmissibility ends within 24 hours of appropriate antibiotic therapy.

### How do I know if I am immune?

Prevention for IGAS infection includes

- Good hand hygiene
- Do not share straws, cups, bottles, forks, spoons, cigarettes or anything with saliva on it
- Cough or sneeze into your elbow/sleeve, or use a tissue followed by hand hygiene
- Keep all wounds clean and watch for redness, swelling, fever or increasing pain/drainage at wound site
- Get the chickenpox vaccine if you are not already protected
- If symptoms occur, get treated early

### When is an employee exposed?

- As per the WHCC, the MHO will determine the exposure criteria on a case by case basis when there is a suspected or confirmed IGAS exposure.
- WHCC will notify Operations Leader (OL) of exposure criteria and the OL will advise staff.
- Staff who potentially meets the exposure criteria, will be asked to contact the WHCC OHN to report their involvement and receive recommendations.
- Please always wear PPE if there is suspected or confirmed IGAS cases

## **What happens if an employee is exposed?**

Exposed employees need to contact the Workplace Health Call Centre Occupational Health Nurse (WHCC OHN) at 1-866-922-9464. The WHCC OHN will recommend post exposure follow up.

## **What happens if an employee has IGAS?**

Infected employees must stay away from work and see their doctor as soon as possible for confirmation of the disease and treatment. Employees will be excluded from work until 24 hours of effective antibiotic therapy is completed.

## **Manager/Supervisor Responsibilities:**

Suspected Outbreak or staff exposure from patient: consult with Infection Control. Infection Control will confirm diagnosis, notify and collaborate with the Workplace Health Call Centre Occupational Health Nurse (WHCC OHN). No additional action required until confirmation of disease.

Confirmed Outbreak/Staff exposure: Infection Control will inform the WHCC OHN of the confirmed disease exposure. The WHCC OHN will send out an exposure notification memo to the manager.

Please advise all staff members to review the information above. Infected employees or employees that meet the exposure criteria are to contact the WHCC OHN at 1-866-922-9464.

## **Employee Responsibilities:**

Infected or exposed employee: contact the WHCC OHN at 1-866-922-9464 and review the information above.

## **Additional Information/References:**

- BC Centre for Disease Control. [Invasive Group A Streptococcal Disease](#). Sept 2017. Retrieved Feb 28, 2018.
- Canada Communicable Disease Report. [Prevention & Control of Occupational Infections in Health Care](#). March 2002. Retrieved on Feb 28, 2018
- Fraser Health Authority Intranet (FHPulse). Workplace Health. [IGAS \(Invasive Group A Streptococcal Disease\)](#) Retrieved Feb 28, 2018.
- HealthLinkBC Topic: [Group A Streptococcal Infections](#). March 2013. Retrieved on May 2, 2013.

This information is current as of Feb 28, 2018 and subject to change.