Children aged 5 to 15 years old (but RF and RHD can occur at any age)

People who suffer repeated strep throat infections

People living in certain indigenous communities

People who have immigrated from countries where rheumatic fever is more common

WHO’S AT RISK?

FROM SORE THROAT TO HEART FAILURE

A greater risk of rheumatic fever is associated with overcrowding, poor sanitation and other conditions that can easily result in the rapid transmission or multiple exposures to strep bacteria.

RHEUMATIC FEVER

Fever
Swollen, tender, red and painful joints
Past that migrates from one joint to another
Small bumps beneath the skin
Fatigue
Shortness of breath and chest discomfort
Flat or slightly raised rash, usually on the chest, back, and abdomen
Uncontrolled movements of arms, legs, or facial muscles

RHEUMATIC HEART DISEASE

Heart murmur
Chest pain
Breathlessness with physical activity or when lying down
Weakness and tiredness
Swelling of the legs and face

Symptoms of RHD may not be noticed for many years. When they do develop, symptoms depend on which heart valves are affected and the type and severity of the damage.

PREVENTION

- Prevent strep throat infections
- Treat infections with antibiotics (such as penicillin) to prevent rheumatic fever
- Prevent additional streptococcal infection
- Long-term antibiotics can reduce progression to more severe disease

TREATMENT

- Anti-inflammatory drugs may be used to reduce inflammation and lower the risk of heart damage
- Other medications may be needed to manage heart failure
- In severe cases, treatment may include surgery to replace or repair a badly damaged valve