

3 Household settings

3.1 Risk assessment

See [Chapter 2](#) for recommendations on risk assessment and identification of contacts.

3.2 Public health actions: Single case of invasive Group A Streptococcus (iGAS)

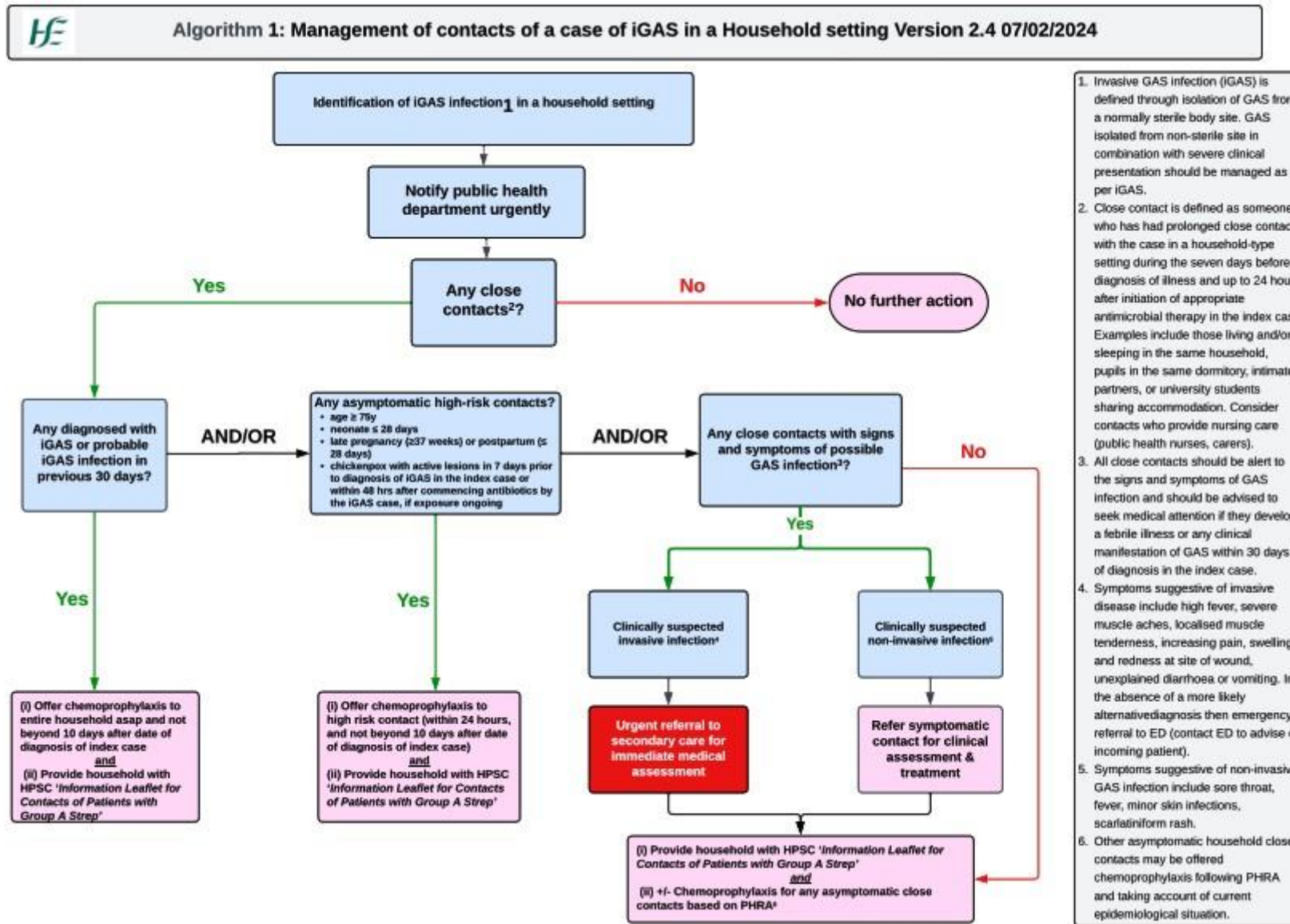
Transmission of Group A Streptococcus (GAS) within households is well documented (76-78) and the risk is highest in mother-neonate pairs and older couples (6, 46, 79). There is some limited evidence that clusters of iGAS cases are more likely to occur in households with higher numbers of occupants (46). Secondary attack rates in household contacts ranging from 800 to over 5000 per 100,000 person-years at risk have been observed in different countries (7).

3.3 Public health actions: Outbreak of iGAS in household setting

During household outbreaks of iGAS infection, advise chemoprophylaxis for all household members. As with all infectious diseases that are transmissible via droplet spread, emphasise hand and respiratory hygiene.

Recommendation 9: If 2 or more confirmed or probable iGAS cases are identified in the household, offer chemoprophylaxis to the entire household ASAP and not beyond 10 days after date of diagnosis of index case¹

Algorithm 1: Management of contacts of a case of iGAS in a household setting.



For the full reference list scan the QR code below:

