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Health Alert: Increase in cases of Acute Post-Streptococcal Glomerulonephritis (APSGN)

Since the beginning of the year, 28 cases of acute post-streptococcal glomerulonephritis (APSGN) have been notified to the Centre for Disease Control (CDC). In the past 2 weeks, **5 cases of APSGN** were notified from the Big Rivers, Barkly and Central Australia regions.

Historical data suggest that when 4 or more cases of APSGN occur anywhere in the Northern Territory in a 2 week period, APSGN disease is more likely to be occurring Territory-wide.

Actions for clinicians

Clinicians should be on heightened alert for Group A *Streptococcus* (GAS)-related conditions and provide prompt and appropriate investigation, treatment and referral for APSGN as per the <u>CARPA Manual</u> (See: Blood or protein in urine – Post-streptococcal glomerulonephritis).

Please contact your local CDC unit as soon as you suspect a case of APSGN.

APSGN is an immunological syndrome affecting the kidneys, driven by a Group A Streptococcal infection in the preceding weeks. GAS typically causes skin sores (impetigo) or sore throat ("strep throat"). APSGN most commonly affects children between 12 months and 17 years, but can occur at any age.

For children presenting with any of puffy face, skin sores or dark coloured urine, please check:

- weight (look for sudden increase)
- BP (high for age)
- urine (look for blood and protein)
- oedema (peripheral and/or facial)

All GAS throat and skin infections should be treated with appropriate antibiotics to prevent APSGN and other complications developing.

APSGN is a notifiable disease in NT. Contact tracing and prophylactic antibiotics for selected contacts are required for all probable and confirmed cases.

For more information, please refer to Acute post streptococcal glomerulonephritis (APSGN) | NT Health

Thank you for your assistance in diagnosing cases of APSGN and promoting healthy skin practices.

Yours sincerely,

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