



THE HEART
AND STROKE
FOUNDATION
SOUTH AFRICA



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The Heart and Stroke Foundation South Africa commemorates Rheumatic Fever Week

Rheumatic Fever (RF) week will be commemorated from the 3rd to 9th August and will be aimed at raising awareness about the harm RF can cause to young children and individuals. Rheumatic Fever Week is a week-long campaign to bring attention to RF as a serious autoimmune disease which affects various body parts of a child's body, including the joints, heart, skin, nervous system and the brain. It occurs when a child's immune system overreacts to an untreated strep throat.

RF affects up to 40 million people living in low-income countries and globally, claiming more than 300 000 lives each year. Sub-Saharan Africa remains the region with the highest prevalence of Rheumatic Heart Disease (RHD) in the world, causing about 18 000 deaths annually (Lancet Global Health, May 2021). The incidence of Acute Rheumatic Fever (ARF) is 8 to 51 per 100,000 people worldwide. RF however rarely occurs in countries with more resources available. RF mostly affects children, adolescents and pregnant women in low-and middle-income countries (LMIC's), especially where poverty is widespread and access to health services is limited.

What is Rheumatic Fever?

RF is an abnormal immune reaction to a common bacterium called Group A Streptococcus and is preceded two or three weeks earlier by a bacterial throat infection, commonly called 'strep throat'. Streptococcal infections are most common in childhood and it usually appears in children between the ages of 5 and 15. However, adults and young children can still contract the illness. In some people, repeated streptococcal infections cause the immune system to react against the tissues of the body including inflammation and scarring the heart valves. This is what is referred to as RF. RF patients typically experience a range of symptoms that can include joint pain, fever above 38°C, generally feeling unwell, shortness of breath, a skin rash, heart murmur, and on rare occasions, uncontrolled body movements. People who live in overcrowded and poor conditions, and those between the ages of 5 and 15 years are at greatest risk of developing the disease. Rheumatic Fever (RF) was made a notifiable condition in 1989 in South Africa, and the National Department of Health declared the first week of August as National Rheumatic Fever Week to highlight the need to implement proven interventions to reduce the incidence of Acute Rheumatic Fever (ARF) and the prevalence of Rheumatic Heart Disease (RHD) in a middle-

income country like South Africa. South Africa is also a country with the high levels of inequality despite being a middle-income one.

Cardiac involvement during ARF can result in RHD if left untreated. RHD results from the inflammation and scarring of heart valves caused by RF. Symptoms of heart valve damage that are associated with RHD may include chest pain or discomfort; swelling of the stomach, hands or feet; shortness of breath; fatigue and rapid or irregular heart beat. If RHD is left untreated, RHD will eventually lead to further heart valve damage, stroke, heart failure, and even premature death. The disease requires life-long medication, medical surveillance and often heart valve replacement surgery.

Significantly, however, RF can be completely prevented by the oldest antibiotic available, namely, penicillin. Key to this preventive step is an early diagnosis. While scientific advances and ongoing research are steps in the right direction, it takes time for findings to be put into practice. Continued prevention efforts at the community level are therefore very much recommended. These could be focussed on raising community awareness of Group A streptococcal throat infections and the link with RF and RHD. Likewise, improving living conditions, hygiene and access to primary health care should continue to be prioritized. Preventing subsequent streptococcal infections is crucial once RF has been diagnosed in a patient, as this may result in another episode of RF and more damage to the heart valves. The patient should be treated with antibiotics for an extended period of time in order to prevent further streptococcal infection.

Moreover, both advocates and those affected by RF and RHD need to mobilize and constructively work together to ensure the correct access to essential care for RF and RHD, particularly in the public sector.

Practical Ways to prevent infections:

Prevention in children:

- Parents, school teachers and other caregivers can make a difference by simply looking out for a sore throat and by educating children about what precautions to take. A sore throat in the absence of a cold or flu could possibly be a strep throat, which can cause RF
- A child with a sore throat and suspected strep throat should stay away from school to avoid spreading the infection to other children
- The child should be taken to the doctor or clinic if a strep throat is suspected
- Teach children good hygiene, including hand washing, to prevent the spread of germs.

Other key points in adults and children, are keeping the immune system strong, by:

- Consistent sleep (7-9 hours per night)
- Good hygiene such as hand washing
- Exercise (150 minutes of moderate-intensity per week)

- Eat healthy (including all food groups: unrefined starches, lean proteins, good fats and variety of fruits and vegetables)
- Avoid people who are sick
- Manage stress (stick to routines for children).

Moreover, the Heart and Stroke Foundation South Africa (HSFSA) has annually played an important role in disseminating information and knowledge regarding the relationship between RF and RHD. The Foundation conveys a consistently empowering message to parents and care-givers that RHD is to a large extent preventable.

Prof Pamela Naidoo, CEO of the Foundation states that “the organization plays an important role in education and knowledge dissemination for RF, RHD , as well heart disease in general.” She urges parents and care-givers to please take the responsibility to ensure that your child receives medical care, particularly for very high fever and a fever that does not settle”. Please contact the Foundation for more information and to also work with us to reduce the RHD burden. Do remember to make use of our health chat line which is ably run by our health professionals headed up by Juandre Watson and Shonisani Nephalama.

For media enquiries, please contact Themba Mzondi, PR and Communications Officer on 021 422 1586 / 078 113 5216 or email themba.mzondi@heartfoundation.co.za. Media engagements will be carried out by the CEO, Health Promotion Officers and Allied Health Care staff, such as Dietitians.

About the Heart and Stroke Foundation SA

The Heart and Stroke Foundation South Africa (HSFSA) plays a leading role in the fight against preventable heart disease and stroke, with the aim of seeing fewer people in South Africa suffer premature deaths and disabilities. The HSFSA, established in 1980 is a non-governmental, non-profit organization which relies on external funding to sustain the work it carries out.

The HSFSA aims to reduce the cardiovascular disease (CVD) burden in South Africa and ultimately on the health care system of South Africa. Our mission is to empower people in South Africa to adopt healthy lifestyles, make healthy choices easier, seek appropriate care and encourage prevention.

For more information visit www.heartfoundation.co.za. You can also find us on www.facebook.com/HeartStrokeSA and www.twitter.com/SAHeartStroke