

Notifications of Rheumatic Fever

HIGHLIGHTS:

- Rheumatic fever is a serious illness that occurs after a sore throat and may cause heart damage. Rheumatic fever most often affects Maori and Pacific children and young adults in New Zealand.
- In 2013, 194 cases of rheumatic fever initial attack were notified, an increase of 20% compared to 2012
- The age group 10-14 years had the highest rate of rheumatic fever initial attack from 2009 to 2013
- Notifications of rheumatic fever notifications have nearly tripled over the last decade.



Source: <http://www.stuff.co.nz/auckland/local-news/east-bays-courier/8509084/Rheumatic-fever-national-disgrace>

Rheumatic fever most often affects Maori and Pacific children and young adults in New Zealand

In New Zealand, rheumatic fever most often affects Māori and Pacific children and young adults, aged 4–19 years (Ministry of Health, 2014a). Factors such as living in overcrowded housing can increase the risk of developing rheumatic fever (Health Promotion Agency, n.d).

Rheumatic fever occurs after a ‘strep throat’ – a throat infection caused by a Group A Streptococcus (GAS) bacteria. Most strep throat gets better and doesn't lead to rheumatic fever. However, in a small number of cases, untreated strep throat develops into rheumatic fever. The patient’s heart, joints, brain and skin become inflamed and swollen.

While the symptoms of rheumatic fever may disappear on their own, the inflammation can cause rheumatic heart disease, where there is scarring of the heart valves. People with rheumatic heart disease may need heart valve replacement surgery, and it can cause premature death (Ministry of Health, 2014a).

A recurrent attack of rheumatic fever happens when a patient has history of the disease. The recurrences of rheumatic fever are likely in the absence of preventative measures and may cause further cardiac valve damage (The National Heart Foundation of New Zealand, 2007).

In 2013, 194 rheumatic fever initial attack cases were notified

In 2013, 194 rheumatic fever initial attack cases were notified in New Zealand, 84% were aged 5-19 years. Compared to 161 initial attack cases in 2012, there was a 20% increase in the 2013 notification. There has been an overall increase of 20% in rheumatic fever initial attack notifications since 2012, and increases of 10%, 28% and 19% in the age groups 5-9 year, 10-14 years and 15-19 years respectively (Table 1).

Table 1: Number of rheumatic fever initial attack notifications in New Zealand, 2012-2013

Age Group	2012	2013	Change %
5-9 years	41	45	10↑
10-14 years	72	92	28↑
15-19 years	21	25	19↑
Total	161	194	20↑

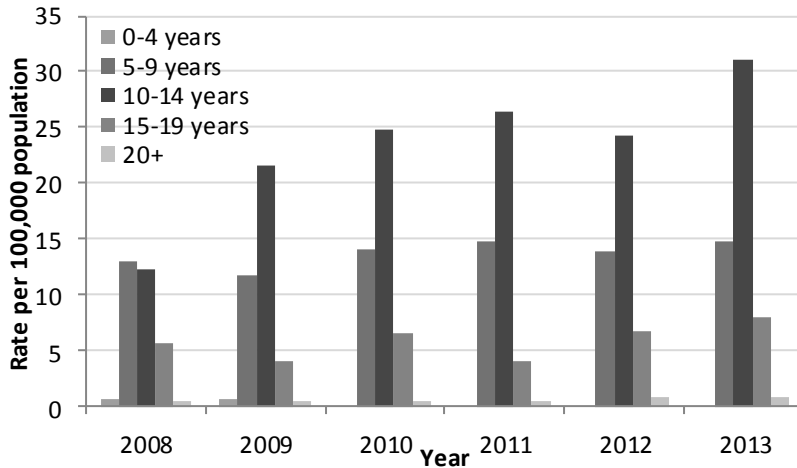
Source: ESR (2014)

Note: Total included cases from those aged from 0 to 70+ and age unknown.

Rheumatic fever notifications have nearly tripled over the last decade.

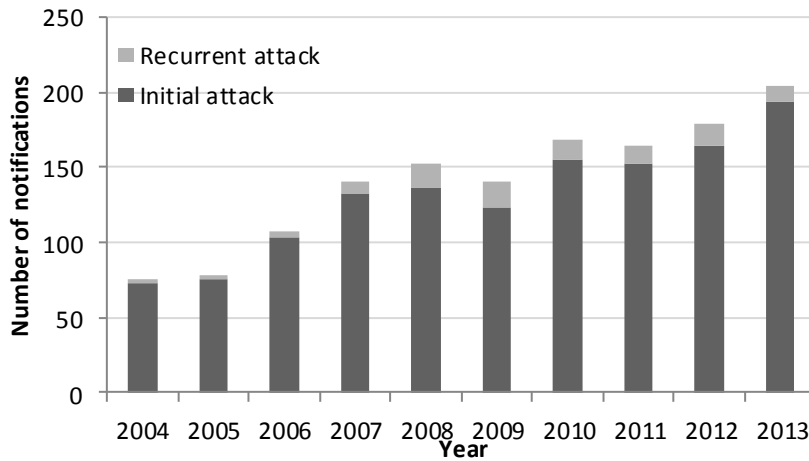
In New Zealand, from 2009 to 2013, children aged 10-14 years had the highest rate of rheumatic fever initial attack (Figure 1). Over 90% to total rheumatic fever notifications (initial attack + recurrent attack) were initial attack cases. The number of total rheumatic notifications has nearly tripled over the past 10 years: from 75 cases in 2004 to 205 cases in 2013 (Figure 2).

Figure 1: Rheumatic fever initial attack rates by age group, 2008-2013



Source: ESR (2014)

Figure 2: Rheumatic fever notification in New Zealand, 2004-2013



Source: ESR (2014)

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