

STANDARD TREATMENT WORKFLOW (STW)

ACUTE RHEUMATIC FEVER

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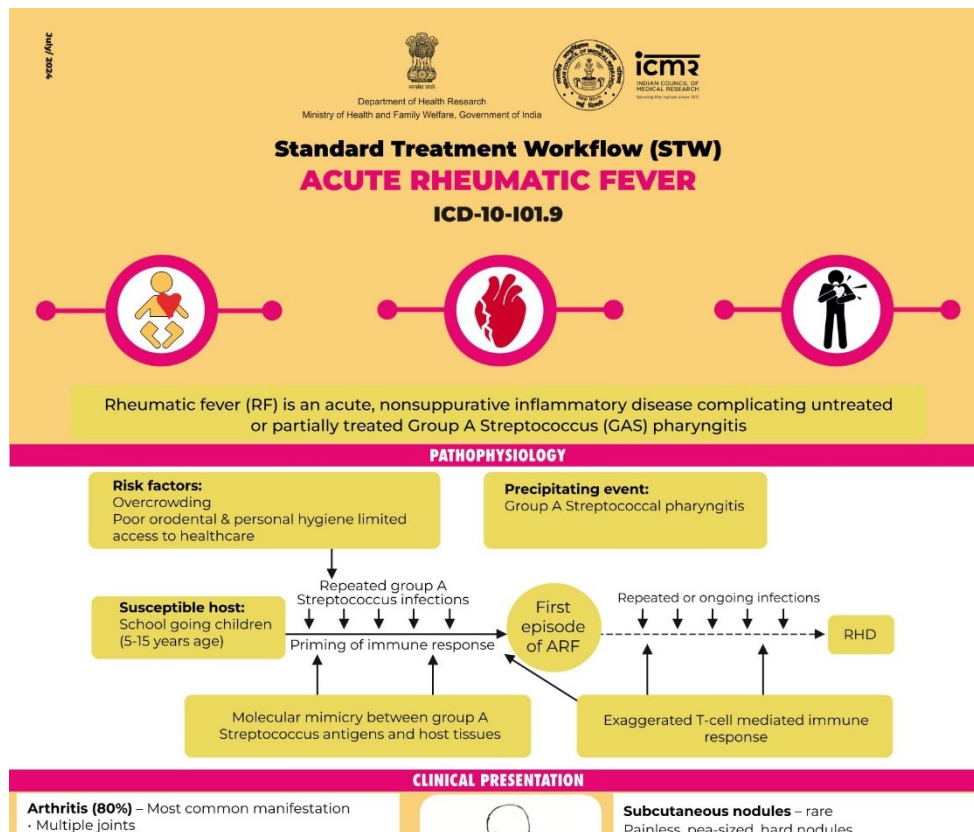
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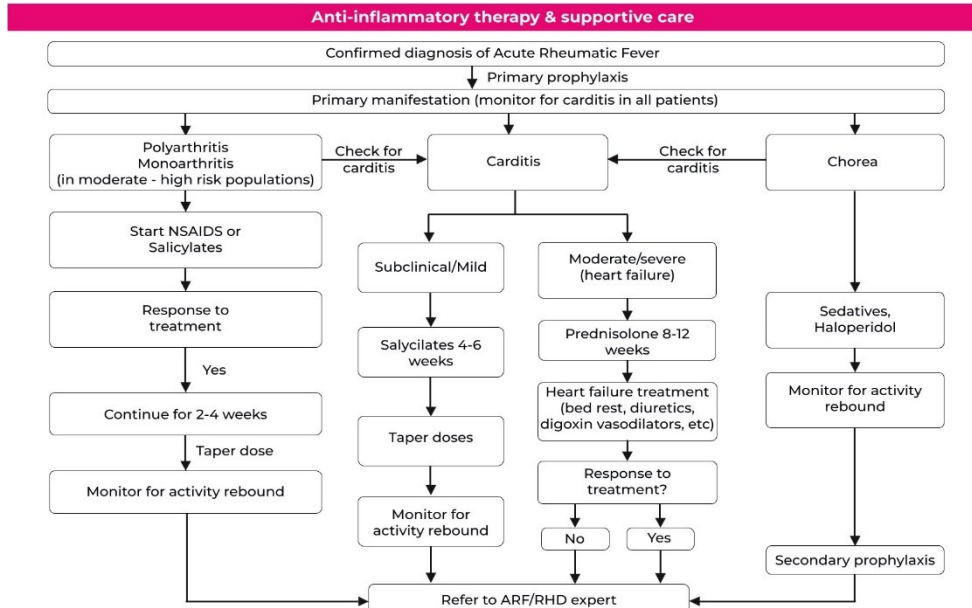





 Department of Health Research
 Ministry of Health and Family Welfare, Government of India

Standard Treatment Workflow (STW) ACUTE RHEUMATIC FEVER (Continued)

MANAGEMENT		
Primary prophylaxis (to Eradicate streptococcus)		
Agent	Dose	Duration
Benzathine penicillin (Penicillin G)	≤27kg 6,00,000U >27kg 12,00,000U	Once
or		
Phenoxymethyl penicillin(Penicillin V)	≤27kg 250mg/dose <27kg 500mg/dose	10 days
For individuals allergic to penicillin		
Amoxicillin	25-50mg/kg/day divided into 3 doses (maximum 1g/day)	10 days
Erythromycin	20-40mg/kg/day divided into 2-4 doses (maximum 1g/day)	



Clinical Manifestation	Treatment Schedule	Duration
Moderate/Severe carditis	Prednisolone 2mg/kg/day once daily (Aspirin while tapering Prednisolone)	8-12 WKS
Mild carditis	Aspirin 75-100mg/day divided into 4 doses	2-4 WKS
Polyarthritis	Aspirin 75-100mg/day divided into 4 doses or Naproxen 10-20mg/kg/day	2-4 WKS
Chorea	Carbamazepine 4-10mg/kg/day or Valproic acid 20-30mg/kg/day or Haloperidol 2-6mg/day	Variable depending upon the need of the patient

Secondary prophylaxis				
Category of Patient	Duration	Agent	Dose	Route
Patients without carditis	5 years after the last ARF episode or until 21 years age (whichever is longer)	Benzathine penicillin (Penicillin G)	≤27kg 6,00,000U >27kg 12,00,000U	Intramuscular
Patients with carditis but no RHD	10 years after the last acute episode or until 25 years age (whichever is longer)	or		
		Phenoxymethyl penicillin(penicillin V)	250mg twice daily	Oral
Patients with RHD who have undergone valve surgery (repair or replacement)	At least until 40 years age (preferably lifelong)	For individuals allergic to penicillin		
		Erythromycin	250mg twice daily	Oral

- ABBREVIATIONS**
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| <p>ARF: Acute Rheumatic Fever
 ASO: Antistreptolysin O
 CRP: C-reactive protein
 DLC: Differential Leukocyte Count
 EKG: Electrocardiogram
 ESR: Erythrocyte Sedimentation Rate</p> | <p>NSAIDs: Non-Steroidal Anti-Inflammatory Drugs
 PANDAS: Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections
 RHD: Rheumatic Heart Disease
 TLC: Total Leukocyte Count</p> |
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INJECTABLE PENICILLIN IS SAFE; ALLERGY IS UNCOMMON

This STW has been prepared by national experts of India with feasibility considerations for various levels of healthcare system in the country. These broad guidelines are advisory, and are based on expert opinions and available scientific evidence. There may be variations in the management of an individual patient based on his/her specific condition, as decided by the treating physicians. There will be no indemnity for direct or indirect consequences. Kindly visit the website of ICMR for more information: (icmr.gov.in) for more information. (Indian Council of Medical Research, Ministry of Health & Family Welfare, Government of India.