Michaela is a healthy, athletic 15-year-old girl. While away at cadet camp, she develops a sore throat. Because she is busy, she ignores it and it improves after a few days. Weeks later, at home, she is more fatigued and her right knee starts to hurt. Then her left ankle flares up and her wrists become stiff. One morning, after she has trouble getting out of bed, her mother takes her to the paediatrician, who finds that not only does she have migratory arthritis but an apical heart murmur that had not been previously documented. She has a few subcutaneous nodules but no rash. Warning bells are ringing in the doctor’s mind; although she has never seen a case before, could this be acute rheumatic fever?

The answer is yes. The throat culture was negative but the antistreptolysin O titre was elevated. Michaela was referred to a paediatric cardiologist, who diagnosed mild mitral and aortic regurgitation. Fortunately, it resolved and she remains healthy, active and compliant with her penicillin prophylaxis.

A simple sore throat … or not?

The Canadian Paediatric Surveillance Program (CPSP) is a joint project of the Canadian Paediatric Society and Health Canada’s Centre for Infectious Disease Prevention and Control that undertakes the surveillance of rare diseases and conditions in children. For more information visit our Web site at <www.cps.ca/english/cpsp> or <www.cps.ca/francais/pcsp>.