PATHOPHYSIOLOGY

Immune reaction that happens 1-5 weeks after a group A Streptococcus pharyngitis (S. pyogenes)

**Jones Criteria**
- Carditis (40-50%)*
- Polyarthritis (60-85%)
- Sydenham chorea
- Erythema
- Subcutaneous nodules

**Minor criteria:**
- Elevated ESR
- Fever
- Elevated CRP
- Prolonged PR on ECG

**WITH**
- Evidence of infection by group A Streptococcus
  - Positive throat culture
  - ASO + or elevated titers

*Carditis*: tachycardia, MR >> AR, pericarditis, cardiomegaly, signs of heart failure

**Aschoff bodies**: pathognomonic of rheumatic disease
- Nodules located in the myocardium, not on the valves

TREATMENT

**Secondary prevention**
In patients with rheumatic heart disease, especially *mitral stenosis*

Antibiotics used:
- Penicillin G benzathine 1.2 million U IM every 4 weeks
- Penicillin V 200 mg twice a day
- Sulfadiazine 1g daily

**Duration of the prophylaxis**

<table>
<thead>
<tr>
<th>Type</th>
<th>Duration after last attack</th>
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<tbody>
<tr>
<td>Rheumatic fever with carditis and residual heart disease</td>
<td>10 y or until patient 40 y-o</td>
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<tr>
<td>Rheumatic fever with carditis without residual heart disease</td>
<td>10 y or until patient 21 y-o</td>
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<tr>
<td>Rheumatic fever without carditis</td>
<td>5 y or until patient 21 y-o</td>
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<td>Content of this summary from these references:</td>
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