Rheumatic fever usually follows an untreated beta-haemolytic streptococcal throat infection in children. It can affect many parts of the body, and may result in rheumatic heart disease, in which the heart valves are permanently damaged, and which may progress to heart failure, atrial fibrillation, and embolic stroke.

Nowadays, rheumatic fever mostly affects children in developing countries, especially where poverty is widespread. Up to 1% of all schoolchildren in Africa, Asia, the Eastern Mediterranean region and Latin America show signs of the disease.

Of 12 million people currently affected by rheumatic fever and rheumatic heart disease, two-thirds are children between 5 and 15 years of age. There are around 300 000 deaths each year, with two million people requiring repeated hospitalization and one million likely to require surgery in the next 5 to 20 years.

Early treatment of streptococcal sore throat can preclude the development of rheumatic fever. Regular long-term penicillin treatment can prevent rheumatic fever becoming rheumatic heart disease, and can halt disease progression in people whose heart valves are already damaged by the disease. In many developing countries, lack of awareness of these measures, coupled with shortages of money and resources, are important barriers to the control of the disease.