

# INTRODUCTION

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Rheumatic fever continues to be a serious problem in the developing countries . The importance of this disease is due to the fact that it produces chronic heart lesion leading to disability and high mortality over the years. In Egypt , rheumatic heart disease was condemned to be the first cause of death among school children (Kassem et al., 1982).

Rheumatic heart disease is one of the major medical and social problems in Egypt. A prevalence of 4.3 per thousand among school children in Cairo , was calculated by school health organization and of 5 per thousand among children from 3 - 15 years (Abboud & El - Mazni , 1958).

In Egypt , in a field study on school children aged 6 - 12 years , a prevalence rate of 10 definite rheumatic heart disease cases per thousand was found by Strasser and Rotta , 1973 under W H O supervision. They reported a high incidence of group A streptococcal infection affecting about 30 per cent of school children per year.

Disciascio and Taranta ,1980 , stated that the highest reported mortality rate in the world for rheumatic heart disease 27.5 / 100 000 and one of the highest for acute rheumatic fever (1.0/100 000) are in Egypt.