

Impetigo - school sores

Impetigo is a skin infection caused by the Staphylococcus or Streptococcus bacteria. It is also known as school sores because it commonly affects school-aged children. Impetigo is more common during the warmer months.

Staphylococcus or Streptococcus bacteria can live harmlessly on and inside various areas of the body, such as the skin surface and nose. However, cuts and abrasions or eczema may allow the bacteria to cause infection to deeper skin tissues. Healthy, intact skin can sometimes develop impetigo too. The condition is characterised by collections of small, crusting blisters that usually form on the face or limbs.

Impetigo looks unsightly, but it isn't dangerous and doesn't cause any lasting damage to the skin. However, it is highly contagious. A child with impetigo should be kept home from school or day care until appropriate treatment has begun.

The sores on exposed areas are covered with a waterproof occlusive (no holes) dressing. Occasionally a crepe bandage may be needed to hold the dressing in place or help prevent younger children from scratching the sores.

Incubation period of impetigo

The incubation period is the time between being exposed to the bacteria and the development of signs and symptoms. The incubation period is usually one to three days for Streptococcal and four to 10 days for Staphylococcal infections.

Common symptoms of impetigo

Common symptoms of impetigo include:

- The skin itches and reddens
- A collection of blisters forms, commonly around the nose and mouth
- The blisters pop and weep a yellow, sticky fluid
- The area develops a raised and wet-looking crust
- The scab dries and falls off
- The skin completely heals after a few days.

Symptoms of severe impetigo infection

If large areas of the skin are affected, symptoms may also include:

- Fever
- Swollen lymph glands
- General feeling of unwellness (malaise).

Diagnosis of impetigo

Impetigo may be diagnosed by an experienced clinician on the basis of the appearance of the infection. It may also be diagnosed by taking a swab of the blisters or crust and checking for the presence of bacteria.

Treatment of impetigo

Impetigo can be treated with prescription antibiotic ointments or creams, which need to be reapplied until the sores have completely healed. Antibiotic syrups or tablets may also be prescribed. It is important to complete any course of antibiotics you are prescribed. If left untreated, impetigo can lead to skin abscesses.

Care of the impetigo infection at home

Suggestions for home care include:

- Wash the sores (lesions) with an antibacterial or antiseptic soap every eight to 12 hours.
- After each wash, pat the lesions dry. Use a clean towel each time.
- Apply a waterproof occlusive dressing (completely cover/seal the area where possible) to stop further spread of the infection. Use a crepe bandage to hold the dressing in place or help prevent younger children from scratching the sores.
- See your doctor if the sores spread and get worse despite treatment, or if the child becomes unwell with fever.
- Change the child's linen (towels, sheets, face washer, sleep wear) daily while the infection is present.

Avoid spreading the infection

Impetigo blisters and crusts are filled with bacteria. This makes the condition highly contagious, particularly when the site is weeping. The skin is usually itchy, so the child scratches and spreads the infection from under their fingernails to other areas of the body or to another person. Infection can also be spread by handling contaminated clothing or articles.

Suggestions to reduce the risk of transmission to other family members include:

- Encourage everyone to wash their hands with soap frequently, and dry completely.
- A child with impetigo should be kept home from school or day care until appropriate treatment has begun and the sores on exposed areas are covered with a waterproof occlusive dressing.
- Cut your child's fingernails short and encourage them not to scratch scabs or pick their nose.
- Avoid scratching or touching the sores to prevent spread to other areas of the body. Use a crepe bandage if necessary.
- Keep affected areas of skin clean and covered to minimise the chance of spreading the infection.
- Always wash your hands with soap before and after touching sores or scabs.
- Encourage children to use their own towel and face cloth. No sharing.
- Wash the child's linen, towels and clothes in hot water. Wash all household linen in hot water while the infection is present.
- Dispose of used dressings promptly and thoroughly. Wash and dry hands after the dressings have been disposed of into a plastic bag and place bag into household waste.

Impetigo is dangerous for newborns

Keep the infected person well away from young babies. Impetigo is a serious condition for newborns because the newborn's inexperienced immunity may not keep the infection in check. Without prompt treatment, a severe case of impetigo may threaten a baby's life.

Where to get help

- Your doctor
- Your pharmacist
- Your local maternal and child health nurse
- Maternal and Child Health Line (24 hours) Tel. 13 22 29
- Nurse-on-Call Tel. 1300 60 60 24 (24 hours, 7 days)

Things to remember

- Impetigo (school sores) is a highly contagious type of skin infection caused by the Staphylococcus or Streptococcus bacteria.
- The infection is characterised by inflamed blisters that pop, weep and form crusts.
- Treatment options include antibiotic cream, ointment, antibiotic syrup or tablets.
- A child with impetigo should be kept home from school or day care until appropriate treatment has begun and the sores on exposed areas are covered with a waterproof dressing and where necessary a crepe bandage.
- Practice good personal hygiene.

This page has been produced in consultation with, and approved by:

Department of Health - Communicable Disease Prevention and Control Unit

Content on this website is provided for education and information purposes only. Information about a therapy, service, product or treatment does not imply endorsement and is not intended to replace advice from your doctor or other registered health professional. Content has been prepared for Victorian residents and wider Australian audiences, and was accurate at the time of publication. Readers should note that, over time, currency and completeness of the information may change. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions.

For the latest updates and more information, visit www.betterhealth.vic.gov.au

Copyright © 1999/2011 State of Victoria. Reproduced from the Better Health Channel (www.betterhealth.vic.gov.au) at no cost with permission of the Victorian Minister for Health. Unauthorised reproduction and other uses comprised in the copyright are prohibited without permission.