

Impetigo

What is impetigo?

A common skin infection caused by streptococcal or staphylococcal bacteria

What are the signs or symptoms?

Small, red pimples or fluid-filled blisters with crusted yellow scabs found most often on the face but may be anywhere on the body

What are the incubation and contagious periods?

- Incubation period: Variable. Skin colonization is common. Minor trauma may result in infection.
- Contagious period: Until the skin sores are treated with antibiotics for at least 24 hours or the crusting lesions are no longer present.

How is it spread?

- Contact with the sores of an infected person or from contaminated surfaces.
- Germs enter an opening on skin (eg, cut, insect bite, burn) and cause oozing, leading to honey-colored crusted sores.
- Occurs year-round but most common in warm weather in cut and scraped skin. Also occurs in cold weather when the skin around the nose and face is damaged by runny nasal secretions and nose wiping that irritates the skin.

How do you control it?

- Cover lesions, then exclude infected individuals at the end of the day until topical, oral, or other systemic antibiotics are started.
- Use good hand-hygiene technique at all the times listed in “When to Practice Hand Hygiene” on 31.
- Clean and sanitize surfaces.
- Clip fingernails to reduce further injury of tissues by scratching and subsequent spread through contaminated fingernails.
- In the event of an outbreak (more than one infected child in a group), consult with the local health department. The problem could involve antibiotic-resistant staphylococcal bacteria like methicillin-resistant *Staphylococcus aureus*, or MRSA (see “MRSA [Methicillin-resistant *Staphylococcus aureus*]” Quick Reference Sheet on 129).

What are the roles of the teacher/caregiver and the family?

- Consult the child’s health professional for a treatment plan.
- Use good hand-hygiene technique at all the times listed in “When to Practice Hand Hygiene” on 31.
- Clean infected area.
- Use medication recommended by the child’s health professional over sores.
- Loosely cover infected area to allow airflow for healing and avoid contact with others in group care settings.
- Perform hand hygiene after coming into contact with sores or when changing bandages at the group setting and home.
- Launder contaminated clothing articles daily.
- Notify the local health department if an outbreak occurs.

Exclude from group setting?

Yes. Wash the affected area, cover the sores, then exclude the child at the end of the day until child is treated.

Readmit to group setting?

- As long as the lesions are covered, the child can return once treatment has started (oral or topical antibiotics). Lesions should be kept covered until they are dry.
- When the child is able to participate and staff members determine that they can care for the child without compromising their ability to care for the health and safety of the other children in the group.

Comments

- When impetigo is caused by group A *Streptococcus*, treatment and complication issues are similar to when this germ causes strep throat (see “Strep Throat [Streptococcal Pharyngitis] and Scarlet Fever” Quick Reference Sheet on 157).
- Health professionals may use antibiotic ointment when there are only a few impetigo lesions and oral antibiotics when there are many.

