What is it?

Impetigo, also known as *Impetigo contagiosa*, is a highly contagious skin infection which begins slowly but can spread rapidly to various parts of the body and to other susceptible people. It is a self-limited disease which will eventually clear on its own, but is often treated to decrease the effect on the child and to prevent spread to other children.

What causes it?

Impetigo is caused by *Streptococcus* bacteria (60%) or by *Staphylococcus* bacteria (40%) or both. The streptococcus bacteria are found on the skin of normal people. The staphylococci are bacteria often found in the nasal lining. The types of streptococci that colonize the skin and cause impetigo are different from the types that are usually responsible for strep throat.

Who gets it?

Impetigo is most often seen in children and most often occurs during the hot, humid summer months. This is presumably because summer is when the skin is most often broken by cuts, scrapes, and insect bites allowing the bacteria to invade the inner skin tissue. It can be transmitted through adults, but more commonly from child to child.

What are the symptoms?

Impetigo first appears as discolored spots. Then small blisters form and quickly break, spreading germs to surrounding areas. The weeping sores rapidly form yellow, honey colored crusts, or scabs which are very typical. The tissue around them is red. The bacteria thrive in the moist environment under the crusts. New sores can develop in a matter of hours. They typically begin near the nose and mouth, but can spread to any body location.

Can it be treated?

With proper treatment, the skin will be completely healed in one week. Some blemishes may remain for 6 to 12 months, but scars are unusual unless your child picks at the sores. Treatment should help decrease the discomfort and prevent spread to other children. Treatment of the infection requires frequent removal of the honey colored crusts and the application of antibacterial ointment directly to the infected areas.

**Removal of Crusts:**

1. Wash your hands.
2. Have a helper hold your child if necessary.
3. Soak crusty areas on the skin with warm, soapy water to loosen crusts. You can also use a warm bleach solution (1 Tbs. bleach to 2 quarts of water).
4. Gently remove all crusts by using a washcloth. They may need to be gently rubbed, but should not be scrubbed. A little bleeding is common if you remove all the crusts.
5. Apply antibacterial ointment to the affected area. The ointment should be rubbed in well, including the area around the sore.
6. Wash your hands well when finished. The washcloth should be washed before being used again.

Since the bacteria live underneath the soft scabs, the antibiotic ointment can not get through to the bacteria to kill them unless the crusts are removed.

- **Finger nails** of the patient should be trimmed short and the hands washed often to avoid scratching and spreading the infection. It might help to put socks on a very young child’s hands.
- **General isolation** procedures must be followed. Clothing and bedding should be changed frequently and
cleaned. The patient should have a separate towel and washcloth. The child also should not be allowed to swim in a pool or sit in a hot tub.

- **Removal of honey colored crusts** should be done 3 times a day and continue for 3 days after the sores have healed.

- **Topical disinfectant soaps** such as Phisohex or Hibiclens can help decrease the bacterial count. However, these can cause skin drying and irritation.

- **Topical antibiotic therapy** using Mupirocin (Bactroban) should be applied to the entire affected area after removal of crusts 3 times a day.

- **Oral antibiotics** can be used if the impetigo is severe or has spread over a large area of skin. This should be taken as instructed by your physician.

**Is impetigo contagious?**

It is not unusual to see brothers or sisters of the patient and, rarely, the parents similarly infected. Impetigo is most contagious when it occurs in infants. You should be certain that other people in the family do not use the infected child's towel or washcloth. Your child should be kept out of school until he/she has been treated for 24 hours.

**Are there complications?**

Some blemishes will remain for 6 - 12 months, but scars are unusual unless your child picks his/her sores. In rare cases, especially in immune compromised infants, a more extensive skin infection can occur. There are also a very small number of children who will have strains of streptococci which cause kidney disease.

**In summary**

- Impetigo is a highly contagious skin infection most commonly seen in infants and children.

- The primary therapy is removal of all honey colored crusts and application of antibacterial ointment.

- Good hygiene and frequent hand washing will help prevent spreading the infection.

- The infection should be completely healed within 7 - 10 days, but you should continue treatment for at least 3 additional days.

- Your child should be kept at home until 24 hours of treatment has been given.

- If there is not improvement after 3 days of treatment or if the lesions spread rapidly, contact your family physician.

- For more information contact the American Academy of Family Physicians at familydoctor.org