

CHILDREN
WITH

impetigo



Children with **impetigo**

General information:

Impetigo is a skin disease caused by staphylococcus and streptococcus bacteria. It is quite common, and usually appears around the mouth, nose, on the scalp and hands. It usually starts with a small scratch or an itching rash, and quickly develops into a small, infected fluid-filled blister. When the blister bursts a thick yellow crust is formed, and new blisters may develop nearby or elsewhere on the body.

Impetigo is not dangerous, but it is quite contagious. Adults will sometimes be infected but it primarily affects children aged between 0 and 6.

How is it contracted?

When a child with impetigo scratches the sores, the bacteria spread to the child's hands and nails and from there to other parts of the body or to other children.

Impertigo may be transmitted via towels, bed linen, combs, hairbrushes, etc., which may contain bacteria from the sores.

Symptoms:

- Small red itching sores
- Yellowish sores which may spread and do not heal
- The condition may involve fever.



Good advice:

- Cut the child's nails short
- Prevent the child from scratching the sores, picking its nose, its nails or sucking its fingers
- Make sure the child is not too warmly dressed, as heat causes itching and enables the bacteria to develop more easily
- It may be necessary to cover the sore with a bandaid if there is discharge from the sore. Otherwise, the sores heal faster if they are uncovered.

When to contact a doctor?

Contact a doctor if the child:

- gets small, red, itching sores
- gets yellowish sores that spread and do not heal
- makes you worry and feel insecure

Contact your general practitioner first because he/she knows your child better than the doctor on call. You can also get good advice and guidance from your health visitor.

Treatment:

In mild cases, the treatment consists of washing the skin with soap and water or a disinfectant (chlorhexidine) at least twice daily and letting the skin air-dry.

In most cases, the sores will be treated with an antibiotic cream that is applied locally. The bacte-

ria live under the crusts and it is therefore important to soften and remove the crusts before applying the cream.

In cases where the sores have spread over a large area, antibiotics are given as pills or a mixture. Hospital admission may be necessary.

Prevention:

- Maintain high standards of hygiene
- Always wash your hands after touching the sores, and teach your child to wash hands often
- Give the child its own comb, face-cloth and towel
- Change clothes, towel and bed linen daily as long as the child has impetigo
- Inform the childcare facility that your child has impetigo

In general, it is important for both children and adults to maintain good hand hygiene, because this has been shown to reduce the risk of condition.

Childcare

The child can return to childcare once the sores have dried and the crusts have fallen off. Schoolchildren can go back to school as soon as treatment has started and they understand the importance of washing their hands often, and if the sores have not spread too much.

Parental guidelines

These guidelines have been prepared by a working group set up by the departments of paediatrics in Herning, Randers, Skejby and Viborg.

The intention with these guidelines is to provide parents with advice across the following sectors: health visitors, general practitioners family doctors, doctors on call, and the staff at paediatric admission wards in the Central Denmark Region.

The parental guidelines can be seen and downloaded from the internet on the web site www.fv.rm.dk

You may order additional copies from Rikke Dalsgaard,
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