



Sarpy/Cass Department of Health & Wellness

701 Olson Drive, Suite 101 Papillion, Nebraska 68046 (402) 339-4334 Fax (402) 339-4235

FACT SHEET

Impetigo

Impetigo is a rapidly spreading, highly contagious skin infection that often occurs in day care centers, kindergartens and schools. The skin infection, characterized by blisters, pustules, and yellowish crusts is caused by a Group A streptococcus (GAS) bacteria. Occurrence is worldwide. The bacteria is most often transmitted through direct contact from a GAS colonized person. The bacteria cannot penetrate healthy intact skin but once there is a break in the skin like an insect bite, cut, scrape, burn, or any wound impetigo lesions can occur at the site. After a person develops impetigo lesions their upper respiratory tract is often colonized with GAS organism. <http://www.cdc.gov/groupAstrep/about/faqs.html>

Cause: Impetigo is usually caused by infection with *Streptococcus pyogenes*, *Staphylococcus aureus*, or a combination of the two. Less often, other types of bacteria can cause Impetigo.

Symptoms: The blisters on the skin appear first, then expand and rupture within 24 hours. The lesions break down over four (4) to six (6) days to form thick crusts.

Spread: Possible modes of spread include direct contact, environmental contamination, or vector spread. Once a person is exposed to the bacteria, Impetigo may develop. Impetigo is most common in crowded settings or where direct person-to-person contact predominates (e.g. military institutions or schools).

Incubation: Commonly 4 to 10 days for Staphylococcal infection.

Contagious Period: Without treatment, the person may be contagious for several weeks. With treatment, the person probably is not contagious after 24 hours of adequate antibiotic treatment.

Precautions: Contact Precautions until 24 hours after start of antibiotics.

Diagnosis and Treatment: Clinician diagnosis; lab culture of the organism. Impetigo may be treated with an antibiotic or with an antibiotic ointment to the affected areas. The specific antibiotic depends on which bacterium is causing the infection. Usually, people recover from Impetigo. Rarely, the bacteria can invade beyond the skin.

Prevention:

The most effective preventive measure available is good personal hygiene, with special attention to scrubbing with soap and water. Individuals with Impetigo should be excluded from school, day care or other settings where close person-to-person is likely to occur until at least 24 hours after beginning appropriate antibiotic therapy.

For individuals with impetigo: consider using anti-bacterial soap for bathing for 2-3 weeks, dispose of soiled dressings appropriately, GOOD HANDWASHING, especially after dressing changes, avoid sharing razors, towels, clothing or bedding; avoid scratching or touching lesions and finish all prescribed antibiotics. Household contacts should be mindful of modes of transmission, avoid direct contact with affected person's lesions, and wash hands regularly. Use gloves to change dressings, wash lesions or apply antibiotic ointment. Wash hands after contact with lesions, scabs or dressings of the infected person. And seek medical treatment any signs of infection develop.