

Patient information from BMJ

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Impetigo

Impetigo is a common skin infection that is easily spread from person to person. It can be annoying, but with the right treatment it usually clears up quickly.

You can use our information to talk to your doctor and decide which treatments are best for you or your child.

What is impetigo?

Impetigo is a skin infection, usually caused by bacteria called *Staphylococcus aureus* or *Streptococcus pyogenes*. In Europe, *Staphylococcus aureus* is the most common cause. You might also hear this called 'golden staph'.

Impetigo spreads easily from person to person. You're more likely to catch it if you have broken skin - for example, from a graze or an insect bite. It tends to happen on the face, often around the nose or mouth. Impetigo is more common in children than in adults, but it can affect people of any age.

There are two types of impetigo. The most common is called crusted or non-bullous impetigo. It starts as small blisters, which quickly burst and crust over. The other type, called bullous impetigo, causes large blisters that break easily. It's less common, and mainly affects babies.

What are the symptoms?

The most obvious symptom of impetigo is the crust that forms when the blisters burst. It's a golden, dark-yellow colour and sticks to the skin. Some people say it looks a bit like cornflakes stuck to the skin.

The patches can sometimes be sore or itchy, but most people don't get these symptoms. Doctors can usually diagnose impetigo just by looking at your skin.

But doctors sometimes test what type of bacteria is causing the problem. This is done by rubbing a cotton swab over a patch of impetigo to collect a sample and then sending it to a laboratory for testing.

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What treatments work?

It's important to clean the affected skin twice daily with soap and water or an antibacterial cleanser, such as chlorhexidine. This will reduce the amount of bacteria on the skin. However, chlorhexidine isn't recommended for babies or young children.

The usual treatment for impetigo is a cream or ointment containing an antibiotic. This works for most people. These antibiotic creams require a prescription from your doctor.

If antibiotic creams or ointments haven't worked, or if you have a more severe infection, your doctor may prescribe antibiotic tablets instead. You will probably take the antibiotics for seven days.

If antibiotic tablets don't help, your doctor may do a swab test to find out what type of bacteria is causing the infection. This is because some antibiotics work better for certain infections.

If the infection spreads deep in your skin or to your blood, you will be treated in hospital with antibiotics given through a drip (an intravenous infusion or IV). This doesn't happen to most people.

Newborn babies and people with a weak immune system are usually treated with oral antibiotics (such as tablets or syrups) or an antibiotic drip instead of an antibiotic cream or ointment. This is because the infection is more likely to spread and lead to serious problems for these people.

Things you can do to stop the infection spreading

Because impetigo spreads so easily, it's important to try to avoid passing it on to other people. The best way to stop impetigo spreading is to be careful about washing and drying your hands.

You should wash your hands with soap whenever you've touched an area of impetigo (for example, when putting on antibiotic cream). Keeping your nails short can also help.

Parents are often advised to keep their children home from school or playgroups until they've been treated for impetigo. But advice about this varies.

At home, try to keep the towels, facecloths, and bed linen of anyone with impetigo separate from those of people who haven't been infected.

What will happen to me?

Without treatment, impetigo usually goes away within a few weeks. But most people are advised to have treatment, because it spreads so easily.

Treatments usually work within a few days. But impetigo may come back. If it comes back regularly, you might be carrying the *Staphylococcus aureus* bacteria in your nose. Your doctor can do a swab test to check. You can use an antibiotic cream inside your nose to get rid of it.

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