

OTHER TYPES OF SKIN INFECTIONS

ACNE

Acne is the most common skin condition found in adolescents. It must be treated aggressively because an open acne sore is a break in the body's defenses against other contagious skin infections.

IMPETIGO

Impetigo is a bacterial infection usually caused by streptococci or staphylococci bacteria. The rash usually begins as small red blisters on somewhat reddened skin.

HERPES SIMPLEX

Herpes simplex is a viral infection. Herpes simplex Type 1 is commonly associated with cold sores, and fever blisters.

Spread:

Impetigo and herpes are spread by direct skin-to-skin contact.

Diagnosis:

A definite diagnosis can be made by a physician.

Treatment:

Please consult your family physician.

REMEMBER

Prolonged contact among wrestlers creates ideal conditions for the spread of contagious skin diseases.

PREVENTION is the most important step in stopping the development of infectious skin diseases. Please consult your family physician with any questions that you might have.

References

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http://www.kidshealth.org/teen/infections/fungal/athletes_foot.html

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Useful links:

Center of Disease Control <http://www.cdc.gov>

School Health - <http://www.schoolhealth>

TeensHealth - <http://www.kidshealth.org>

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A Guide for Common Contagious Skin Infections in "Close Contact Sports"



This brochure is designed to help educate parents and students of the most common contagious skin infections found in "close contact sports" such as wrestling. For specific medical advice, diagnoses, and treatment, consult your family physician.

FUNGAL INFECTIONS

Ringworm is a contagious fungus infection that can affect the scalp, body, feet or nails. It is caused by a fungi called "dermatophytes" that live on dead tissues of the skin, hair and nails. Listed below are three types of fungal infections most common in wrestlers:

1. Athlete's foot (tinea pedis)
2. Jock Itch (tinea cruris)
3. Ringworm (tinea corporis)

****Prevention** is the most important step in stopping the development of these contagious skin diseases.

Preventive Steps to

Keep Wrestlers Safe

From Skin Infections

- Check skin daily for breaks or abnormalities.
- Shower with soapy water immediately before and after each event; especially after practice sessions.
- Never share equipment or uniforms.
- Keep uniforms and equipment (headgear, etc.) clean.
- Wear full length pants (sweat pants) especially during practice sessions when possible.
- Keep nails clean and trim.
- Never share towels or soap.
- Make sure all wounds are reported, examined, cleaned and appropriately treated. Cover all wounds, including scrapes, scratches, and cuts securely before wrestling.
- Have your family physician evaluate any suspicious skin infections or lesions.

****Please Note:**

School wrestling coaches are responsible for disinfecting wrestling mats according to local Interscholastic Athletic Association guidelines.

ATHLETE'S FOOT

Athlete's foot, (tinea pedis) is caused by a fungus. It may be spread person to person or from contact with a contaminated towel, mat or floor. This fungus thrives in warm, moist environments.

Characteristics:

- Symptoms include itching, burning, redness and stinging of soles of the feet and between toes.
- The skin may flake, peel, blister or crack.

Treatment:

Very mild cases of athlete's foot may be treated by over-the-counter remedies such as Tinactin or Desenex powders. Moderate to severe cases respond to antifungal creams and/or oral pills (ant-fungal) which can be prescribed by a physician.

Prevention:

- Keep feet dry, especially between the toes after showers and competitions.
- Do not walk on floors/mats in bare feet.
- Wear clean, dry socks and change them daily.
- Keep shoes dry, using a powder and/or by alternating shoes daily.
- Make sure shoes are not too tight. Tight fitting shoes increase foot perspiration and temperature, giving this fungus an optimum growing environment.

JOCK ITCH

Jock Itch (tinea cruris) is a fungal skin infection exclusively found in the groin area and aptly named "Jock Itch"

Characteristics:

- A circular, red, raised rash with elevated edges
- Itching, chafing or burning in the groin or thigh area
- Skin redness, flaking, peeling or cracking skin in the groin area.

Treatment:

Mild cases of the rash may respond to over-the-counter medications such as Tinactin, Desenex, or Lotrimin AF cream. More severe cases may be treated with creams obtained from your physician.

Prevention:

- Dry off well after showers, etc.
- Be sure to dry the groin area last.
- Change out of wet clothes ASAP.
- Wear loose, breathable clothes in single layers.

RINGWORM

Ringworm (tinea corporis) is a fungal infection which may be found anywhere on the body. It is caused by a fungus which grows on the skin. There are no worms in ringworm. It is called "ringworm" due to its characteristic circular appearance.

Spread:

Ringworm can be spread by either direct or indirect contact. Ringworm can be spread by direct skin-to-skin contact with an infected person or animal. It can also be spread indirectly by contact with direct objects or surfaces such as hats, combs, bed linens, gym mats and floors.

Characteristics:

Ringworm of the scalp

- Begins as a small pimple that becomes larger—leaving scaly patches of temporary baldness.
- Yellow crusty areas sometimes develop.

Ringworm of the body

- Begins as a flat, round patch anywhere on the body (except for scalp and feet)
- As the rash expands, its center clears to produce a ring.
- More than one patch might appear and can overlap.
- Patchy areas can cause "itching".

Diagnosis:

Definite diagnosis can be made by a physician through examination and special tests.

Treatment:

Mild cases can be treated with ant-fungal creams such as Lotrimin. These medications should usually be used 2 or 3 times a day for 2 to 4 weeks, or until 1 week after the rash seems to have completely disappeared. Failure to treat for this "extra week" often results in the return of the rash. Very severe cases of ringworm may require oral antifungal agents (pills) prescribed by a physician.

Prevention:

- Follow the "Preventive Steps" in the beginning of this brochure.