Dear Parents / Caregivers

Today we received confirmation of a case of impetigo within our school community.

Impetigo is an infectious disease. Attached is a fact sheet detailing symptoms and the treatment of this disease. If anyone in your family exhibits any of these symptoms please seek medical attention.

Kind Regards

Miss Deborah Hall
Principal

8 February 2016
Impetigo

What is impetigo?
Impetigo, sometimes called "school sores" is a bacterial infection of the skin. The main causes are strains of staphylococcus aureus (known as 'staph').

What does it look like?
Impetigo occurs in two forms, blistering and crusted.
In blistering impetigo the blisters arise on previously normal skin and grow quickly in size and number. The blisters quickly burst and leave slightly moist or glazed areas with a brown crust at the edge. The spots expand quickly even after they break open and can be many centimetres wide. They are sometimes clear in the centre to produce ring shaped patterns. They are not usually painful but can be itchy.

Crusted impetigo has a thick soft yellow crust. Beneath this crust is a moist red area. Crusted impetigo spots grow slowly and are always smaller than the fully developed spots of blistering impetigo. They are not usually painful but can be itchy.

Impetigo can occur on top of other skin conditions, particularly itchy ones. When the skin is 'scratched' the infection can enter through the broken skin. Some of these conditions are atopic dermatitis (eczema), scabies, insect bites and head lice.

How is it treated?
Impetigo is very easy to catch from other people. If possible, your child should be isolated until the blisters have dried out. Bathing the blisters with salty (saline) water will help to dry them out. Encourage your child and family to wash their hands frequently, and especially after touching an infected area. To prevent spread don't share clothes, towels, bed linen, nail scissors, tweezers, razors or toothbrushes.

It can be treated with antibiotics. Your doctor should take a swab from the spots to check which antibiotic to use. The result of the swab takes several days. Depending on how bad the infection is your doctor will start either an antibiotic cream or a medicine. If your child starts on antibiotic medicine it is important to finish the whole course of treatment (usually 5 days) and not stop when the impetigo starts to clear. If other family members have skin lesions they should also be treated.

Remember:
- Impetigo is very easy to catch from other people
- If prescribed antibiotics it is important to finish the whole course to make sure the impetigo will not recur.