

STAPH SKIN INFECTION

Staphylococcus aureus (*S. aureus* or staph) bacteria can commonly be found in the nose and on the skin of healthy people. When staph is present on or in the body without causing illness, it is called colonization. Because staph is so often present on skin, it is the leading cause of skin and soft tissue infections. Over time, 20% of the population will almost always be colonized with *S. aureus*, 60% of the population will be colonized with *S. aureus* off and on, and another 20% are almost never colonized.

CAUSE	<i>Staphylococcus aureus</i> bacteria.
SYMPTOMS	Local redness and warmth of the infected area with or without pus. Examples of localized infections are boils, impetigo, wound infections, and infections of hair follicles (folliculitis). Such infections can result in a pustule (bump on the skin filled with pus) that can become reddened, hard, and painful. Most infections are uncomplicated, but the bacteria can get into the bloodstream and other body sites and cause severe illness.
SPREAD	By contact with hands, skin drainage, or secretions from the nose of a person who is infected or colonized.
INCUBATION	Variable. A long delay may occur between colonization with staph and when the symptoms of infection begin.
CONTAGIOUS PERIOD	As long as infection or colonization lasts. Persons who have draining infections are shedding more bacteria and are more infectious than persons who are only colonized.
EXCLUSION	<p><u>Childcare</u> and <u>School</u>: If draining sores are present and cannot be completely covered and contained with a clean, dry bandage or if the person cannot maintain good personal hygiene.</p> <p>Children who are only colonized do not need to be excluded.</p> <p><u>Activities</u>: Children with draining sores should not participate in activities where skin-to-skin contact is likely to occur until their sores are healed. This means no contact sports.</p>
TREATMENT	<p>Many staph infections can be treated with drainage of pus. A healthcare provider will decide if antibiotics are needed. More serious infections can require hospitalization and treatment with intravenous (IV) antibiotics.</p> <p>Some strains of staph have developed resistance to some antibiotics. Such strains are known as methicillin-resistant <i>Staphylococcus aureus</i> or “MRSA.”</p>
PREVENTION/CONTROL	<ul style="list-style-type: none"> Wash hands thoroughly with soap and warm running water after touching secretions from the nose, tracheostomies, gastrostomies, or skin drainage of an infected or colonized person. Thorough handwashing is the best way to prevent the spread of communicable diseases.

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PREVENTION/CONTROL (CONTINUED)

- Wear disposable medical gloves when touching any draining sores or changing bandages.
- Have persons who are prone to staph skin infections do self-care, if age appropriate. They should take care to keep their skin clean and dry and do first aid care when an injury (cut, scrape, etc.) occurs.
- Keep wounds clean and covered with a bandage.
- Dispose of bandages in a plastic bag immediately to prevent contamination of surfaces. Close the plastic bag and dispose in the trash.
- DO NOT allow sharing of personal items such as towels, washcloths, bar soap, combs, razors, or clothing.
- Wash bedding (linens) separately from other laundry in hot water with detergent. Dry bedding in a hot dryer.
- Clean and disinfect contaminated surfaces or objects daily or when soiled.
- Food handlers with open sores should wear waterproof disposable gloves.

FOR MORE INFORMATION

Kentucky Department for Public Health Frankfort, KY
Kentucky Regional Poison Center Louisville, KY
Lake Cumberland District Health Department Somerset KY
The Centers for Disease Control and Prevention (CDC) Atlanta, GA

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