

# **Contagious Skin Conditions That Wrestlers Need To Be Aware Of**

**Ringworm**

**Impetigo**

**Staphylococcus (Staph)**

**Scabies**

**Ringworm**



**Ringworm**



## Ringworm



## Impetigo



## Impetigo



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**Impetigo**



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**Staphylococcus (staph)**



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**Scabies**



**Scabies**





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**Scabies**



## **RINGWORM**

*<http://www.webmd.com/skin-problems-and-treatments/>*

### **What Causes Ringworm?**

Ringworm is **not** caused by a worm. It is caused by a fungus. The kinds of fungi (plural of fungus) that cause ringworm live and spread on the top layer of the skin and on the hair. They grow best in warm, moist areas, such as locker rooms and swimming pools, and in skin folds.

Ringworm is contagious. It spreads when you have skin-to-skin contact with a person or animal that has it. It can also spread when you share things like towels, clothing, or sports gear.

### **How Is Ringworm Of The Skin Diagnosed?**

If you have a ring-shaped rash, you very likely have ringworm. Your doctor will be able to tell for sure. He or she will probably look at a scraping from the rash under a microscope to check for the ringworm fungus

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## **IMPETIGO**

*<http://www.webmd.com/skin-problems-and-treatments/>*

### **What Is Impetigo?**

Impetigo is a highly contagious bacterial skin infection. It can appear anywhere on the body but usually attacks exposed areas. Children tend to get it on the face, especially around the nose and mouth, and sometimes on the arms or legs. The infected areas appear in plaques ranging from dime to quarter size, starting as tiny blisters that break and expose moist, red skin. After a few days the infected area is covered with a grainy, golden crust that gradually spreads at the edges.

Most people get this highly infectious disease through physical contact with someone who has it, or from sharing the same clothes, bedding, towels, or other objects.

### **Diagnosing Impetigo**

Diagnosing impetigo is mostly straightforward based on the clinical appearance, though occasionally other conditions may look something like it. Infections such as tinea ("ringworm") or scabies (mites) may be confused with impetigo. It is important to note that not every blister means an impetigo infection. At times, other infected and non-infected skin diseases produce blister-like skin inflammation. Such conditions include herpes cold sores, chickenpox, poison ivy, skin allergies, eczema, and insect bites. Secondary infection of these diseases does occur sometimes. Medical judgment and occasionally culture tests, if necessary, are used to decide whether topical antibacterial creams will suffice or whether oral antibiotics will be necessary.

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## **STAPHYLOCOCCUS (STAPH)**

*<http://www.webmd.com/skin-problems-and-treatments/>*

### **What Is a Staph Infection?**

A staph infection is caused by a Staphylococcus (or "staph") bacteria. Actually, about 25% of people normally carry staph in the nose, mouth, genitals, or anal area. The foot is also very prone to picking up bacteria from the floor. The infection often begins with a little cut, which gets infected with bacteria.

These staph infections range from a simple boil to antibiotic-resistant infections to flesh-eating infections. The difference between all these is the strength of the infection, how deep it goes, how fast it spreads, and how treatable it is with antibiotics. The antibiotic-resistant infections are more common in North America, because of our overuse of antibiotics.

One type of staph infection that involves skin is called cellulitis and affects the skin's deeper layers. It is treatable with antibiotics.

This type of infection is very common in the general population, and more common and more severe in people with weak immune systems. People who have diabetes or weakened immunity are particularly prone to developing cellulitis.

### **How are Staph infections diagnosed?**

*[http://www.medicinenet.com/staph\\_infection/page3.htm](http://www.medicinenet.com/staph_infection/page3.htm)*

In cases of minor skin infections, staphylococcal infections are commonly diagnosed by their appearance without the need for laboratory testing. More serious staphylococcal infections such as infection of the bloodstream, pneumonia, and endocarditis require culturing of samples of blood or infected body fluids. The laboratory establishes the diagnosis and performs special tests to determine which antibiotics are effective against the bacteria.

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## **SCABIES**

*<http://www.webmd.com/skin-problems-and-treatments/>*

### **What Is Scabies?**

Scabies is a condition of very itchy skin caused by tiny mites that burrow into your skin. Scabies can affect people of all ages and from all incomes and social levels. Even people who keep themselves very clean can get scabies.

### **How Is Scabies Spread?**

Scabies mites spread by close contact with someone who has scabies. Scabies can also be spread by sharing towels, bed sheets, and other personal belongings.

Scabies often affects several family members at the same time. You can spread it to another person before you have symptoms.

### **What Are The Symptoms?**

Scabies causes severe itching that is usually worse at night and a rash with tiny blisters or sores. Small children and older adults tend to have the worst itching. Children typically have worse skin reactions.

If this is the first time you have had scabies, it may be several weeks before you have itching and skin sores. But if you have had it before, symptoms will probably start in a few days.

### **How Is Scabies Diagnosed?**

A doctor will suspect scabies based on your symptoms. Scabies is especially likely if you have had close contact with other people who have had similar symptoms.

Sometimes a doctor confirms a diagnosis by looking for signs of mites on a sample of your skin. The doctor gently scrapes some dry skin from an affected area and then looks at it under a microscope. This test is not painful for most people.