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SKIN INFECTIONS IN ATHLETES AND ITS MANAGEMENT

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Annotation

Although there are many different types of skin infections, symptoms commonly include lesions, blisters, or sores. An athlete who develops any of these symptoms should refrain from training and competition until they can be evaluated by a doctor. Prompt and proper treatment is needed to prevent an infection from worsening and to reduce the risk of teammates becoming infected.

Keywords: skin infections, virus, HSV, molluscum contagiosum, warts, Staphylococcus Aureus.

Skin infections account for up to 10% of time-loss injuries in some sports and can cause serious illness. Skin infections can be spread from one athlete to another. You can help protect athletes from becoming sick or losing playing time due to skin infections.

Viral skin infections commonly seen in athletes include:

Molluscum contagiosum

Herpes simplex virus

Warts

Molluscum contagiosum is caused by a pox virus. Typically seen in young children, the infection can be spread by skin-to-skin contact or by sharing pools, decks, and other wet environments with someone who has the infection. Molluscum contagiosum causes lesions (mollusca) that usually occur in clusters in the body's creases — such as the underarms, elbow, and behind the knees — although they may appear in other places, as well. Mollusca are usually small (3 to 4 mm in diameter), pink, and dome-shaped with a small depression, or dimple, in the center. They are often surrounded by an itchy, eczema-like rash.





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Treatment. If left untreated, mollusca may eventually resolve on their own. The lesions often spread, however, so it can take from several months to several years for untreated lesions to go away completely. For this reason, treatment is often recommended.

The herpes simplex virus (HSV) typically causes a recurrent cluster of tender, burning blisters on or around the mouth or lips. Before these blisters appear, you may feel a burning or tingling sensation in the infected area. The blisters usually crust over after several days and resolve in 2 to 3 weeks. Because the virus can remain in the skin, reoccurrence in the same location is common. In wrestlers, HSV often appears in other places on the body — including the neck, torso, and extremities — and is commonly referred to as "herpes gladiatorum." When it affects the fingertip, it is known as "herpetic whitlow." If the blisters have crusted over, HSV is sometimes misdiagnosed as impetigo (a bacterial skin infection), acne, or eczema, which can lead to a delay in treatment.

Treatment. HSV is usually treated with an oral antiviral drug such as valacyclovir or acyclovir. These drugs work best to shorten the duration of the outbreak if you begin taking them within the first 72 hours of symptoms. If the virus reoccurs frequently, your doctor may prescribe a suppressive daily dose of either medication. This will help minimize outbreaks and limit missed events and practices.

Warts are skin growths caused by the human papilloma virus (HPV). Anyone can get warts, but they are frequently transmitted to athletes through contact with contaminated locker room floors and mats. Warts are usually light brown, yellowish, or flesh-colored. Because they can be mistaken for callouses, your doctor may pare down the thickened area of skin to look for small black dots. These black dots are actually small clotted capillaries feeding the wart.

Bacterial Skin Infections. Staphylococcus Aureus (Staph). Staph is the most commonly transmitted bacterial skin infection in athletes. The infection can take a number of forms, including:

Impetigo. Patients with impetigo develop clusters of red, round, scaly patches with scalloped borders. These patches are often covered with yellow, honey-colored crust and may spread rapidly over 24 to 48 hours. Unlike the herpes





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simplex virus, there is no burning or tingling sensation in the area before the patches appear. Impetigo typically appears on the lower face, but it can quickly and easily spread to the extremities and torso.

Folliculitis. Folliculitis causes small, white pustules to develop within individual hair follicles. These pustules can develop on the scalp; in flexural areas, including the underarms; and on the lower legs or thighs. Folliculitis is easily spread by shaving.

Carbuncles and furuncles. Staphylococcus aureus can also appear as carbuncles or furuncles. These solitary abscesses are most often seen on the buttocks and thighs, but can appear in other places on the body, as well.

Treatment. Most staph infections are treated with oral antibiotics. Carbuncles and furuncles typically require incision and drainage followed by oral antibiotic therapy.

All in all, to help reduce your risk for developing skin infections, follow these general guidelines when participating in sporting events and practices: wash your hands often with soap and water. If water is not available, use an alcoholbased hand rub. Shower as soon as possible after every practice and game in which you have direct contact with other players. Wash and dry your uniform and practice gear after each use. Do not share towels, soaps, lotions, disposable razors, or other personal care items.

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