

Impetigo

CATEGORY: Infections

LOOKS LIKE:

Pink, red, purple, grey,
or dark spots or sores;
blistering; crusting
(golden/honey-
coloured or brown),
oozing, bleeding

FEELS LIKE:

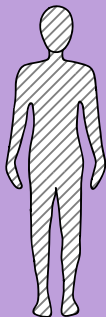
Itchy, crusty,
sometimes sore

OUTCOME:

Treatable, often self-
resolving, can recur

LOCATION:

Can affect anywhere
on the body; most
commonly the face,
hands, and feet



WHAT IT LOOKS LIKE —



Golden crusts that formed
after two days, typical of
impetigo



Honey-coloured crusts in
facial impetigo



Patches of impetigo on
both the arm and chest
area - known as 'kissing
lesions'



Impetigo that has
spread over the back
and trunk



A fragile pus-filled
blister due to impetigo



Impetigo on the palms
as a complication of
scabies

What is it?

Impetigo, also known as school sores, is a common, contagious bacterial skin infection. While it often goes away on its own, treatment can speed up healing.

It is most often seen in young children, although it can occur at any age.

You are more likely to get impetigo:

- In warm, humid weather
- In crowded environments eg, school classrooms
- If you have breaks in the skin (eg, due to eczema, scabies, or grazes)
- If you have a weakened immune system due to medications or medical conditions (eg, diabetes).

Impetigo

CAUSES —

Impetigo is usually caused by the bacteria *Staphylococcus aureus*, or less commonly *Streptococcus pyogenes*. It is highly contagious and spreads by skin-to-skin contact, or through shared clothing, bedding, and towels.

SYMPTOMS —

- **Itchy, sometimes sore rash** that can come up anywhere, but most commonly the face.
- Often starts with **flat spots**; these are a pink colour in pale skin, or purple/grey in darker skin types.
- The spots can turn into **blisters**, which can pop, leaving **honey-coloured or brown crusting**.
- The rash can spread and come up on other areas of skin.
- You may also feel **feverish, tired**, or notice **swollen glands** (lymph nodes).

COMPLICATIONS —

- **Ecthyma** — a form of impetigo causing deeper sores (ulcers); can lead to scarring.
- **Widespread skin infection** — such as cellulitis.

- **Staphylococcal scalded skin syndrome** — rare widespread blistering skin reaction triggered by some strains of *Staphylococcus aureus*.

Some complications can come up a few weeks after skin infections with the less common bacteria *Streptococcus pyogenes*:

- **Rheumatic fever** (uncommon)
- **Post-streptococcal glomerulonephritis** (rare) — kidney inflammation.

DIAGNOSIS —

Your healthcare professional will ask some questions and check your skin and temperature. **Swabs** of the sores are sometimes taken to check which bacteria is causing the infection.

If you have impetigo that keeps coming back, swabs of the nose may be done. This is to see if the *Staphylococcus aureus* bacteria is living in the nose and causing recurrent infections.

TREATMENT AND PREVENTION —

Impetigo will often resolve on its own within 2–3 weeks, but treatment can help shorten this to less than 10 days.

If you have impetigo:

- Avoid touching affected areas
- Trim fingernails and regularly wash hands
- Gently cleanse the rash with a clean, damp cloth; this can help remove crusts

- Avoid sharing face cloths or towels, to help prevent spreading the infection
- Hot wash used clothing, towels, and bedding daily to kill the bacteria
- Stay home from work, childcare, or school until the sores have crusted over, or until at least 24 hours after starting treatment
- Keep the healing rash covered with absorbent dressings if the lesions are oozing, and avoid swimming until the skin is back to normal.

Treatment may also involve antiseptic creams (eg, hydrogen peroxide 1% applied 2–3 times per day for 5–7 days); dilute bleach baths; or antibiotics as directed by your doctor. Severe complications (rare) may require hospital care.

OUTCOME —

Impetigo is common in children and rarely causes serious complications. It will often self-resolve but treatment can speed this up. After impetigo heals, scars or changes in skin colour (lighter or darker) may remain.

If impetigo is widespread, recurrent, or associated with fevers, it is important to see a doctor.



MORE INFORMATION —
<https://dermnetnz.org/topics/impetigo>



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