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## Impetigo: How can you make it clear up quicker?



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## **For less extensive infections with impetigo, the evidence shows that particular antibiotic ointments are effective.**

Impetigo (impetigo contagiosa) is an itchy and sometimes painful skin infection. It is common, especially in young children. About 1 in 50 children in European countries get medical attention for impetigo (2%). The condition typically causes sores that form yellow-ish scabs, mostly on the face, arms or legs. The scabs dry up and fall off without leaving permanent scars.

The infection is caused by bacteria and is easily spread to other people. It can take a few weeks till it goes away by itself. Treatment might be needed if the infection looks bad, the skin is very itchy or if it is important to stop the infection spreading.

### **Research results**

To compare the effectiveness of different treatment options, researchers from the Cochrane Collaboration (an international network of researchers) gathered and systematically assessed all the relevant trials. This showed that worldwide there are at least 36 different options for treating impetigo.

Although the researchers found 57 trials involving more than 3,500 people with impetigo, no single form of treatment has been really thoroughly tested. The trials looked at a lot of different options, but none of them produced results that were clear enough to be able to say for sure that one treatment is better than others.

For infections that are not very extensive, the research shows that antibiotic ointments with fusidic acid or mupirocin can help. It also appears that some antibiotic tablets might be able to help relieve impetigo. They probably have more adverse effects than ointments though. Oral antibiotics are usually only used in children who have very extensive infections, because using large amounts of ointment for days is not very practical. All of these antibiotic treatments are only available on prescription by a doctor.

As a first treatment option, disinfectant lotions or ointments that do not have antibiotics are often suggested. However, the evidence suggests these might not be effective.

In March 2009 we looked for recent research on impetigo treatments because we wanted to update this research summary. We found three newly published trials involving

more than 500 participants in total. But the results of these trials did not change the general conclusions that can be drawn from research. One trial tested a new antibiotic ointment based on the active ingredient retapamulin which has been on the German market since 2007. The trial showed that it is probably more effective than a placebo (fake treatment), but also has more adverse effects, including itching, tingling or numbness.

It is still too soon to say whether the new drug retapamulin works better than other antibiotics that have been used for longer. More good quality trials are needed to answer this question. One thing is for sure: nowadays there are several antibiotic ointments that can effectively relieve impetigo symptoms.

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## Glossary

### antibiotics

Antibiotics are medicines that can be used for bacterial and some fungal infections. Antibiotics do not work against viruses. Well-known antibiotics include penicillin, tetracycline and chloramphenicol.

### bacteria

Bacteria are micro-organisms that, unlike viruses, can exist on their own. Viruses, on the other hand, can only exist inside a living cell. Most bacteria are not harmful to people, and some are actually beneficial. Bowel bacteria support bowel health. However if they get into the urinary system, they can cause an infection there. Doctors prescribe antibiotics for illnesses where bacteria need to be stopped or killed off. Immunisation is also possible against some bacterial infections, such as diphtheria, tetanus or whooping cough.

### Cochrane Collaboration

The Cochrane Collaboration is an international network of thousands of researchers and others. They work together in teams called Cochrane Review Groups to answer questions about health care by doing systematic reviews of evidence. To achieve this, the members of the Collaboration have developed systems and methods for systematically finding and analysing the results of trials of health care interventions. The goal of the Cochrane Collaboration is to help patients, health care practitioners and others make more informed decisions about health care. You can read more about the Cochrane Collaboration at their website.

### evidence

Evidence is what we call scientific proof from well-conducted, good-quality scientific trials that have been carefully designed to answer specific questions. Depending on the types of questions, different scientific research methods (types of study) are most appropriate to find reliable answers to these questions. Randomized controlled trials (RCTs), for example, are the best way to get reliable evidence on the effectiveness of medical treatments (interventions). This type of study, however, is not the best form of evidence for all possible questions, and does not provide the best answers to all kinds of questions, either. Epidemiological studies, for example, are very suitable for establishing well-founded proof for the spreading of a

disease in the population.

### infection

In medicine, we speak of an infection when a person has caught a germ (an infectious agent). This germ can be a bacterium, a virus, a fungus or a worm. The germ multiplies and then either spreads throughout the body or only attacks one particular organ. As long as there are no signs of a disease, this is called an asymptomatic infection. When the body shows a reaction to the germ in the form of symptoms, this is called a symptomatic infection (an infectious disease). The period between the moment the germs enter the body and the moment the first symptoms of the disease appear, is called the incubation period. It may last a few hours or days, or even many years. An infection does not necessarily have to lead to the onset of a disease.

### impetigo

Impetigo contagiosa is a superficial infection of the skin. It often affects skin on the head, neck and face, and is especially common in young children. It is typically associated with yellow-ish scabs that form on open wounds or blistering areas of skin. These may itch and are highly contagious. The infection is usually caused by bacteria like staphylococcus or streptococcus bacteria. If left untreated, mild impetigo normally heals within a few weeks without scarring. Complications such as fever, or the spread of the infection to deeper skin layers and lymph nodes, are rare.

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## **The German Institute for Quality and Efficiency in Health Care (IQWiG)**

The German Institute for Quality and Efficiency in Health Care (IQWiG) was established by legislation to provide evaluations of the effectiveness, quality and efficiency of healthcare services. This includes the assessment of medicines as well as the publication of health information for consumers and patients.

## **Evidence basis of our health information**

Our information is based primarily on systematic reviews of the effects of health care. Systematic reviews are necessary to gain an objective picture of health care. In order to do this, a clear question is formulated. Researchers then find all the relevant studies that could answer this question. They then evaluate those studies.

You can find a list of the evidence and other scientific literature on which this information is based at [\*\*www.informedhealthonline.org\*\*](http://www.informedhealthonline.org)

## **Disclaimer**

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