

**The Idaho Rattlers Wrestling Club is dedicated to keeping our wrestlers healthy. There are basically three types of skin infections that plague this sport. It is critical that every parent, coach and physician that works with the sport of wrestling must be aware of what to look for and the appropriate action to take.**

**1. Bacterial-**Small organisms that are found everywhere in the air, water, ground, mats and on skin. These organisms only become a problem if they get into and under the skin and “colonize”. The two major strains (types) are Staphylococcal and Streptococcal that produce infectious lesions within the sport. Early identification and management of bacterial infection is critical in minimizing the impact on the athlete. There are many forms but some of the more common forms are Impetigo and cellulites.



**Impetigo:** Impetigo is a skin infection caused by bacteria. Usually the cause is staphylococcal (staph) but sometimes streptococcus (strep) can cause it, too. It is most common in children between the ages of two and six. It usually starts when bacteria get into a break in the skin, such as a cut, scratch or insect bite. Symptoms start with red or pimple-like sores surrounded by red skin. These sores can be anywhere, but usually they occur on your face, arms and legs. The sores fill with pus, then break open after a few days and form a thick crust. They are often itchy, but scratching them can spread the sores. Impetigo can spread by contact with sores or nasal discharge from an infected person. You can treat impetigo with antibiotics.

**2. Viral-**Microscopic “parasitic” structures that require a host cell to survive. Viruses are constantly changing and mutating but cannot survive without a “host”. Within the Sport of Wrestling the primary agent being Herpes Simplex Type-I. The major concern with Herpes is once an athlete has contracted the virus, they are infected for life and can have a breakout at any time. They become carriers and can develop a breakout lesion at any time. If a breakout infection occurs the athlete can “share” the virus with any wrestler they have direct contact with.



**Herpes Simplex Type-I Virus:** Herpes simplex virus type 1 (HSV-1) is usually associated with infections of the lips, mouth, and face. It is the most common herpes simplex virus and most people develop it in childhood. HSV-1 often causes lesions inside the mouth, such as cold sores (fever blisters). It is transmitted by contact with infected saliva. By adulthood, up to 90% of people will have antibodies to HSV-1.

**3. Fungal-**Small Parasitic Plant Organisms that are found throughout daily living. They spread through the dispersal of spores and can be very contagious. These organisms love moist conditions and in some cases prefer to be anaerobic. Common types seen in athletics are “Athlete’s Foot”, “Jock Itch” and Ringworm.



**Ringworm:** The signs and symptoms of ringworm include:

- A circle of rash on your skin that's red and inflamed around the edge and healthy looking in the middle
- Slightly raised expanding rings of red, scaly skin on your trunk or face  
a round, flat patch of itchy skin
- More than one patch of ringworm may appear on your skin, and patches or red rings of rash may overlap. You can have tinea infection without having the common red ring of ringworm.

## **PREVENTION**

### **“The best cure for skin infections is prevention”**

The best way to treat contagious skin infections is prevention. The following rules are critical to the success of preventing wrestlers from becoming infected:

1. GOOD Hygiene: Shower immediately and no longer than 30 minutes after practice, change workout clothes and socks daily, consistently washing your hands during the day, DO NOT share equipment.
2. If you notice an open lesion, keep it clean, cover it with a dressing and show it to the Athletic Trainer or coach immediately.
3. Do not reuse razors, towels, or lotions that have had contact with an infected lesion.
4. Self “skin checks” and workout partner “skin checks” daily.
5. Report any redness of a lesion to coach or Athletic Trainer.
6. If you have a sudden area that “itches”, show it to the Athletic Trainer or coach.
7. If you come in contact with an opponent or workout partner with an open lesion clean the area with appropriate cleanser that contains Triclosan 1%; Nonoxynol 9;
8. Clean all practice mats and equipment daily with a 10% bleach or appropriate cleaner.
9. If it appears to be infected get to the physician quickly and have the lesion tested to determine the specific organism. Certain lesions may be covered with a bioocclusive agent (i.e. Tegaderm), but not herpes to protect teammates, opponents or family members.

There are specific guidelines that should be followed in recognition of a skin lesion that should be seen by physician for identification and management:

- Lesions with a red, flaky border.
- Weepy lesions, especially with “pus” or yellowish fluid.
- Facial lesions associated with fever, redness and swollen lymph nodes.
- Any skin lesion that is around the mouth, crosses the face into the scalp.
- Lesions that produce “Pins and Needles” sensation.

Additional information is available at the following websites:

[www.physsportsmed.com/issues/2003/0203/howe.htm](http://www.physsportsmed.com/issues/2003/0203/howe.htm)