

## RINGWORM

Ringworm is a fungal infection of the body, feet, or scalp. Infection of the feet is more common in adolescents and adults.

**CAUSE** Several different types of fungus. It is not a worm.

**SYMPTOMS** **Body** Appears as flat, spreading, ring-shaped areas on the skin (lesions). The edge of the lesion may be dry and scaly or moist and crusted. As the lesion spreads outward, the center often becomes clear.

**Feet** Also called “athlete’s foot”. Patchy scaling or cracking of the skin occurs anywhere on the foot, but especially between the toes. Blisters containing thin, watery fluid may be seen and itching is common. Serious problems can include bacterial skin infection (cellulitis) and fungal infections of the toenails.

**Scalp** May be hard to detect in the early stages. It often begins as a small scaly patch on the scalp and may progress to larger areas of scaling. Mild redness, swelling, itching, and pustules (pus-filled bumps) may occur. Infected hairs become brittle and break off easily.

**SPREAD** Ringworm of the body or scalp may occur by touching the lesions of infected persons or pets (usually dogs and cats) or by sharing objects that touched the lesions of an infected person (e.g., hats, combs, brushes, towels, pillows, bedding, sofas, clothing, hair ribbons, barrettes). Infections are more likely with minor scalp injuries or poor hygiene.

Ringworm of the feet may occur by having contact with skin scales containing fungi in damp places like shower stalls/floors, swimming pool decks, or locker room benches/floors.

**INCUBATION** **Body** 7 to 21 days  
**Feet** Unknown  
**Scalp** 10 to 14 days

**CONTAGIOUS PERIOD** Contagious as long as lesions are present. Contagiousness is reduced once treatment has begun.

**EXCLUSION** Childcare or School: Until treatment has been started.

Any child with ringworm should not participate in gym, swimming, and other close contact activities that are likely to expose others if the lesions cannot be fully covered or until 72 hours after treatment has begun. For sports, follow the athlete’s health care provider’s recommendations and the specific sports league rules for return to practice and competition.

**DIAGNOSIS** Recommend parents/guardians call their health care provider if they suspect ringworm in household members. Contact a veterinarian if ringworm is suspected in a pet.

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<b>TREATMENT</b>	<b>Body</b>	Antifungal ointments on skin lesions for 4 weeks.
	<b>Feet</b>	Antifungal ointments for 1 to 4 weeks. Oral medications may need to be taken for 6 to 8 weeks for severe or recurring problems.
	<b>Scalp</b>	Oral medications for 4 to 8 weeks. Antifungal shampoos may also be prescribed.

## PREVENTION/CONTROL

- Do not allow sharing of personal items such as brushes, combs, towels, bedding, pillows, clothing, hats, hair ribbons, barrettes, head gear, and helmets.
- Wash hands after touching lesions on humans and pets.
- Ensure lesions are completely covered.
- For ringworm of the scalp, wash combs and brushes used by the infected person in hot, soapy water.
- Have separate bedding and pillows for each child in childcare settings. Wash bedding in hot, soapy water daily while a person is infected.
- Provide separate storage space for personal items for each child or staff member.
- Vacuum carpeted areas and upholstered furniture regularly.
- Check for signs of infection in all pets in childcare and school settings. Have a veterinarian evaluate any pet with a skin infection or problem. If infection is present, treatment should be started as soon as possible.

If a pet has ringworm, children should not be allowed to have contact with the pet until the rash has been treated and heals.

- **School/Public swimming facilities:**
  - Exclude from using locker rooms, showers, or pools when active lesions are present if not covered by a waterproof bandage or swim cap.
  - Require shower shoes (e.g., flip-flops, water sandals) be worn in locker rooms, showers, and on pool decks.
  - Disinfect showers and dressing rooms daily with an EPA-approved disinfectant.

For more information, call Hennepin County HSPHD-Epidemiology at (612) 543-5230 or call your local health department.