



SKIN AND SOFT TISSUE INFECTIONS Boils

(CKS Boils, carbuncles, and staphylococcal carriage)

Boils initially appear as firm, tender, erythematous nodules, which after several days enlarge and become painful and fluctuant (a wave-like feeling on palpating skin overlying a fluid-filled cavity with non-rigid walls).

Organisms

Staphylococcus aureus

Treatment

- Advise patients:
 - o To apply moist heat three to four times a day to alleviate pain, localise infection and hasten drainage.
 - o To take paracetamol or ibuprofen as required for pain relief.
 - o To maintain good personal hygiene, washing hands carefully after contact with lesions.
 - o To refer to British Association of Dermatologists <u>leaflet.</u>
- Do not give antibiotics to patients with small abscess <5cm and no cellulitis: Incise and drain if necessary.
- Antibiotics are indicated if:
 - o There is also fever or extending cellulitis.
 - The lesion is large (e.g., carbuncle) or on the face.
 - There are other co-morbidities (e.g., diabetes, immunocompromised).
- If boils are recurrent or necrotic or occurring within groups of contacts e.g., households, consider PVL-producing *S.aureus* as a cause (see Panton-Valentine Leukocidin <u>PVL</u> guideline).

Consider MRSA if patient is in the risk group. If previously known to have been colonised or infected with MRSA, do not use empirical flucloxacillin, empirical treatment is guided by the sensitivity pattern of the MRSA isolate. See local MRSA guideline.

Antibiotic ¹	Dosage	Duration
First line choice:		
Flucloxacillin	Child 1mth-1yr: 62.5mg-125mg four times a day	5 days (appropriate for most people
	Child 2-9yrs: 125mg-250mg four times a day	but can increase to 7 days if severe).
	Child 10-17yrs: 250mg-500mg four times a day	
	Adult: 500mg-1g four times a day	
In penicillin allergy:		
Clarithromycin ³	1 month to 12 years:	5 days (appropriate for most people
	Under 8kg: 7.5mg/kg twice a day	but can increase to 7 days if severe).
	8 to 11kg: 62.5mg twice a day	
	12 to 19kg: 125mg twice a day	
	20 to 29kg: 187.5mg twice a day	
	30 to 40kg: 250mg twice a day	
	Adult and child >12yrs: 250mg to 500mg (in severe	
	infection) twice a day	
Erythromycin ^{2,3}	Child 1mth-1yr: 125mg four times a day (on advice,	5 days (appropriate for most people
	dose can be doubled in severe infection).	but can increase to 7 days if severe).
	Child 2-8 yrs: 250mg four times a day (on advice, dose	
	can be doubled in severe infection).	
	Adult and Child >8yrs: 250mg-500mg four times a day	
Macrolide not suitable:		
Doxycycline ⁴	Adult and child ≥12yrs: 200mg first day then 100mg	5 days (appropriate for most people
	once daily.	but can increase to 7 days if severe).

¹See BNF and BNFC for appropriate use and dosing in specific populations, e.g., hepatic, or renal impairment, pregnancy, and breastfeeding.

²Erythromycin is preferred in women who are pregnant.

³,Withhold statins whilst on clarithromycin/erythromycin course.

⁴.Doxycycline is not suitable for pregnant women