

Scalp Infection refers to a condition where the scalp's skin becomes infected due to various microorganisms such as bacteria, fungi, or viruses. The type, severity, and treatment depend on the causative agent and the individual's overall health. Below is a comprehensive overview:

1. Common Types of Scalp Infections #### Bacterial Infections - Folliculitis:

Inflammation of hair follicles, often caused by *Staphylococcus aureus*. - **Impetigo**: A contagious superficial skin infection that can affect the scalp, caused by *Streptococcus* or *Staphylococcus* bacteria. - **Cellulitis**: A deeper bacterial infection, causing redness, swelling, and pain on the scalp.

Fungal Infections - Tinea Capitis (Ringworm of the Scalp):

1. Caused by dermatophytes (*Trichophyton* species).
2. Symptoms: Patchy hair loss, scaling, itching, and sometimes black dots where hairs have broken off.
3. Common in children.

- Seborrheic Dermatitis:

1. Associated with *Malassezia* yeast overgrowth.
2. Symptoms: Flaky scales, redness, and itching (similar to dandruff but more severe).

Viral Infections - Herpes Zoster (Shingles):

1. Caused by the reactivation of the varicella-zoster virus.
2. Symptoms: Painful, blistering rash on one side of the scalp.

- Herpes Simplex Virus (HSV):

1. Rare, but HSV-1 can cause localized scalp lesions.

Parasitic Infections - Pediculosis Capitis (Head Lice):

1. Infestation by lice that causes itching and secondary bacterial infections due to scratching.

- Scabies:

1. Caused by the *Sarcoptes scabiei* mite, leading to severe itching and burrow-like lesions.
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2. Symptoms - Itching or burning sensation. - Redness or inflammation. - Scalp tenderness or pain. - Hair loss in localized patches. - Scaling, crusting, or oozing lesions. - Fever or swollen lymph nodes (in severe infections).

3. Diagnosis - **Clinical Examination**: Visual inspection of the scalp. - **Microbial Culture**: Swabbing and culturing lesions to identify bacterial or fungal organisms. - **KOH Test**: To detect fungal elements in suspected tinea capitis. - **Biopsy**: Rarely, for atypical or severe cases. - **Woods Lamp Examination**: Helps identify certain fungal infections.

4. Treatment #### **Bacterial Infections - Topical Antibiotics:** Mupirocin, fusidic acid. - **Oral Antibiotics:** For severe or spreading infections (e.g., cephalexin, dicloxacillin).

Fungal Infections - Topical Antifungals: Ketoconazole, selenium sulfide shampoos. - **Oral Antifungals:** Griseofulvin, terbinafine (for tinea capitis).

Viral Infections - Antiviral Medications: Acyclovir or valacyclovir for herpes zoster or HSV.

Parasitic Infections - Pediculicides: Permethrin or ivermectin for lice. - **Scabicides:** Permethrin cream or oral ivermectin for scabies.

Supportive Care - Antihistamines or corticosteroids for itch relief. - Warm compresses for folliculitis. - Good hygiene practices to prevent recurrence.

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5. Prevention - Regular hair washing and scalp hygiene. - Avoid sharing personal items like combs, hats, or towels. - Prompt treatment of minor scalp injuries to prevent bacterial infections. - Education on recognizing lice or fungal infections in communal settings like schools.

Would you like specific advice on managing a particular scalp infection or tips for choosing the appropriate treatment?

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