



Tameside and Glossop  
Integrated Care  
NHS Foundation Trust

# Cellulitis

Patient information Leaflet

June 2020

## **What Is Cellulitis?**

Cellulitis is an infection of the skin and the layer of fat and tissues just under the skin.

## **What Causes Cellulitis?**

The skin is an effective barrier against infection from bacteria that normally live on your skin without causing any problems. However, a break in the skin from a cut, skin ulcer, injection, athlete's foot, scratch or insect bite can allow bacteria to get into and under the skin and cause infection. In some cases of cellulitis there may not be an easily identifiable source of the infection.

## **Who is at Risk of Cellulitis?**

Cellulitis is a common problem and it can affect otherwise healthy individuals; however you are at greater risk if you have the following:

- Athletes foot
- Skin cuts (abrasions)
- An insect bite
- Skin problems e.g. eczema, psoriasis
- Swollen legs (for various reasons including being overweight)
- Previous episodes of cellulitis
- Poor immune system- for example if you take steroids or chemotherapy
- Poorly controlled Diabetes
- Are pregnant
- Are an intravenous drug user

## **What Are the Symptoms of Cellulitis?**

- Redness and warmth of the skin
- Pain
- Swelling
- Lymphangitis-red streaks tracking up from the affected area
- Fever and flu like symptoms

## **Is Cellulitis Serious?**

Cellulitis can range from mild to severe. If the cellulitis is spreading up the leg, then treatment needs to be commenced as soon as possible to stop it spreading further.

### Complications of untreated Cellulitis include:

- Blood poisoning (bacteraemia/septicaemia) which can be life threatening
- A collection of pus (abscess) can form under the infected skin
- Infection can spread to the underlying tissues such as muscle or bone
- Bacteria that get into the blood stream can spread to other sites in the body including the heart valves and joints.
- Long term damage to drainage of tissue fluid (known as lymph) from affected tissues can mean that a swelling of tissues may remain or become permanent even after the infection has cleared.

## **What is The Treatment for Cellulitis?**

### **Antibiotics**

Cellulitis is treated with antibiotics. The choice of antibiotic depends on the severity of the infection. Once treatment is started symptoms should start to improve; however sometimes redness may increase at the beginning of treatment before it starts to fade. Mild Cellulitis is usually treated with oral antibiotics. If your cellulitis does not respond to oral antibiotics or it worsens, you should see a doctor as your treatment may need to change.

If you have severe cellulitis you may need an intravenous antibiotic treatment. This means you will need to have a small plastic tube known as a cannula/midline inserted into your arm vein and the antibiotic will be administered directly into your blood stream through this tube. The nurse can place the tube and administer the antibiotics in your own home (as long as you are safe to be treated there).

The duration of treatment will depend upon how your infection responds to the antibiotic but it is usually around 3 to 5 days.

### **Other Treatments?**

- **Elevation**-elevating the affected limb uses gravity to reduce the swelling and may ease the pain. This will also help to reduce build-up of toxins produced by the bacteria. The affected limb should be elevated as much as possible during the first few days
- If your foot or leg is affected it should be elevated so that the foot is higher than the hip level and during the night the foot can be placed on one or more pillows to elevate it. Short walks should be taken every now and then and toes should be wiggled regularly whilst the foot is elevated in order to maintain circulation.
- If you have cellulitis of the arm or hand a high sling can be used to raise the affected area.
- **Painkillers**- taking painkillers such as Paracetamol can help ease the pain and reduce a fever (but please follow administration guidance).

- **Moisturiser**- sometimes, as the infection resolves, the outer layer of the skin becomes dry and starts to peel off. Using a moisturising cream and soap substitute may prevent the skin from becoming dry and can reduce itching and swelling and aid healing.

## How Can I Reduce My Risk of Cellulitis?

- Underlying skin conditions that increase the risk of cellulitis should be treated e.g. Athlete's foot.
- Any cuts or wounds that you have should be cleaned by washing under running tap water and you may want to use an antiseptic cream or solution. A plaster or dressing can be used to cover the wound.
- Emollients should be used to treat areas of dry skin to prevent skin cracking and becoming an entry point for bacteria.
- Avoid scratching your skin. Long fingernails can cause breaks in the skin when you are scratching and this creates entry points for bacteria. Fingernails should be kept short and scratching of the skin should be avoided.

## Other Useful Contacts or Information

<https://patient.info/doctor/cellulitis-and-erysipelas-pro>

<https://www.nhs.uk/conditions/cellulitis/>

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

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