

Skin infections in wrestling

GETTING BACK TO THE BASICS

By Mary Ann Custer

Methicillin Resistant Staphylococcus aureus (MRSA), Tinea corporis (Ringworm), Herpes Gladiatorum, sound familiar? These terms are becoming increasingly familiar to wrestlers. Skin infections associated with wrestling are gaining in notoriety; Community-Acquired MRSA (CAMRSA) is a growing concern among the medical community.⁷

In 1993-1994, wrestling in high schools was associated with one of the first outbreaks of CAMRSA in the community setting.⁶ More recently, high school wrestling was suspended for eight days in Minnesota after 24 cases of Herpes Gladiatorum were reported by 10 teams. Because skin infections are not typically reported, the actual extent to which they occur in wrestling is unknown. It is imperative, that wrestling programs, including coaches, athletic trainers, and wrestlers,

implement measures that will reduce the risks for disease transmission.

Disease results from complex relationships between three elements, the casual agent (MRSA, ringworm, and herpes), the susceptible host (wrestlers), and the environment (wrestling mats/athletic equipment, and wrestlers wrestling with infections). This is commonly referred to as the "epidemiologic triangle." By altering one component of the triangle, the spread of disease may be interrupted. The infection can be treated, the wrestler may be given prophylactic medication, 3, 4, 5 and/or the environment may be altered. By simply instituting basic infection control measures, the environment can be altered, and the risks for disease transmission reduced. This can be accomplished by using measures routinely used in healthcare; encouraging good hygienic practices, implementing procedures for proper cleaning and dis-

infection of mats/athletic equipment, and through proper handling of blood and other body fluids.

In Conclusion

Wrestlers are susceptible to skin infections. Skin infections not only stop wrestlers from participation in competition, they may have life long effects. Programs need to take initiatives to prevent the spread of disease. Identify the risks of disease transmission, and implement infection control measures to prevent disease transmission.

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WRESTLERS, have you ever had Herpes Gladiatorum (a skin infection caused by the herpes virus)?

This condition is spread by skin-to-skin contact, looks similar to fever blisters or cold sores, and can be on any part of the body.

The Atopic Dermatitis and Vaccinia Network (ADV N) is studying why certain people are more prone to getting viral skin infections.

If you have ever had a herpes virus infection contracted through wrestling, you may qualify for one of the ADV N studies.

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Financial compensation will be provided to qualified participants who complete the study.

To find out more about the studies call our toll free number:

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Encouraging Good Hygienic Practices

- Hand Hygiene – According to the CDC, hands play the single greatest role in the transfer of bacteria and viruses that can lead to disease. Hand hygiene should be encouraged before and after wrestling.
- Showering after practice or competition.
- No sharing of wrestling gear, towels, razors, and/or water bottles.
- Wash wrestling gear daily. May spray head-gear and/or wrestling shoes with disinfectant spray before use.
- Seek out medical attention for rashes or other potentially infectious skin lesions. DO NOT attempt self treatment. The wrong treatment may exacerbate or prolong infections.
- DO NOT pick, squeeze, or scratch skin lesions.
- DO NOT wrestle with skin infections.
- Never allow chemicals used for cleaning and disinfection to be used on the skin. Chemical germicides may cause skin irritation, providing a port-of-entry for skin infections.

Proper Cleaning and Disinfection of Athletic Equipment

- Clean and disinfect wrestling mats before use. Use a low-level disinfectant (Bactericidal, Virucidal, Fungicidal), following manufacturer's directions for use. Follow a written procedure. Educate all individuals who clean/disinfect. Mop by dragging the mop along the mat, rather than pushing the mop. Street shoes may contaminate freshly disinfected mats when the mop is pushed.
- Change disinfectant solutions when dirty. Disinfectants may become inactivated by soil.
- Launder all mop heads daily. Mops should be laundered in hot water (71°C / 160°F for 25 minutes), and dried. Mops that are not laundered remain contaminated. When a contaminated mop is dipped into the chemical germicide, it may inactivate the chemical. Studies have shown that mops and cloths rinsed in chemical germicides and hung to dry are not disinfected. The chemicals may kill some of the organisms, but while the mop is left to dry, the organisms begin to multiply. Additionally, some studies are indicating surfaces can actually be "seeded" with organisms by contaminated mops or cloths.
- Use additional measures to prevent mat contamination i.e., limit street shoes on mats, limit food/drink in wrestling room, disinfection of wrestling shoes prior to walking on mats.

Cleaning and Disinfection of Surfaces Contaminated with Blood and/or Other Body Fluids

- Observe Standard Precautions - Wear personal protective equipment in accordance with OSHA's standards, and facility recommendations. Gloves are a minimum when handling blood or other potentially infectious body fluids.
- Latex-free gloves may be used to avoid latex allergy
- NEVER spray athletes with chemical germicides – Wipe blood off intact skin with antimicrobial wipes during competition. Encourage athletes to wash with soap and water after competition.
- Fact - You must clean before you can disinfect.
- Use either an intermediate-level disinfectant (Tuberculocidal) or 1:10 bleach solution following manufacturer's direction for use for disinfection. Note: Bleach solutions must be mixed fresh daily.
- Infectious waste should be handled according to state and local regulations. See also OSHA's Bloodborne Pathogens Standard #29CFR1910.1030.

Gabriell Dretsch (Minnesota) vs. Jason Martin (Purdue). Photo by Chris Falteisek.

