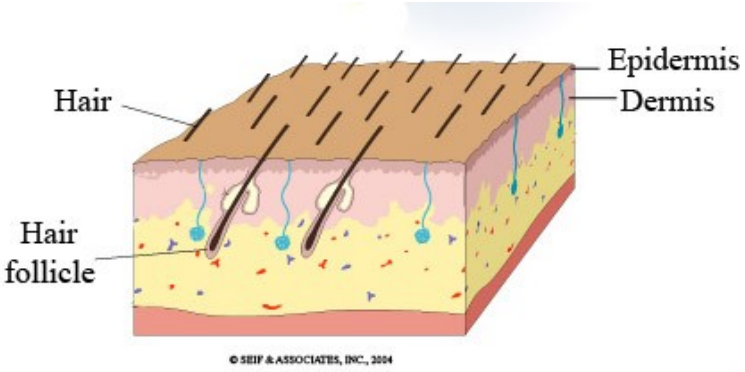
Folliculitis
(Inflammation of Hair Follicle)

Folliculitis is an infection and inflammation of the hair follicles. Hair follicles become red and irritated. This inflammation is usually caused by bacteria. The bacteria thrive in warm, moist environments. This condition can be seen anywhere on the body.



CAUSES AND RISK FACTORS

The most common cause of folliculitis is an infection by germs (*bacteria*). Fungal and viral infections can also cause the condition. Viral infections may be more common in people whose bodies are unable to fight disease well (*weakened immune systems)*. Examples include people with:

- AIDS.
- An organ transplant.
- Cancer.

People with depressed immune systems, diabetes, or obesity, have a greater risk of getting folliculitis than the general population. Certain chemicals, especially oils and tars, also can cause folliculitis.

SYMPTOMS:

- An early sign of folliculitis is a small, white or yellow pus-filled, itchy lesion (*pustule*). These lesions appear on a red, inflamed follicle. They are usually less than 5 mm (.20 inches).
- The most likely starting points are the scalp, thighs, legs, back and buttocks. Folliculitis is also frequently found in areas of repeated shaving.
- When an infection of the follicle goes deeper, it becomes a boil or furuncle. A group of closely packed boils create a larger lesion (a *carbuncle*). These sores (*lesions*) tend to occur in hairy, sweaty areas of the body.

TREATMENT

- A doctor who specializes in skin problems (*dermatologists*) treats mild cases of folliculitis with antiseptic washes.
- They also use a skin application which kills germs (*topical antibiotics*). Tea tree oil is a good topical antiseptic as well. It can be found at a health food store. A small percentage of individuals may develop an allergy to the tea tree oil.
- Mild to moderate boils respond well to warm water compresses applied three times daily.
- In some cases, oral antibiotics should be taken with the skin treatment.
- If lesions contain large quantities of pus or fluid, your caregiver may drain them. This allows the topical antibiotics to get to the affected areas better.
- Stubborn cases of folliculitis may respond to laser hair removal. This process uses a high intensity light beam (a *laser*) to destroy the follicle and reduces the scarring from folliculitis. After laser hair removal, hair will no longer grow in the laser treated area.

Patients with long-lasting folliculitis need to find out where the infection is coming from. Germs can live in the nostrils of the patient. This can trigger an outbreak now and then. Sometimes the bacteria live in the nostrils of a family member. This person does not develop the disorder but they repeatedly re-expose others to the germ. To break the cycle of recurrence in the patient, the family member must also undergo treatment.

PREVENTION

- Individuals who are predisposed to folliculitis should be extremely careful about personal hygiene.
- Application of antiseptic washes may help prevent recurrences.
- A topical antibiotic cream, mupirocin (Bactroban®), has been effective at reducing bacteria in the nostrils. It is applied inside the nose with your little finger. This is done twice daily for a week. Then it is repeated every 6 months.
- Because follicle disorders tend to come back, patients must receive follow-up care. Your caregiver may be able to recognize a recurrence before it becomes severe.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop redness, swelling, or increasing pain in the area.
- An unexplained oral temperature above 100.4°F (38°C) develops.
- You are not improving with treatment or are getting worse.
- You have any other questions or concerns.

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