



Diseases Fact Sheet - Pseudomonas Dermatitis

South Dakota Department of Health

Office of Disease Prevention Services - 605-773-3737 -(1-800-592-1861 in South Dakota only)

This material is provided for informational purposes only and is not a substitute for medical care. We are not able to answer personal medical questions. Please see your health care provider concerning appropriate care, treatment or other medical advice.

What is it?

Pseudomonads are bacteria commonly found in the environment; they prefer a moist environment and are particularly adapted to survive and grow in water.

Who gets Pseudomonas infections?

Anyone can get Pseudomonas infections, although Pseudomonas rarely attacks healthy individuals in the community. Generally, severe illness, such as pneumonia, meningitis, or septicemia occurs only in hospitalized patients whose body defense mechanisms are damaged or deficient.

How is Pseudomonas spread?

In a hospital setting Pseudomonas has become a problem when it contaminates medications or medical devices with a moist environment. In the non-hospital setting, infections have been related to growth of the organism in swimming pools, hot tubs, and contact lens solutions.

What are the symptoms of Pseudomonas dermatitis?

In the non-hospital setting the most common problems are ear infections and skin eruptions (rash). The rash appears as red raised blotches, and/or, pus filled pimples around a hair follicle; often accompanied by itching.

How soon after exposure do symptoms appear?

Variable, within 8 to 48 hours.

How is it diagnosed?

Diagnosis is confirmed by identifying the bacteria grown in a laboratory culture from a sample of a draining lesion, or from drainage from the ear.

What is the treatment for Pseudomonas?

Pseudomonads can withstand many disinfectants and are resistant to a variety of antibiotics.



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Swimming pools and hot tubs should be monitored frequently to assure proper maintenance of adequate pH and disinfectant levels.

Skin rashes are usually uncomplicated and resolve without treatment. Antibiotic treatment should be considered for ear infections, with steps to ensure the antibiotic of choice will be effective.

Should an infected person be excluded from work or school?

For persons who are not ill, it is not necessary to exclude them from school or work. The rash in most cases clears in 7 to 10 days. A person who has pus filled lesions on exposed areas should take precautions to avoid direct skin to skin contact with others. Good personal hygiene and hand-washing, especially after handling dressings from draining lesions, should be encouraged.