

Myths And Misconceptions: School Illnesses



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CHICKENPOX

Myth

Once you've had chickenpox, you are immune from it for life.

False

When you contract chickenpox, the body develops antibodies called immunoglobulins. These antibodies fight off the chickenpox virus during later exposure. However, not everyone who has contracted chickenpox will develop enough antibodies to be immune, and they may be vulnerable to contracting the illness again.

Myth

You cannot contract shingles if you have had chickenpox.

False

In actual fact, you cannot contract shingles if you have not had chickenpox before. Shingles is caused by the same virus as chickenpox. Shingles occur when the chickenpox virus has not completely left the body. The virus might then reactivate later in life, leading to the development of shingles. One in ten people who have had chickenpox will develop shingles at some point in their life.

Myth

There is no medical treatment for chickenpox.

False

There are antiviral medicines, such as aciclovir or immunoglobulin, which can be used to treat chickenpox. These can alleviate symptoms and reduce the risk of further complications.

In most cases, this treatment is only needed by those who are high risk and/or with low immunity, including, but not limited to:

- Babies younger than one month old
- Children who are taking medications such as chemotherapy, immune-suppressing drugs or steroids
- Those with immune diseases such as leukaemia or HIV.

If your child has not already had chickenpox and is in one of these groups, contact your doctor if they have been in contact with chickenpox or develop symptoms.

Government regulation

As with all infectious conditions, good hygiene practices should be maintained. All surfaces where children work and eat should be meticulously cleaned, as should any equipment used, in order to reduce the risk of transmission of infectious diseases.

In accordance with [UK Government recommendations](#).

You should keep children off school or nursery until all their spots have crusted over. This will help stop chickenpox from spreading. This typically takes place five days after the spots first appear.

As recommended by the [NHS](#).



IMPETIGO

Myth

Impetigo and “Strep A” are the same thing.

False

Impetigo can be caused by one or both of the following bacteria: group A Streptococcus and Staphylococcus aureus.

Myth

Impetigo is only contagious when the symptoms are visible.

False

It can take up to 10 days for symptoms of impetigo to appear, but it’s contagious during that entire time. That means you could be spreading the bacteria to others without even knowing you’re sick.

Myth

Impetigo is the same illness as hand, foot and mouth disease.

False

Hand, foot and mouth disease, as its name implies, frequently appears on the palm, soles, and inside the mouth, whereas impetigo does not show up in the mouth.

Impetigo is a bacterial infection that can affect people of all ages and is the most common skin infection in young children in the UK. Hand, foot and mouth disease is a viral infection that usually affects young children but can also affect adults.

(INFANTIGO)

Government regulation

Medical advice recommends that those who are diagnosed with impetigo stay home from work, school or nursery until sores have dried up, blistered or crusted over; or if you have a treatment plan, until 48 hours after beginning your treatment. When diagnosed and receiving treatment, do not stop using the antibiotic cream or tablets early, even if the impetigo starts to clear up.

Impetigo is usually contracted through skin which has been damaged already. To prevent the further spread of the infection to other people and/or other areas of your body, it is important to increase your hygiene habits. You can do this by ensuring all open injuries, such as cuts, scratches and insect bites, are clear of dirt and are clean – this can be done by washing them with warm water and soap. In addition, those with skin conditions like eczema should seek treatment for flare-ups.

As recommended by the [NHS](#).



STREPTOCOCCUS VIRUS

“STREP A”

Myth

There is only one type of “Strep”.

False

There are many variants of streptococcus bacteria. They are Group A streptococcus, Group B streptococcus, Group C streptococcus, and Group G streptococcus. The most well-known of these types is Group A streptococcus, also known as strep A.

Myth

Strep is just a sore throat.

False

Strep is more than just a sore throat; symptoms can include fever, pain when swallowing, headaches, stomach pains, nausea or vomiting, and severe rash. When ignored and left untreated, there is an increased risk that strep throat can develop into more dangerous conditions such as kidney inflammation or rheumatic fever (which is an illness that can cause a stroke) and permanent damage to the heart.

Myth

Strep can only be spread by touching surfaces contaminated with the bacteria.

False

Whilst being in contact with contaminated surfaces is one way to contract strep, the illness is also transmitted through water droplets. Strep can be spread through coughs and sneezes, and accidental inhalation. Good hygiene practices, such as frequently cleaning hands and surfaces, can help prevent the spread of strep.

Government regulation

If you or your child has a strep A infection, you should stay away from nursery, school or work for 24 hours after you start taking antibiotics. This will help stop the infection from spreading to other people.

As recommended by the [NHS](#).



TONSILLITIS

Myth

When you contract tonsillitis, you have to have your tonsils removed.

False

Doctors will only recommend the removal of tonsils after a patient repeatedly develops tonsillitis and/or it affects their breathing. For example, they may recommend this treatment if you develop tonsillitis over seven times in a year or five times or more in each of the last two years.

Myth

Tonsillitis is contagious.

False

Tonsillitis itself isn't contagious. However, the pathogens responsible for the inflammation, like the common cold or influenza (flu) virus, are.

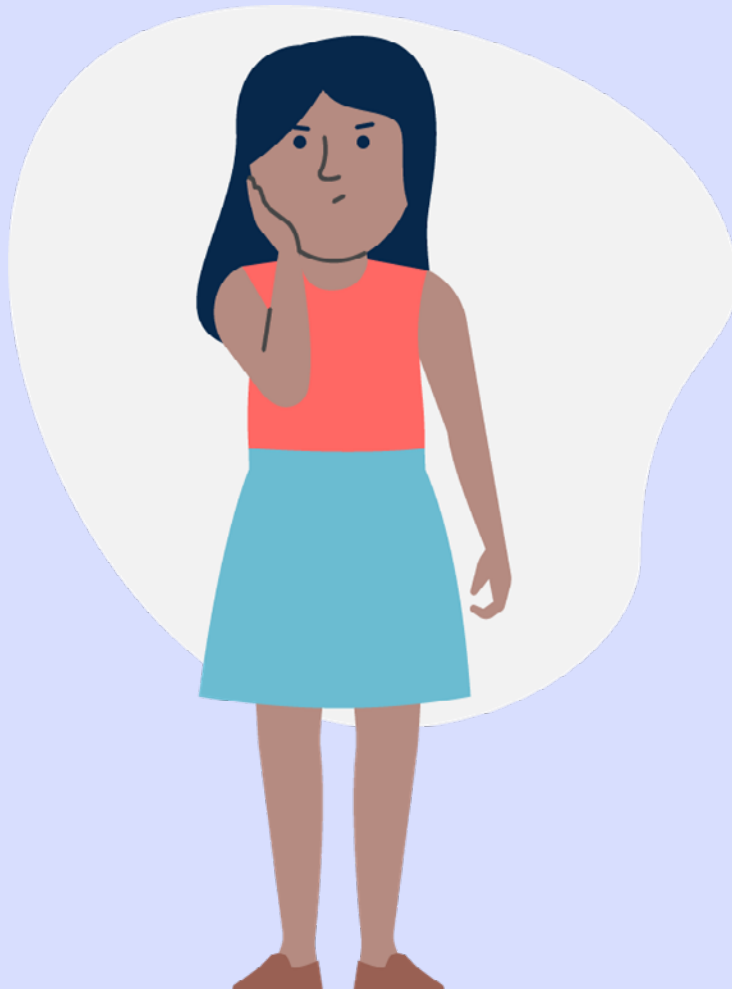
Government regulation

Coughs and sneezes spread diseases, which is why it's important to cover the mouth to reduce the spread of infections. Teachers and parents should discourage students from spitting, as well as educate children and young people on why respiratory hygiene is so important.

In accordance with [UK Government recommendations](#).

Symptoms will usually go away after three to four days. If you or your child have a high temperature or you do not feel well enough to do your normal activities, try to stay at home and avoid contact with other people until you feel better.

As recommended by the [NHS](#).



S T I L L G I N N E N M E N I T I S

Myth

I don't need the meningitis vaccine, as there is herd immunity.

False

Despite herd immunity being a benefit to those who cannot get a vaccine, this only works if the majority of people who can be vaccinated are. In addition to this, herd immunity is not foolproof. Those who are unvaccinated and exposed to an outbreak are more susceptible to contracting the illness.

Myth

Only the young and old get meningitis.

False

In actual fact, anyone is susceptible to contracting meningitis, regardless of age or health. Whether you're a top athlete or a teething toddler, meningitis can affect all types of people and can have devastating life-changing consequences.

Myth

Meningitis is always fatal.

False

Not everyone who contracts this illness dies, but bacterial meningitis is fatal in 10% of cases. Even in non-fatal cases, it can leave people with long-term medical issues, including headaches and memory loss.

Myth

All types of meningitis can be prevented with vaccines.

False

There are currently five types of meningitis - bacterial, viral, parasitic, fungal and non-infectious. As a consequence, there are NO vaccines capable of protecting against all forms of meningitis. It is essential that you familiarise yourself with the signs and symptoms of meningitis so that you can seek medical help at the earliest possible time.

Government regulation

If you suspect meningitis, you should get medical help immediately if you're concerned about yourself or your child. The recommended time off work, school or nursery depends on the type of meningitis contracted. The more common viral meningitis tends to get better on its own within seven to 10 days and can often be treated at home. Bacterial meningitis is typically treated in a hospital for at least a week. However, you should seek your doctor's advice for their recommended approach.

As recommended by the [NHS](#).

According to NICE recommendations, if you suspect that a child or young person has bacterial meningitis without the non-blanching rash, they should be directly transferred to hospital, without giving parenteral antibiotics.

In accordance with [UK Government recommendations](#).



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