Pediatric and Primary Lymphedema

Cellulitis/erysipelas

Children and adults with lymphatic impairment have a much higher risk of developing cellulitis/erysipelas.

The clinical signs of erysipelas are: high fever (39-40°C) of sudden onset, with rigors, a 'flu-like' or unwell feeling, followed by redness, warmth, and increased volume of the affected limb. Sometimes additional treatment is necessary, depending on the diagnosis.



WHAT IS RECOMMENDED

- Awareness of the first signs and symptoms of cellulitis.
- Prompt treatment of cellulitis / erysipelas with systemic antibiotics.
- Consider hospitalization in case of a young child and/or marked illness.
- Proper skincare and good compression treatment.
- Prompt treatment of interdigital fungal infections (Athletes foot) and eczema.
- Take preventive measures such as good hygiene following injury or insect bite: clean with soap and water and disinfect using topical antiseptic cream.
- Provide antibiotics for the patient to use if they feel that they are starting to develop cellulitis.
- Consider preventive long-term use of antibiotics in children/adults with recurrent cellulitis (2≥ episodes per year).



WHAT YOU SHOULD NOT DO

- Ignore the increased swelling.
- Stop wearing garments or low-stretch bandages. The patient may need to take off their compression materials for the first 2 days because of pain and/ or discomfort in the acute phase, but they should be reintroduced as soon as possible or the lymphedema will deteriorate.
- Take antibiotics without clear signs of cellulitis/erysipelas.