

## Swimmer's Itch

Swimmer's itch is a temporary skin infection acquired by bathers in some lakes when they accidentally become involved in the life cycle of the trematode worm. Swimmer's Itch appears during warm weather in early June and reaches a peak in July.

### Life Cycle

The adult worms are parasitic in the blood vessels of aquatic birds, particularly waterfowl, shorebirds and some mammals. Following mating, the females lay eggs in the intestinal veins of the host. These eggs migrate into the intestines and are passed into the water along with droppings. The eggs hatch into tiny free-swimming animals called miracidia. The miracidia find and penetrate the tissues of certain fresh water snails where additional development occurs and cercariae, minute free-swimming, fork-tailed, colourless animals are released.

It is the penetration of those cercariae through the skin of bathers which results in Swimmer's Itch. Man is an accidental host, and had the cercariae found their natural host, they would complete their life cycle to adult form. Because man is an unsuitable host, after skin penetration the cercariae dies.

### Symptoms

The cercariae penetrates the skin of bathers as water droplets evaporate. As the cercariae penetrate the skin, a temporary, prickly, itching sensation occurs, sometimes followed by a general inflammation of the affected area.

Areas mostly affected are the chest, stomach, and the back of legs. These symptoms usually subside quickly leaving the victim with tiny red spots at the site of penetration.

Several hours later, the bather will experience a distinct itching sensation and the red spot will enlarge to form separated bumps up to ¼ inch in diameter. These lesions do not spread to other areas of the body, nor do they spread from person to person. The degree of reaction varies with the sensitivity of the individual and

with the severity of the infestation. With repeated exposure, the body usually becomes more sensitive, rather than immune. Generally the rash heals within a week or more, but may persist because of scratching and secondary infections arising.

## Prevention and Treatment

Rubbing with a water repellent substance (petroleum jelly) on the skin prior to swimming may assist in repelling the cercariae from penetrating. Bathers should always rub down briskly with a coarse towel when emerging from the water since the cercariae do not penetrate the skin until the water evaporates. This towel should not be used again until it has been laundered. Treatment of Swimmer's Itch is symptomatic and self-limiting. Calamine lotion may be used to relieve the itching.

## For More Information

Call your local health unit.

Parry Sound District Health Unit – 705 746 5801

## Heat Illness

Heat exhaustion starts slowly and if not quickly treated can progress to heatstroke. In heatstroke, a child's temperature reaches 105°F (40.5 °C) or higher. Heatstroke requires **immediate emergency medical care** and can be fatal.

### Signs and Symptoms

#### Of heat exhaustion:

- increased thirst
- weakness
- fainting
- muscle cramps
- nausea and vomiting
- irritability
- headache
- increased sweating
- cool, clammy skin
- elevation of body temperature to less than 105°F (40.5°C)

#### Of heatstroke

- severe headache
- weakness, dizziness
- confusion
- rapid breathing and heartbeat
- loss of consciousness leading to coma
- seizures
- may not be sweating
- flushed, hot, dry skin
- elevation of body temperature to 105°F (40.5°C) or higher

#### What to do:

For a child with symptoms of heatstroke, **seek emergency medical care immediately**. In cases of heat exhaustion or while awaiting help for a child with possible heatstroke:

- Bring the child indoors or into the shade immediately.
- Undress the child.
- Have the child lay down; elevate feet slightly.
- If the child is alert, place in cool bath water. If outside, spray the child with mist from a garden hose.
- If the child is alert and coherent, give frequent sips of cool, clear fluids.
- If the child is vomiting, turn onto his or her side to prevent choking

#### Think Prevention!

- Teach kids to always drink plenty of fluids before and during any activity in hot, sunny weather – even if they aren't thirsty.
- Make sure kids wear light coloured, loose clothing.
- Do not have your child participate in any heavy activity outdoors during the hottest hours of the day.
- Teach kids to come indoors immediately whenever they feel overheated.

## **Sunburn**

Sunburn can happen within 15 minutes of being in the sun, but the redness and discomfort may not be noticed for a few hours. Repeated sunburns can lead to skin cancer. Unprotected sun exposure is even more dangerous for kids who have many moles or freckles, very fair skin and hair, or a family history of skin cancer.

### **Signs and Symptoms**

#### **Mild**

- skin redness and warmth
- pain
- itchiness

#### **Severe**

- skin redness and blistering
- pain and tingling
- swelling
- headache
- nausea
- fever and chills
- dizziness

#### **What to do:**

- Remove the child from the sun right away.
- Place the child in a cool (not cold) shower or bath – or apply cool compresses as often as needed.
- Give extra fluids for the next 2 to 3 days.
- Give the child ibuprofen or acetaminophen as directed, if needed, to relieve pain.
- Use moisturizing creams or aloe gel to provide comfort.
- When going outside, all sunburned areas should be fully covered to protect the child from the sun until healed.

#### **Seek Emergency Medical Care if:**

- a sunburn forms blisters or is extremely painful
- a child has a facial swelling from a sunburn
- a sunburn covers a large area
- a child has a fever or chills after getting sunburned
- a child has a headache, confusions, or a feeling of faintness
- you see signs of dehydration (increased thirst or dry eyes and mouth)

#### **Think prevention!**

- Minimize kids' summer sun exposure between 10 and 4 pm
- Have kids wear protective clothing, sunglasses, and a hat.
- Apply sunscreen that provides UVB and UVA protection with a sun protection factor (SPF) of at least 15.
- Apply sunscreen 15 to 30 minutes **before sun exposure** and 30 minutes after exposure begins, then reapply after kids have been swimming or sweating.

## **Insect Stings and Bites**

Although insect stings and bites can be irritating, symptoms usually begin to disappear by the next day and don't require medical treatment. However, kids who are allergic to some insect stings or bites may sometimes have life-threatening symptoms requiring emergency treatment.

### **Signs and Symptoms:**

#### **Of a Mild Reaction:**

- red bumps
- itchiness
- mild swelling

#### **Of a Severe Allergic Reaction Include:**

- swelling of the face or mouth
- difficulty swallowing or speaking
- chest tightness, wheezing, or difficulty breathing
- dizziness or fainting

### **What to Do:**

If there are signs of a severe reaction:

- **Call 911.** If the child is conscious, give him or her diphenhydramine.
- If the child has an injectable epinephrine (EpiPen), it should be given.

If there are no signs of a severe reaction:

- If the child was stung and the insect's stinger is visible, remove it as quickly as possible by scraping the skin horizontally with the edge of a credit card or your finger nail.
- Wash the area with soap and water.
- Apply ice or a cool wet cloth to the area to relieve pain and swelling.

#### **Seek Medical Care if:**

- the sting or bite is inside or near the mouth
- the child has a known severe allergy to a stinging or biting insect
- injectable epinephrine (EpiPen) was used
- the site looks infected (increasing redness, warmth, swelling, pain, or pus occurring several hours or longer after the sting or bite)

### **Think Prevention!**

Teach kids to avoid:

- walking barefoot while on grass
- playing in areas where insects nest or congregate
- drinking from soda cans outside

## **Poison Ivy/Oak/Sumac**

Contact with the oil of poison ivy/oak/sumac plants can cause an allergic rash. Mild rashes can be treated at home, and mostly cause discomfort from itching, burning, or blistering. Severe, widespread rashes require medical treatment.

### **Signs and Symptoms:**

- an itchy red rash that appears within 4 hours to 4 days after touching the plant oil
- blisters that ooze clear fluid
- bumps and blisters that may be different sizes and look like streaks on the child's skin
- rash may begin to look crusty as it heals

### **What to Do:**

- Remove any clothing that has touched the plant or rash and wash all clothing recently worn.
- Gently wash skin and scrub under fingernails right away with soap and water.
- Cut fingernails short to keep the child from breaking the skin when scratching.
- Place cool compresses on the child's skin as needed.
- For itching: add oatmeal to the bath; use calamine lotion (**avoid using on the face or on the genitals**); and, if needed, give the child diphenhydramine.

### **Seek Medical Care if:**

- the rash covers a large portion of the body or is on the face or genitals
- the rash is getting worse despite the home treatment
- the skin looks infected (increasing redness, warmth, pain, swelling, or pus)

### **Seek Emergency Medical Care if the Child:**

- has a known severe allergy to poison ivy/oak/sumac
- develops swelling of the tongue or throat
- complains of chest tightness or difficulty breathing
- develops widespread redness or swelling
- was given a shot of epinephrine (EpiPen)

### **Think Prevention!**

- Teach kids what poison ivy/oak/sumac look like and how important they are to avoid.
- Make sure they always wear long-sleeved shirts and pants whenever playing close to these plants.
- Have kids wash their hands well when they come in from outside.