

Skin conditions and swimming

This fact sheet covers how you are able to participate in swimming and other disciplines, if you are living with some of the most common skin conditions.

What you need to know about skin

Skin is a protective barrier and it is important to maintain its integrity especially as chlorine present in most swimming pools is an anti-infective agent that tends to dry the skin. A good long shower after swimming will minimise this effect by reducing the binding of substances to the surface of the skin and it's a good idea to apply a moisturising skin lotion afterwards.

In addition it is advisable to keep well hydrated with fluids when training to keep the skin in optimal condition as dehydration makes it more susceptible to damage and infection.

When swimming in warm climates it is important to avoid sunburn by minimising exposure to sunlight as much as possible and regular application of high factor water proof sun cream when training outdoors in bright sunlight. Sunburn damages the skin causing it to blister and get infected so prevention is definitely better than cure where sunburn might occur. However some sun creams can be harmful to open water environments so it is worth looking into environmentally friendly products (see additional advice section.)



What you need to know about skin conditions and swimming

Eczema and psoriasis

Swimming is perfectly permissible if you suffer from eczema provided there is no recent flare up or secondary infection.

- Shower with lukewarm water before swimming, apply cream or ointment to protect your skin.
- After swimming have a long shower, avoid the water being too hot, use liberal amount of emollient gels and when you're dry use more cream than usual.
- Some may find chlorinated water and salt water pools irritating to their condition. If you find this you may find ozone pools better. However recent evidence suggests the bleaching effect of chlorine on skin reduces bacteria and is very beneficial for eczema.
- Similarly in psoriasis, which is another common non contagious skin condition characterised with patches or dry flaky skin (plaques), swimming is encouraged unless the plaques are infected.

- Salt water is particularly beneficial as it reduces any flaky skin improving appearance. Sunlight with outdoor swimming, combined with appropriate sun cream use can also help the condition.
- Like eczema, apply moisturising creams after swimming particularly in chlorinated pools.

Verrucas

Similar to warts on hands but on the sole of the foot, these are caused by a virus called HPV (human papilloma virus). They are very common in children and up to 5-10 per cent are affected at any one time.

- Verrucas have long been associated with swimming pools. The virus can gain access through small skin abrasions but there is no clear evidence that suggests swimming pools are the source.
- The evidence is conflicting about whether to cover them with water proof plasters or not, but they are not a reason not to swim.
- They usually go of their own accord anywhere between one to two years and only require treatment if painful.
- 'Verruca socks' tend to be a thing of the past although these commercial socks are permissible in pools, but wearing flip-flops on the poolside or in the communal showers may reduce the chances of infection.

Athlete's foot

This condition affects the skin between the toes and is caused by a fungus that thrives in warm moist conditions found in pools, this means swimmers are particularly susceptible.

- The contagious fungus gets in through little abrasions in the skin. The skin becomes reddened with white patches and is sometimes macerated/cracked and usually with intense irritation. In more extensive cases the rash can extend to the foot and even the nails themselves becoming infected with bacteria.
- Treatment involves keeping the skin dry and clean and to apply an anti-fungal cream obtainable from your pharmacist or GP for a few days until completely resolved.

- If the infection is more severe, your GP may need to prescribe antibiotics.
- To avoid recurrence ensure your skin is properly dried particularly between the toes, change socks regularly and minimise the time wearing trainers away from the pool.
- Flip-flops on poolside and in the showers may reduce the chances of infection.

Molluscum contagiosum

This is another very common rash affecting up to 10 per cent of children and is caused by a member of the pox virus family. This infection thrives in warm humid environments and is transmitted easily by close bodily contact/direct skin to skin contact. The lesions show as small white or pink isolated domed shaped spots numbering one to 20 each with indents that gradually increase in size. Lesions often appear in a scratch and can also spread if scratched.

- Like warts the virus often goes away after two to six months as the body rejects the virus that causes them but this can spread between children during this time by common use of towels so sharing should be avoided as should sharing kickboards.
- Swimming is permissible although the spots are best covered with a waterproof plaster, however if there are open sores or further infection it is best to stay out of the water until this is treated.
- Some doctors accelerate the healing process by freezing (cryotherapy), scraping (curettage) or application of a chemical cream such as salicylic acid, although often no specific treatment is necessary.

Skin conditions where swimming is not advised

Impetigo

This is an infection caused by the bacteria staphylococcus aureus which results in blisters with a yellowish discharge from the skin surface.

- It responds quickly to oral antibiotics but is very contagious and is one of the few skin conditions where it would be advisable not to swim until it is completely cleared up.
- Common sites are around the mouth and hands and it is important to use your own towel and not share as it can easily be transmitted person to person this way.

Cellulitis/Chickenpox/Exanthemata

Cellulitis is a superficial spreading infection where swimming should be avoided until resolved as should chickenpox (varicella) and other childhood exanthemata (childhood infection diseases with a rash).

Additional advice

For more information about skin conditions, please visit the following websites.

NHS Information on common skin conditions:

[nhs.uk/live-well/healthy-body/common-skin-conditions/](https://www.nhs.uk/live-well/healthy-body/common-skin-conditions/)

Environmentally friendly sunscreens:

[outdoorswimmingsociety.com/ocean-friendly-river-friendly-sunscreens/](https://www.outdoorswimmingsociety.com/ocean-friendly-river-friendly-sunscreens/)