

Herpes Gladiatorum

Public Information Sheet

What is herpes gladiatorum?

Herpes gladiatorum is a skin infection caused by herpes simplex type 1, the same virus that causes “cold sores.” It is also sometimes called “mat herpes” because it may occur among athletes, such as wrestlers, who are in direct skin-to-skin contact with others.

How is it spread?

It is spread by direct skin-to-skin contact. Athletes who have this skin infection can spread it to other athletes and family members. The virus can also be shed in saliva for several weeks after an infection is healed. Around 30 percent of high school wrestlers are infected or colonized with the virus but only around 3 percent are aware they carry the virus.

What are the signs and symptoms of herpes gladiatorum?

First episode: Before the blisters appear, a person may have a sore throat, swollen lymph nodes, fever, or tingling of the skin. Blisters usually appear two-12 days after exposure. Blisters occur in clusters on the face, arms, legs, or trunk, and they may burn or be painful or itchy. A person should seek medical attention immediately for blisters in or around the eyes.

Recurrent episodes: Signs and symptoms are similar, but usually milder. The blisters involve a smaller area of skin and don’t last as long.

Since herpes is sometimes confused with other viruses and because of the lifelong implications for athletes, laboratory testing is sometimes helpful to make a diagnosis and guide treatment.

Is there treatment?

Yes. Treatment may be accessed through a healthcare professional. Oral antiviral treatment can be used to treat or prevent this infection. Athletes should discuss this with their own physician.

When can the athlete return to competition?

Regardless of treatment, the athlete should not participate in practice or any sporting event until all blisters are fully scabbed over, and there are no new blisters and no swollen lymph nodes near the skin lesions for 72 hours. For the first episode, physicians will sometimes prescribe antiviral preventive treatment to keep the blisters from coming back.

The athlete should follow the same guidance for recurrent episodes. After a recurrent episode, antiviral preventive treatment may also be recommended.

Athletes should discuss treatment and preventive treatment with their own physician.

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What special precautions can I take to prevent spreading to others?

1. Always report any skin lesions or sores to your athletic trainer or coaching staff immediately. Take responsibility to protect other teammates and competitors.
2. Personal hygiene:
 - Shower immediately after practice, using soap and water.
 - Do not share soap, washcloths, towels, razors, or clothing.
 - Bring your own liquid soap.
 - Wash your towel after each use, using hot water with detergent (and bleach if possible), and dry on high heat setting.
 - Keep your gear and equipment clean.
3. Mats and equipment:
 - Practice and competition gear should be cleaned after use every day.
 - Headgear should be cleaned after use with a bleach wipe or other appropriate cleaning solution
4. Wash hands often with soap and water. Alcohol-based hand rub can be used if hands are not visibly soiled. Wash before and after competition or practice.
5. Avoid touching your eyes, nose, or mouth with your hands.
6. Do not touch, pick, or squeeze skin sores. The drainage is very infectious.

Cleaning and disinfecting

Use disinfectants approved by the U.S. Environmental Protection Agency (EPA) according to manufacturer recommendations: <https://www.epa.gov/pesticide-registration/list-h-registered-antimicrobial-products-label-claims-against-methicillin>.

- Mats: wash after every practice session or competition.
- Locker rooms and shower areas: clean and disinfect daily.