

An infection of the deep layers of skin (cellulitis)

Emergency Department

Information for Patients

Produced: February 2025

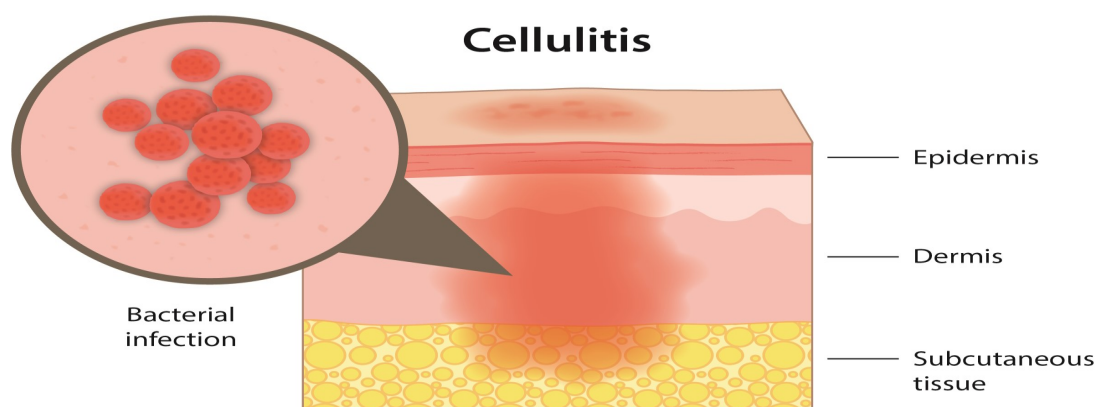
Updated: December 2025

Review: February 2028

Leaflet number: 1588 Version: 1.1

What is cellulitis?

Cellulitis is an infection of the deep layer of skin (dermis). It can also affect the layer of fat and other tissues just under the skin (the subcutaneous tissues).



What causes cellulitis?

The skin usually stops bacteria getting into the body, but a break in the skin may let bacteria in. A break in the skin may be caused by a:

- cut or graze
- burn
- bite
- athlete's foot
- skin ulcer or a skin condition, that causes the skin to become dry and cracked

The bacteria can then spread under the skin surface. This causes an infection.

Sometimes a break to the skin is not found. In these cases, the infection is usually introduced

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

through the blood, or a series of vessels and glands that is part of the immune system (the lymphatic system).

What are the symptoms of cellulitis?

- The lower leg is the most common place for cellulitis, but it can be any area of skin.
- The skin will feel hot or warmer than healthy skin. It will be uncomfortable to touch.
- It will look red. It could be shiny. You may have blisters.
- The affected area and even limb may become swollen.
- You may feel generally unwell and you may have a fever.
- You may even notice your lymph glands (part of your body's immune system) near to the affected area become swollen and tender. For example, if you have cellulitis in your leg, the glands in your groin may swell. This is because your lymph glands are trying to fight off the cellulitis infection to stop it spreading to other parts of your body,

What treatment will I need?

Not everyone will have the same treatment. The clinician that has treated you will guide you through your treatment plan.

It will be based on your symptoms, test results, such as blood tests and observations and your medical history.

What medications are used?

Antibiotics and pain killers are used. The way that they are given and the type varies, see below for more information.

Antibiotics taken by mouth

- May take up to 24 hours to start working.
- It is important you finish the antibiotic course as explained. This is to make sure the infection has completely gone, even if you feel better and the area looks normal again.
- Antibiotics can make you feel sick and have diarrhoea. They may cause thrush in women. You can get treatment from your local pharmacy.
- If you are worried, or your symptoms do not get better, call your GP for advice or call NHS 111
- In rare cases, antibiotic can cause a severe and potentially life-threatening allergic reaction known as anaphylaxis.

Call 999 or go to A&E now if:

- you have a skin rash that may include itchy, red, swollen, blistered or peeling skin,
- you are wheezing,
- you have tightness in your chest or throat,
- you have trouble breathing or talking,
- your mouth, face, lips, tongue or throat start swelling.

Antibiotics in hospital

We may advise you to stay in hospital so we can give to have antibiotics into a vein. This can sometimes, eventually be done at home, or swapped to antibiotics taken by mouth.

Other medications

You may have been prescribed stronger painkillers from the hospital, such as codeine or dihydrocodeine. Please take as advised. This medication belongs to a group of medications called opiates. They can cause constipation (find it hard to poo) so you may need to buy some laxatives from the pharmacy to help.

It may also make you feel drowsy and not able to drive or operate machinery.

Not everyone needs stronger pain killers. Simple painkillers such as paracetamol are advised, if you do not have an allergy to it, as it helps ease pain and reduce fever.

It is best to take paracetamol regularly for a few days, rather than every now and then, to keep the discomfort under control.

Please read the leaflet in the box before use and do not take any other paracetamol products at the same time such as cold and flu remedies or co-codamol.

Paracetamol dose is based on your weight. Please see the table below for the dose to take.

	Weight less than 40kg (6.2 stone)	Weight 41kg-49 kg (6.4 stone-7.7 stone)	Weight more than 50kg (7.8 stone)
Dose	500mg 4 times in 24 hours.	1g 3 times in 24 hours.	1g 4 times in 24 hours.
	Leave at least a 4 hour gap between doses.	Leave at least a 4 hour gap between doses.	Leave at least a 4 hour gap between doses.
	Maximum 4 tablets in 24 hours	Maximum 6 tablets in 24 hours	Maximum 8 tablets in 24 hours

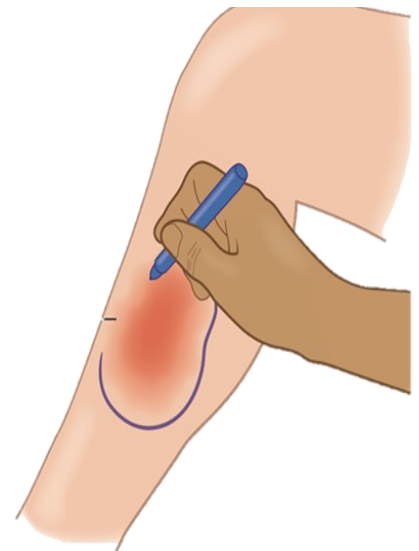
Anti-inflammatory medication such as ibuprofen can be used with paracetamol for a few days. Not everyone should take ibuprofen, based on your medical problems and medications you take, so read the leaflet in the packet or ask a pharmacist before use if you are not sure. Stop taking it if you get any tummy (abdominal) pain or acid reflux (burning feeling in your throat).

Other ways to help

- Keeping the area with cellulitis higher than the level of your heart will help reduce swelling.
- Resting the area is also important. But you must regularly move the joints around the area, to stop them getting stiff.
- Drink plenty of water to avoid dehydration.
- Use a plain moisturiser cream on unbroken skin. This will stop the skin from becoming dry and cracking.
- If the skin starts to weep you may need dressings. Contact your GP for further advice.
- As the cellulitis gets better you may notice your skin shedding. Gently wash the area. Keep it moisturised.
- If you have diabetes you may need to check your blood sugar more regularly as the infection can cause changes in your blood sugars.
- Look after the area, do not let it be in sunlight or get knocked or banged until it is better.
- Stopping smoking can improve your circulation and cut down your chances of getting cellulitis again.

If your symptoms get worse 48 hours after taking the antibiotics, or you start to develop the symptoms below, contact your GP right away or return to the emergency department.

- The redness and swelling spreads further. We will mark around the redness with a felt tip pen, so you can tell if it is spreading and getting worse.
- You start to feel feverish or more unwell
- If you feel sick or are vomiting
- Pain increases
- You become confused
- Your blood sugar levels become unstable (diabetics only)
- You are not peeing as much as normal.



Can I stop it happening again?

Not all cases of cellulitis can be prevented. There are some steps that can help reduce the risk of getting cellulitis again:

- Make sure that any cuts, grazes or bites are kept clean.
- Keep your fingernails short and try not to scratch your skin. If you do scratch your skin with short fingernails the risk of skin damage and infection will be less.
- Wash your hands regularly, particularly when treating, or touching a wound or skin condition.
- Keep your skin moisturised if your skin is dry, or prone to cracking, as bacteria can get in through cracked skin.



Risk factors

There are a number of factors, and conditions, which may increase your risk of developing cellulitis.

- Obesity
- A weakened immune system
- Diabetes, more in uncontrolled diabetes
- Circulation problems
- Lymphoedema (swelling in parts of the body)
- Previous episodes of cellulitis
- Injecting drug users
- Chickenpox, shingles or other skin conditions that cause openings to the skin
- Smoking
- Having a poor diet

If you would like help to lose weight, stop smoking or are worried a skin condition or your diabetes is not controlled, speak to your GP.

Contact details

Injuries Unit, Emergency Department: 0116 258 5727

GPAU 0116 258 2107

University Hospitals of Leicester Switchboard 0300 303 1573.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net