



Authoritative facts about the skin from the [New Zealand Dermatological Society Incorporated](#).

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Boils

Boils (also called furuncles) are a deep infection of hair follicles.

What are boils?

Boils present as one or more tender red spots, lumps or pustules. Careful inspection reveals that the boil is centred on a hair follicle. A boil is a deep form of bacterial [folliculitis](#); superficial folliculitis is sometimes present at the same time. [Staphylococcus aureus](#) can be cultured from the skin lesions.

If there are multiple heads, the lesion is called a 'carbuncle'. Large boils form abscesses, defined as an accumulation of pus within a cavity. [Cellulitis](#) may also occur, i.e. infection of the surrounding tissues, and this may cause fever and illness.

Boils



Abscess in diabetic

Image supplied by Dr Shahbaz A Janjua

Why do boils occur?

Most people with boils are otherwise healthy and have good personal hygiene. They do however carry *Staph. aureus* on the surface of their skins (Staph. carrier state). Why this occurs is usually not known, but it is estimated that 10– 20% of the population are Staph. carriers.

Staph. aureus is most commonly carried in the nostrils, armpits, between the legs and in the cleft between the buttocks. It may be transferred to other sites from the nostrils via the finger nails.

Tiny nicks or grazes or something rubbing against the skin can inoculate the Staph. germ into the wall of a hair

follicle which is a 'weak point' in the skin's defences. Once inoculated, the bacteria cause a boil which goes on to run its usual course of about 10 days.

Although most people with boils are otherwise healthy, boils are sometimes related to immune deficiency, anaemia, diabetes or iron deficiency.

Treatment

General measures:

- Consult your doctor about your general health.
- If you are overweight, try to reduce your weight; take regular exercise.
- Follow a balanced healthy diet with meat, plenty of fruit and vegetables.
- Wash your whole body once a day with soap and water. Wash your hands several times daily.
- Don't share your flannel or towel with other family members.
- Maintain a clean handkerchief and don't pick your nose!
- Change your underclothes and night attire regularly.
- Avoid leisure activities which cause sweating and friction from clothing, such as squash and jogging.
- If you are iron deficient, a course of iron tablets may help reduce infection.
- 1000mg of vitamin C each day has also been advocated.

Skin Cleansing Regime – ask your doctor for specific advice.

Some suggestions:

- [Antiseptic](#) cleanser in your daily bath or shower for a week then twice weekly for several weeks. The cleanser may cause a little dryness.
- Antiseptic or antibiotic ointment or gel to apply to the inside of the nostrils.
- Wipe the entire skin surface daily for a week with 70% isopropyl alcohol in water (this will make the skin dry).
- Apply a topical antiseptic such as povidone iodine or chlorhexidine cream to the boils and cover with a square of gauze.
- Your doctor may prescribe an oral [antibiotic](#) (usually the [penicillin](#) antibiotic flucloxacillin), sometimes for several weeks.
- Other members of the family with boils should also follow a skin cleansing regime. Your doctor may also advise the family to apply topical antibiotic to their nostrils in case they are *Staph. aureus* carriers as well.
- If the boils fail to clear up, a swab should be taken for microbiological culture, in case of [methicillin \(meticillin\) resistant staphylococci](#).
- Sometimes, special antibiotics may be prescribed on the recommendation of a specialist, including fucidin, [clindamycin](#), [rifampicin](#) and cephalosporins.

Related information

On DermNet NZ:

- [Staphylococcal infections](#)
- [Impetigo](#)
- [Folliculitis](#)

Other websites:

- [Folliculitis](#) – e-medicine dermatology, the online textbook

Books about skin diseases:

See the [DermNet NZ bookstore](#)

DermNet does not provide an on-line consultation service.
If you have any concerns with your skin or its treatment, see a [dermatologist](#) for advice.

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