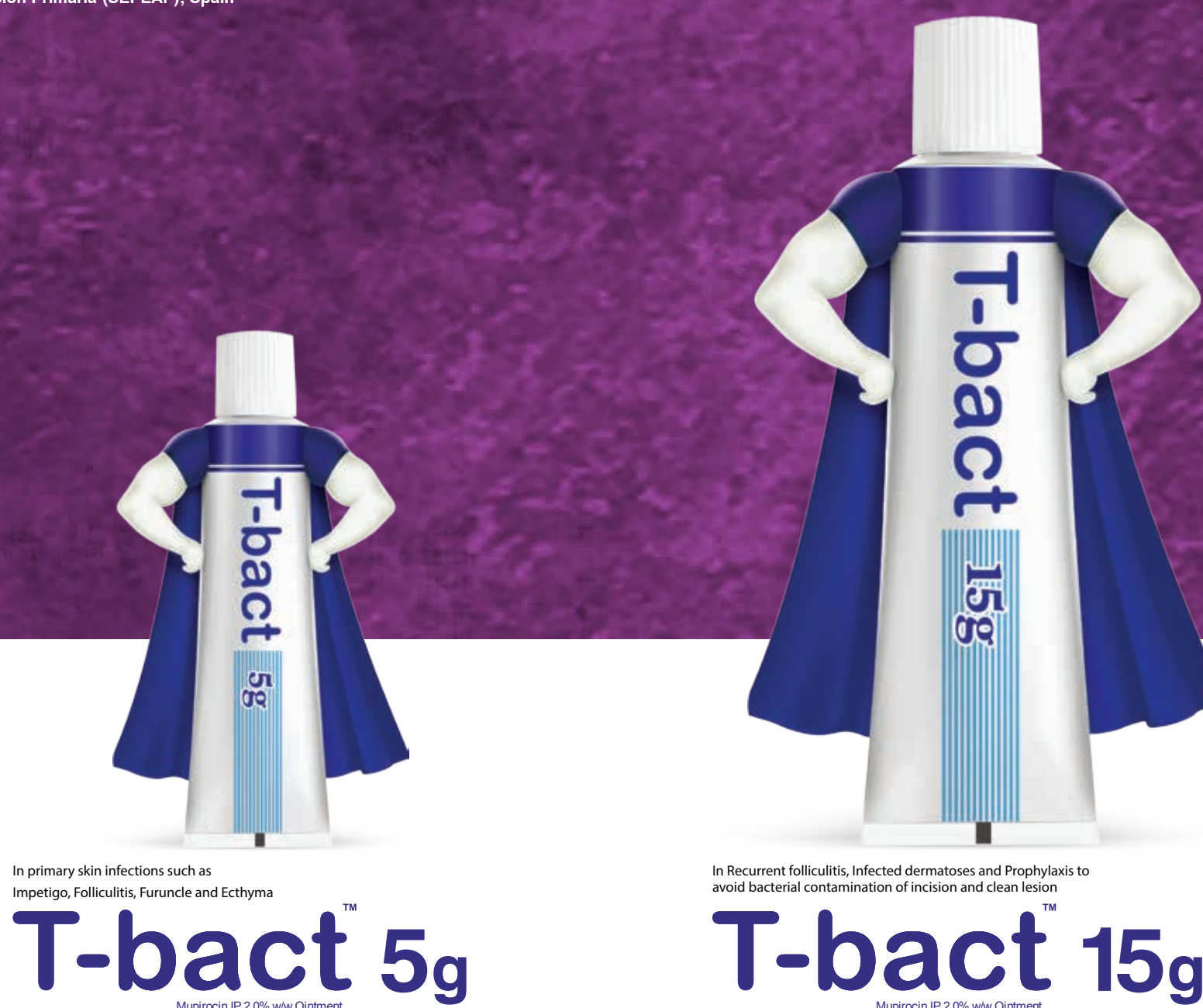# Mupirocin is recommended across guidelines for primary and secondary SSIs

Guidelines from Europe, USA, Australia, Korea, and India, recommend use of mupirocin with some variation in recommendations from country to country:

Guideline	Year	Guideline Recommendation
Therapeutic guidelines, Melbourne, Australia[1]	2009	Recommend mupirocin for infected, localised dermatitis, impetigo and folliculitis • For infected localised dermatitis, apply mupirocin 2% topically to crusted areas twice a day for 7 days • For impetigo, apply mupirocin 2% topically to crusted areas 8-hourly for 7 days • For mild forms of folliculitis if Staphylococcus aureus is isolated, topical mupirocin has been shown to be effective in hastening resolution
IDSA, USA[2]	2011	MRSA infections Pediatric: For children with minor skin infections (such as impetigo) and secondarily infected skin lesions (such as eczema, ulcers, or lacerations), mupirocin 2% topical ointment can be used MRSA infection in neonates & young infants: mild cases with localized lesions topical treatment with mupirocin may be adequate
ISD, Italy[3]	2011	Recommend mupirocin for superficiala bacterial skin infections suspected to be caused by MRSA • If MRSA is suspected, mupirocin should be administered on an empiric basis (i.e. before MRSA infection is confirmed)
IDSA, USA[4]	2014	• Recommend mupirocin for bullous and non-bullous impetigo • Mupirocin ointment should be administered 3 times daily for 5 days for adults and children • Presenting with a limited number of lesions caused by staphylococci and/or streptococci[4]
SEIP-AEPAP-SEPEAP consensus document on the aetiology, diagnosis and treatment of bacterial skin infections in out-patients,Spain[5]	2016	Recommend mupirocin for bacterial skin infections in children • In children with localised impetigo, mupirocin can be administered every 8 hours for 5–7 days • In paediatric patients with ecthyma, mupirocin is one of the option if the lesion is <2cm in size • Also, for children with folliculitis and furuncolosis
ICMR, India[6]	2017	For patients with local superficial skin infections, apply mupirocin ointment to lesions twice a day
Clinical Guidelines for the Antibiotic Treatment for Community-Acquired Skin and Soft Tissue Infection-South Korea[7]	2017	Recommend mupirocin for impetigo and ecthyma • For patients with a limited number of lesions

SSI: Surgical Site Infections   USA: United States of America   MRSA: Methicillin-Resistant *Staphylococcus aureus*   ISD: Italian Society of Dermatology   IDSA: Infectious Diseases Society of America
ICMR: Indian Council of Medical Research   SEIP: Sociedad Española de Infectología Pediátrica (SEIP)   AEPAP: Asociación Española de Pediatría de Atención Primaria (AEPaP), Spain
SEPEAP: Sociedad Española de Pediatría Extrahospitalaria y Atención Primaria (SEPEAP), Spain

In primary skin infections such as
Impetigo, Folliculitis, Furuncle and Ecthyma

T-bact™ 5g
Mupirocin IP 2.0% w/w Ointment

In Recurrent folliculitis, Infected dermatoses and Prophylaxis to avoid bacterial contamination of incision and clean lesion

T-bact™ 15g
Mupirocin IP 2.0% w/w Ointment

References: 1.Therapeutic guidelines: dermatology. Version 3 Melbourne: Therapeutic Guidelines Limited; 2009. ISBN: 9780980476439. West Melbourne, Victoria 3003, Australia. 2. Liu C et al. Clin Infect Dis 2011;52:285-92. 3. Italian Society of Dermatology, Medical, Surgical, Aesthetic and Sexually Transmitted Diseases. Guidelines and recommendations, 2011 4. Stevens DL et al. Clin Infect Dis.2014;59:e10–52. 5.Conejo-Fernandez AJ et al. An Pediatr (Barc) 2016;84:121.e1–121.e10. 6.ICMR Antimicrobial guidelines for prophylaxis and treatment of Surgical Site Infections. Treatment for Antimicrobial Use in Common Syndromes 2017. Available at: www.icmr. nic.in/guidelines. Last accessed March 2019. 7.Kwak YG et al. Infect Chemother 2017;49(4):301–325.