Dear Alice,

What is Chancroid?
What are the symptoms?
How is it diagnosed?
How is it treated?
What can happen if it's not treated?
How many children are affected by this and are newborn babies affected, too?

Answer

Dear Reader,

It seems you’re ready to sharpen your chancroid (starts with a "sh" sound) knowledge! On to it then: Chancroid is a bacterial infection transmitted through contact with sores on an infected individual's skin. The bacteria, *Haemophilus ducreyi*, can lead to painful, open sores and swollen lymph nodes, usually in the groin area. It's relatively rare in the United States (including in infants and children), and appears to be more prevalent in some regions of Africa and the Caribbean. It's also more common in those assigned male at birth that those assigned female at birth (but those assigned female can be asymptomatic carriers). A proper diagnosis is key to appropriate treatment, as symptoms of chancroid can be confused with primary syphilis. But, fear not, because it's treatable; antibiotics are typically used to speed up the healing process, but the sores may also clear up on their own. If left untreated though, chancroid can lead to skin damage. Keep reading for even more detailed information on the condition.

Chancroid is passed via skin to skin contact; despite often being considered as a sexually transmitted infection (STI) though, it can be passed on without sexual contact. In fact, an infected person could potentially spread it to other parts of their body if their hands touch the sores and then come in contact with other tissues. The two main symptoms of chancroid are sores and swollen lymph nodes. Infected individuals can expect to see the sores appear as tender, red bumps within a few days to two weeks after contact with an infected individual. The bumps develop into ulcers that may begin leaking yellow or gray pus and could bleed when scratched. These ulcers are typically one to two centimeters wide with ragged edges. Though these are commonly found on or near the genitals, there have been reported cases of chancroid lesions on
limbs as well.

To know for sure if a particular lesion is associated with chancroid, a health care provider typically examines the sores and swollen lymph nodes visually and collects a sample from one of the sores for a laboratory test. However, there may be hurdles in obtaining a definitive diagnosis in the U.S., as chancroid is rare and there is no current Federal Drug Administration (FDA) cleared test. The Centers for Disease Control and Prevention caution that due to the difficulty in obtaining an *H. ducreyi* culture, chancroid may be under diagnosed in the U.S. For those positively diagnosed, the condition is treated with antibiotics, which usually heal the sores quickly with minimal scarring in about three to seven days. As with any treatment regimen of antibiotics, taking all the medication as prescribed, even if someone starts to feel better before they have finished, is essential for maximum effectiveness. Treatment may also include draining lymph nodes if they are particularly swollen. Recovery times can vary, depending on the size of the ulcer(s) and the individual. A follow-up appointment to see a health care provider at the end of the treatment period is advised to ensure that the infection has cleared up. Testing for HIV and syphilis both at the time of the initial chancroid test and three months after may also be recommended.

Furthermore, folks with a chancroid infection are advised to avoid having vaginal, anal, and oral sex until the treatment is complete and their ulcers are healed. Additionally, having any sexual partners also be evaluated (and if necessary, treated) if they’ve had sex within ten days prior to the infected individual’s diagnosis is typically a part of the treatment process as well. With those recommendations in mind, it’s also good to be aware of what may happen if the condition is left untreated. Without proper diagnosis and treatment, it can cause damage to the skin and genitals. Specifically, ulcers on uncircumcised penises have the highest risk of scarring from chancroid, which then may need to be treated with circumcision. Having a chancroid infection has also been associated with an increased risk of contracting (and transmitting) HIV. And, folks living with HIV who become infected with chancroid may experience slower healing.

Early detection is key to reducing symptoms and transmission. When a person knows what their body looks and feels like when healthy, noticing a change becomes easier. If that change warrants further investigation, it’ll be easier to know when it’s best to see a health care provider to take a closer look. And, as far as prevention is concerned, using barriers methods (such as external/internal condoms or dams) correctly and consistently may help. However, keep in mind that they won’t protect against chancroid if they aren’t covering area(s) with an active sore(s). For more information on STIs, getting tested, and safer sex strategies, take a look at the Q&As in the *Go Ask Alice! Sexual and Reproductive Health* archives.

Alice!
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