mucosa. Fluconazole is reportedly more effective than nystatin, but it does not have US Food and Drug Administration approval for use in infants (Maley and Arbiser, 2013).

Nursing Alert

Oral candidiasis can be distinguished from coagulated milk when attempts to remove the patches with a tongue blade are unsuccessful. The primary caregiver may also report that the infant does not nurse well or bottle feed as previously.

Nursing Care Management

Nursing care is directed toward preventing spread of the infection and correctly applying the prescribed topical medication. For candidiasis in the diaper area, the caregiver is taught to keep the diaper area clean and to apply the medication to affected areas as prescribed (see also Diaper Dermatitis, Chapter 10). Older infants with candidal diaper dermatitis can introduce the yeast into the mouth from contaminated hands. Placing clothes over the diaper can prevent this cycle of self-infection.

In cases of oral thrush, nystatin is administered after feedings. Distribute the medication over the surface of the oral mucosa and tongue with an applicator or syringe; the remainder of the dose is deposited in the mouth to be swallowed by the infant to treat any gastrointestinal lesions.

In addition to good hygienic care, other measures to control thrush include rinsing the infant's mouth with plain water after each feeding before applying the medication and boiling reusable nipples and bottles for at least 20 minutes after a thorough washing (spores are heat resistant). If used, pacifiers should be boiled for at least 20 minutes once daily. If the mother is breastfeeding, it is recommended that simultaneous treatment of the infant and mother occur if either is infected (Lawrence and Lawrence, 2011).

Herpes Simplex Virus

Neonatal herpes is one of the most serious viral infections in newborns, with a mortality rate of up to 60% in infants with disseminated disease. Approximately 86% to 90% of herpes simplex