SYMPTOM

Vesicles

Vesicles are small, raised skin blisters filled with clear or cloudy fluid.

WHAT IT FEELS LIKE
Small fluid-filled bumps that may itch, sting, or hurt

WHERE IT IS FELT
Skin, especially hands, feet, lips, or rash areas

MOST COMMON CAUSES
Friction, contact dermatitis, eczema

WHEN IT IS URGENT
Blisters near an eye with pain or vision changes

USUALLY LASTS
Days to weeks, based on the cause and skin healing

SEE A DOCTOR IF
Blisters are unexplained, recurring, infected, widespread, or slow-healing

Overview

Vesicles are small, raised pockets of fluid on or just under the skin. They are often called small blisters. A larger blister may be described as a bulla .

Vesicles are a symptom rather than a disease. They form when fluid collects between layers of skin. This can happen after rubbing, irritation, an allergic reaction, eczema, infection, a burn, or another skin condition.

Their location and pattern can offer clues. For example, friction often causes a single blister, while eczema may produce clusters of tiny, itchy vesicles. However, appearance alone cannot confirm the cause.

Avoid deliberately opening a vesicle. The unbroken skin helps protect the area underneath from infection.

What it may feel or look like

A vesicle may look like a clear, pearl-like bump. Its fluid can also appear yellowish, cloudy, or blood-stained. Some vesicles break quickly and leave a moist or crusted area, so you may not

notice the original blister.

Depending on the cause, vesicles may:

Grouped, painful vesicles may occur with herpes infections. Very itchy vesicles along the sides of the fingers or on the palms and soles can occur with dyshidrotic eczema. A blister caused by footwear usually appears over a pressure or rubbing point.

- Itch, burn, tingle, or feel sore
- Appear alone or in groups
- Develop on red, swollen, or otherwise normal-looking skin
- Leak clear fluid and then form a crust
- Occur with scaling, cracks, pain, or swelling

Common causes

Friction and minor injury are frequent causes. Shoes, tools, sports equipment, or repeated rubbing can separate skin layers and create a fluid-filled pocket. Minor heat or sunburn can also blister.

Contact dermatitis is inflammation caused by something touching your skin. Irritant contact dermatitis may follow exposure to soaps, detergents, solvents, or repeated wet work. Allergic contact dermatitis is an immune reaction to a substance such as nickel, fragrance, a plant, or an ingredient in a skin product.

Eczema can produce itchy vesicles. Dyshidrotic eczema mainly affects the hands and feet, where it causes tiny, deep-looking blisters. Other forms of eczema may ooze or blister during a flare.

Viral infections are another possible cause. Cold sores and genital herpes can cause grouped vesicles that become shallow sores. Shingles usually causes pain, sensitivity, or tingling followed by a blistering rash on one side of the body or face. Chickenpox can cause widespread crops of itchy vesicles.

Less common causes include bacterial skin infections such as bullous impetigo, reactions to medicines, autoimmune blistering diseases, insect or plant exposure, and skin conditions linked to gluten sensitivity.

A chemical, electrical, or more serious heat burn can also cause blisters and may injure tissue beneath the visible skin.

When to seek medical care

Arrange a routine appointment if the vesicles have no clear cause, keep returning, spread, or do not begin to heal. You should also seek advice if they interfere with walking, sleep, work, or daily activities.

Contact a healthcare professional promptly if you notice signs of infection, including increasing warmth, swelling, tenderness, pus, spreading redness, or fever. Same-day assessment is also appropriate for painful vesicles on the forehead, nose, eyelid, or near an eye, particularly if you have eye redness or vision changes.

Seek urgent medical care for a rapidly spreading, painful blistering rash, especially when it involves the mouth, eyes, or genitals, or when skin is peeling. This can occasionally represent a serious reaction or infection.

Call emergency services if blistering occurs with trouble breathing, faintness, or swelling of the lips, tongue, or throat. Emergency care is also appropriate after a significant chemical or electrical burn, or a large or deep heat burn.

Earlier assessment may be needed if the affected person is a newborn, has a weakened immune system, has poor circulation or reduced feeling in the area, or is seriously unwell.

How the cause is found

A clinician will usually examine the vesicles and the surrounding skin. They may ask when the bumps appeared, whether they itch or hurt, and whether you had recent friction, burns, illnesses, new medicines, or contact with unfamiliar products.

The pattern matters. Useful details include whether the vesicles are grouped, limited to one side, present between the fingers, or found on the palms, soles, lips, or genitals.

Testing is not always needed. When the cause is uncertain, a clinician may take a swab to look for a virus or bacteria. A skin scraping can help identify a fungal infection. Patch testing may be used when an allergic contact reaction is suspected.

Occasionally, a small skin sample called a biopsy is examined under a microscope. Blood tests or specialised testing may be needed when an autoimmune blistering condition is possible.

Treatment and self-care

Treatment depends on why the vesicles formed. Antiviral medicine may be considered for

some herpes infections, antibiotics like amoxicillin or doxycycline for certain bacterial infections, and anti-inflammatory treatments for eczema or contact dermatitis. A clinician can advise whether treatment is needed and how soon it should begin.

For a minor, intact blister:

If a vesicle breaks, let the fluid drain without pulling off the remaining skin. Wash the area gently and apply a fresh dressing. Avoid using irritating antiseptics unless a healthcare professional recommends one.

Cool compresses may ease itching or burning. A plain, fragrance-free moisturiser can support the skin barrier when dryness or eczema is involved. Ask a pharmacist or clinician before using medicated creams on the face, genitals, broken skin, or a possibly infected area.

Do not share towels, razors, lip products, or other items if an infection may be responsible. Wash your hands after touching or dressing the area.

- Gently wash and dry the skin
- Cover it with a clean, non-stick dressing
- Reduce rubbing or pressure on the area
- Change the dressing if it becomes wet or dirty
- Do not peel away the skin covering the blister

What to expect

A simple friction blister often improves once rubbing stops and new skin forms underneath. Vesicles from mild irritation may settle after the trigger is removed.

Eczema and allergic contact reactions can return if the skin is exposed to the same trigger. Keeping track of products, activities, and exposures before each episode may help identify a pattern.

Viral vesicles usually crust and heal, although some viruses remain in the body and can cause later episodes. Shingles pain can sometimes continue after the rash has cleared, particularly in older adults.

Blisters caused by infection, medicine reactions, burns, or autoimmune conditions have different courses. Follow-up may be needed to check healing, review test results, or prevent further episodes.

Common questions

Are vesicles contagious?

The vesicles themselves are not always contagious. Those caused by herpes, chickenpox, shingles, or some bacterial infections can spread infection. Friction blisters, eczema, burns, and allergic reactions do not spread from person to person.

Should I pop a vesicle?

Usually not. Keeping the blister roof intact protects the tender skin below. A very large or painful blister may sometimes be drained in a clean setting while preserving its covering.

Does cloudy fluid always mean infection?

No. Blister fluid can become cloudy as inflammation and skin cells collect in it. Infection is more concerning when cloudiness occurs with worsening pain, warmth, pus, spreading redness, or fever.

Can stress cause vesicles?

Stress does not directly explain every blister. It may contribute to eczema flares or herpes recurrences in some people, but other causes should be considered when vesicles are new, persistent, or unusual.

Sources

- National Health Service. Blisters . NHS health information.
- American Academy of Dermatology Association. Dyshidrotic eczema: Signs and symptoms . Patient education resource.
- Centers for Disease Control and Prevention. Clinical Overview of Shingles (Herpes Zoster) .
- DermNet. Blistering skin conditions . Dermatology reference.
- Merck Manual Consumer Version. Overview of Blistering Disorders . Consumer health information.