

Diagnostic features: Intense itch and rash, often worse at night and when hot; sometimes burrows can be seen in the interdigital web spaces.



Tiny mites lay eggs in the skin, leaving silvery lines with a dot at one end.



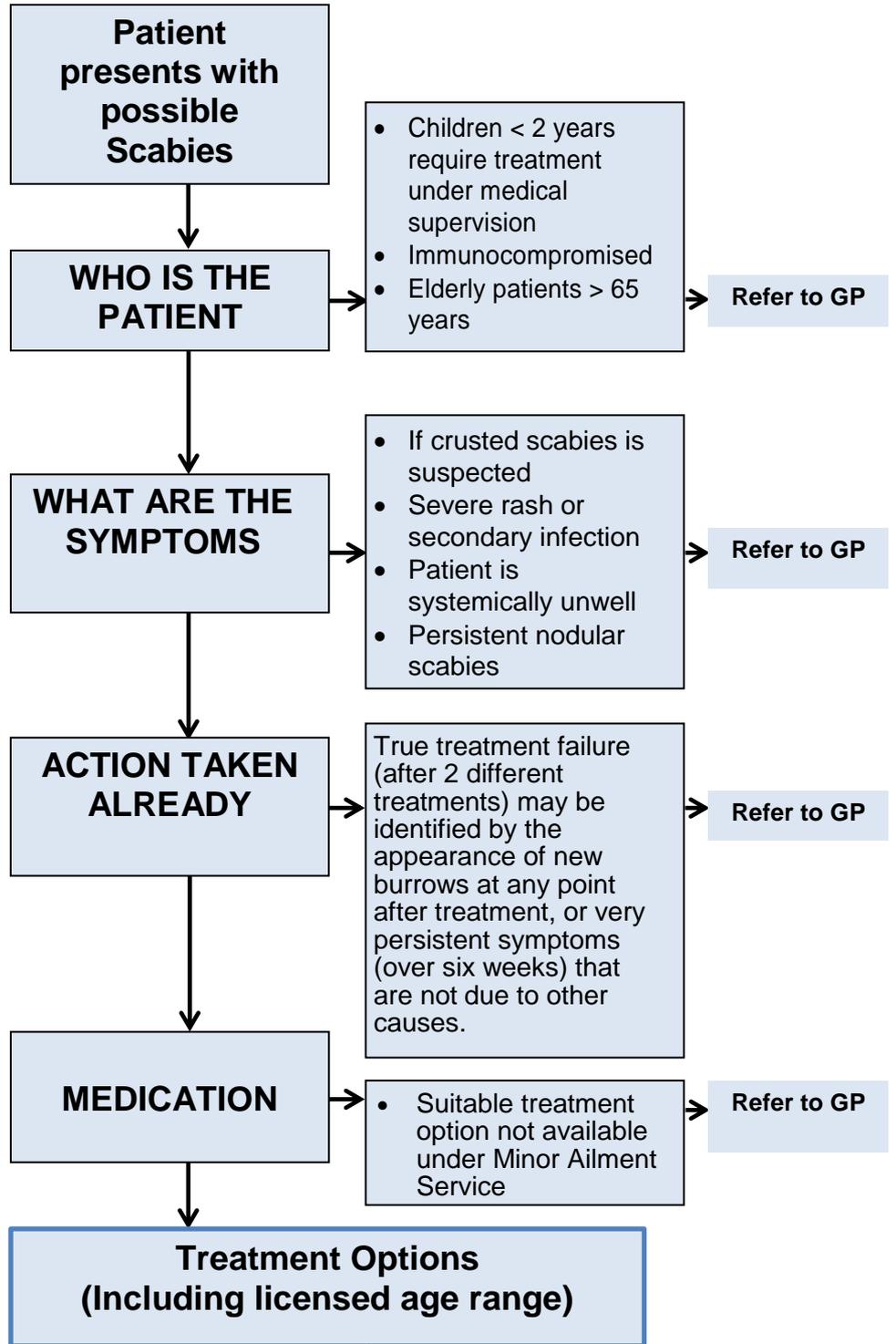
The rash can appear anywhere, but it often starts between the fingers.



The rash spreads and turns into tiny red spots.

All those in the household and those with whom there is close contact need to be treated simultaneously (within a 24-hour period), regardless of whether they have symptoms.

Individual pharmacy vouchers should be produced for all patients and a multiple consultation form completed. **Only ONE consultation fee should be claimed.**



- First line treatment: Permethrin 5% cream (Lyclear®) > 2 years old
- Second line treatment if permethrin contraindicated or not tolerated: Malathion aqueous 0.5% (Derbac M® liquid) > 2 years old

For people whose symptoms persist for longer than 2–4 weeks after the last treatment application, and/or if new burrows have appeared since treatment, provided treatment has been applied correctly, advise retreatment with alternative.



SCABIES

What are the aims of this leaflet?

This leaflet has been written to help you understand more about scabies. It will tell you what it is, what causes it, what can be done about it, and where you can find out more about it.

What is scabies?

Scabies is a common and very itchy skin condition caused by a tiny mite called *Sarcoptes Scabiei*. It can affect people of any age but is most common in the young and the elderly.

What causes scabies?

The mites that cause scabies are tiny parasites, smaller than a pinhead. They are usually spread by direct skin-to-skin contact with someone who already has scabies and sometimes, but rarely, from shared clothing, towels or bedding. Scabies on pets is caused by a different type of mite and therefore cannot infect humans. People with scabies have an average of about a dozen adult mites on their skin; a few carry many more. Anyone can get scabies. Rarely, a variant of scabies called crusted scabies (Norwegian scabies) can occur in patients who have a poor immune system or who are elderly and ill due to other conditions. There are thousands of scabies mites on the skin in this variant and it is highly contagious.

Is scabies hereditary?

No, but it is common for several members of a family to have it at the same time as it spreads easily when people live together.

What are the symptoms of scabies?

Itching is the main symptom of scabies, usually starting about a month after the mites are picked up. The itching can affect the whole body apart from the head and neck, although the elderly and infants may develop a rash on their head and neck. The itch often gets worse at night. It is common for several people in the same family, and their friends, to become itchy at roughly the same time.

What does scabies look like?

The rash of scabies is a mixture of scratch marks and tiny red spots; scratched areas may develop crusty sores which can become infected and develop into small pus spots. A widespread rash similar to eczema (dermatitis) is very common. The itchy rash can cover much of the body, but the mites are found mainly in the folds of skin between fingers and toes, the palms of the hands, the wrists, ankles and soles of the feet, groins and breasts. The scabies mites burrow into the skin in these areas to lay their eggs. The mites burrow into the skin leaving tiny spots and silver coloured lines on the skin. Adult mites are tiny, only about 0.4 mm long, appearing through a magnifying lens or dermatoscope as a tiny dark dot lying at the end of a burrow.

How is the diagnosis of scabies made?

Your doctor will usually be able to diagnose scabies on the basis of the family history and on examination of the rash. To confirm the diagnosis the doctor may wish to scrape off a small superficial section of skin to be sent for examination under a microscope.

Can scabies be cured?

Yes, with the right treatment, it clears up quickly and completely; but if it is not treated, scabies lasts for months or even years. However, even after the mites have been killed by treatment the itching usually carries on for a few weeks before settling.

How should scabies be treated?

The treatment of scabies involves:

1. Using medication to get rid of your own scabies.
2. Making sure that you, family members, friends and any sexual contacts are all treated at the same time whether they are itchy or not.

Several preparations are effective in the treatment of scabies. Of these, permethrin cream and malathion liquid are the ones used most commonly in

the U.K. It is worth checking that the preparation you have been given is one specially designed for use in scabies, as both agents are available in several formulations, some of which are useful only for head lice. Your doctor may suggest different preparations for women who are pregnant or breast-feeding, or for babies.

Follow the instructions issued with your treatment in detail; they will be based on the following principles:

- The mites may be anywhere on the skin, so the treatment must be applied to all areas of skin below the neck in adults, all areas of skin in children including the scalp, and not just to the itchy parts.
- The treatment should be left on for at least 12 hours before being washed off.
- When you wash your hands or any part of your body, you should re-apply the treatment to the washed areas again.
- Two treatments, one week apart, are necessary to kill mites that have hatched out from eggs after the first application.
- One normal high temperature wash of bedding and clothes should eradicate mites. Items that can't be washed or dry cleaned can be sealed in a plastic bag for at least 1 week, or put in a freezer.
- Taking a bath before treatment is not necessary.

Finally, if you caught your scabies from a sexual partner, your doctor may want to check for the presence of other diseases that could have been picked up at the same time.

What can I do?

If you follow the instructions you are given, you should clear your scabies successfully. You must also make sure that all of your close contacts apply the treatment at the same time as you. Catching scabies again is, unfortunately, quite common.

Where can I find more information about scabies?

On the Internet:

<http://www.aad.org/dermatology-a-to-z/diseases-and-treatments/q---t/scabies>
www.medinfo.co.uk/conditions/scabies.html

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

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