

SCABIES

This infestation is caused by the mite *Sarcoptes scabiei*. Mites burrow into the skin where they lay eggs. The resulting offspring crawl out onto the skin and make new burrows. Any part of the body may be affected, and transmission is by skin-to-skin contact.

Diagnosis

- Clinical - often confused with other itching conditions such as eczema
- Characteristic silvery lines may be seen in the skin where mites have burrowed
- Itchy papules on the penis are almost certainly scabetic
- Use a magnifying glass to examine lesions
- Offer a full STI screen

Management

- Avoid body contact until client, their partner(s) and all household members have completed treatment
- Itch can be managed symptomatically with antihistamines + Eurax cream. 1% hydrocortisone cream can also be used, for a maximum of 7 days.
- Potentially contaminated clothes and bedding should be washed at high temperature (>50°C)
- All members of the affected household should be treated simultaneously
- All sexual partners in the preceding 2 months should be treated
- Patients should be given a detailed explanation of their condition, and clear and accurate written information on applying the treatment.
- Itch may persist for several weeks – retreatment too soon often results in the development of hypersensitivity to scabicide, thus compounding the itch

First Line Treatment

Permethrin 5% cream (Lyclear Dermal Cream))

Apply to whole body including scalp, neck, face, and ears:
include groin, genitals, navel, skin under nails, underneath the foreskin, between buttocks and soles of feet. Do not wash hands after application! If hands are washed within 12 hours of application, then reapply.

(Wash cream off after 12 hours (usually overnight))

Repeat after 7 days

(large patients may require 2 x 30g tubes)

Permethrin is safe during pregnancy or breast-feeding.

Alternative Treatments

- Malathion 0.5% (Derbac-M, Prioderm, Quellada M) – apply to whole body and wash off after 24 hours. If hands are washed within 24 hours of application, then re-apply. Repeat treatment after 7 days

Partner/ Contact Notification

- Trace and treat all sexual and household or institutional contacts over previous 2 months

Follow up

- Retreat if new burrows appear

References

BASHH (British Association of Sexual Health and HIV) Clinical Effectiveness Group): United Kingdom National Guideline on the Management of Scabies infestation (2008) plus amendment November 2011. [Accessed online June 2016]

NICE Clinical Knowledge Summary: Scabies. December 2011. [Accessed online June 2016]