

#MADEEASY



PARASITIC INFECTIONS:
SCABIES





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- Scabies is a highly contagious parasitic skin infestation.
- It is caused by the mite *Sarcoptes scabiei* var. *hominis*.
- The mite burrows into the skin, leading to intense itching and a characteristic rash.
- Scabies is transmitted through prolonged skin-to-skin contact, affecting families, schools & nursing homes.
- *Imagine the mite to be a mouse in the house, trying to make his burrow in the walls (skin).*

Pathogenesis

- *Sarcoptes scabiei* mites burrow into the stratum corneum, causing *mechanical irritation and a delayed-type hypersensitivity reaction*.
- The female mite lays eggs in the burrowed tunnels.
- Larvae hatch and move to the surface of the skin to continue the infestation cycle.



Clinical Features

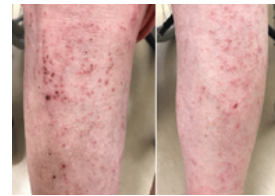
- **Primary Lesions:**
 - Burrows:* Thin, wavy, greyish-white lines on the skin represent the mite's tunnel. Red, inflamed lesions like papules, nodules, vesicles can appear due to the *immune response*.
 - Crusting may occur in more severe cases (especially in crusted scabies).
 - Severe itching, often worse at night, is the hallmark of scabies.*
 - It is caused by the immune system reacting to the mite, its eggs and its waste.*





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- **Secondary Lesions:**
Excoriations (due to scratching)
Eczema
Secondary bacterial infection (impetigo)



- **Common Sites:**
Webs of fingers
Wrists
Elbows
Axillae
Buttocks
Genital area



Types of Scabies



- **Classic Scabies:**
The most common form, characterized by itching, burrows and scattered red papules in common areas.
- **Crusted Scabies (Norwegian Scabies):**
A more severe form of scabies seen in immunocompromised individuals (HIV, elderly or those with neurological conditions).
Highly contagious, characterized by thick crusts and heavy mite infestation.
- **Nodular Scabies:**
Red-brown nodules especially in the genital and axillary regions.

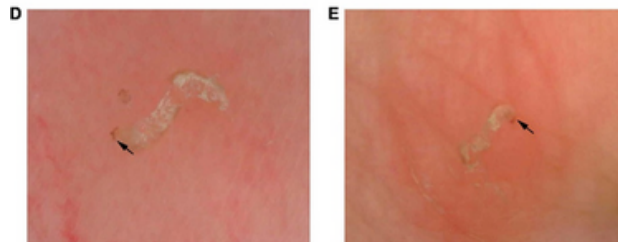




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Diagnosis

- Based on burrows, papules, and intense itching in areas commonly affected by scabies.
- Microscopic Examination of skin scraping from the burrows to identify mites, eggs, or feces.
- Dermoscopy may reveal the presence of a “jet with contrail” sign, indicating the mite at the end of the burrow.



Treatment

- Topical:
 - Permethrin 5% cream:** The first-line treatment applied to the entire body from the neck down.
The cream is left on overnight and washed off.
A second application after one week is recommended.
 - Benzyl Benzoate Lotion:** Another effective treatment, though it may cause skin irritation.
- Environmental **Decontamination:**
 - Bedding, clothing, and towels should be washed in hot water and dried on high heat to kill mites.
 - Items that cannot be washed should be sealed in plastic bags for at least 72 hours.
- **Antihistamines:** Used to control itching
- Oral Therapy:
 - Oral Ivermectin:** Single or repeated doses of oral ivermectin are used in crusted scabies or for large outbreaks.
 - Suitable for cases where topical therapy is impractical or in immunocompromised patients.





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Prevention

- **Close contacts**, Family members and sexual partners should also be **treated simultaneously** to prevent reinfestation.
- **Good hygiene practices**, including frequent washing of clothes and bedding, are essential in managing outbreaks.

Prognosis

- **With effective treatment**, scabies typically resolves within 1-2 weeks.
- **Itching may persist** even after successful treatment due to the body's immune response.
- **If untreated**, scabies can persist for months to years, leading to secondary complications such as bacterial infections.

Feature	Details
Causative Agent	<u>Sarcoptes scabiei</u> mite
Transmission	Prolonged skin-to-skin contact, contaminated bedding/clothing
Clinical Features	Burrows, intense pruritus, papules, nodules, excoriations
Common Sites	Fingers, wrists, elbows, axillae, waistline, genital area
Diagnosis	Clinical presentation, skin scraping, <u>dermoscopy</u>
Treatment	Permethrin 5% cream, oral <u>ivermectin</u> , environmental cleaning
Complications	Secondary bacterial infection (impetigo), crusted scabies in <u>immunocompromised</u>

