

Scabies is caused by a mite called *Sarcoptes scabiei*. It is transmitted by close body contact with an infected person. Rarely bed linen or clothes may pass on the mite.

Symptoms and signs	<ul style="list-style-type: none"> Residents usually complain of itching, this can take 4-6 weeks to develop. However, older people may not always get an itch with scabies. Generalized itch worse at night. Silvery lines may be seen on the skin and interdigital folds, wrists, elbows and breasts in women. Papules/nodules may result from itching. In immunosuppressed patients, such as patients with HIV, crusted lesions (Norwegian scabies) are a significant risk of transmission to others.
Diagnosis	<ul style="list-style-type: none"> Clinical diagnosis by the GP of the resident or staff member Scrapings taken from burrows may be examined under light microscopy to reveal mites. There may be diagnostic confusion with other itching skin conditions like eczema.
General advice	<ul style="list-style-type: none"> Before applying treatment to resident, read product information leaflet carefully. Two full body treatments are required to cases and contacts, to be applied 7 days apart. It is best to apply at night. Do not have a hot bath or shower before putting on the cream. Cases and close contacts should be treated at the same time so the mites do not pass back to a treated person. Bedding, clothing and towels should be washed at high temperature to destroy mites. Items that can't be washed or dry cleaned should be sealed in a plastic bag for at least 72 hours or put in a freezer. Advise that the itch may persist for several weeks, Crotamiton cream (Eurax) may help as may antihistamines.
Treatment	<ul style="list-style-type: none"> 1st choice - Permethrin cream (Lyclear®) 5% cream - this is safe to use in pregnancy and breastfeeding. Must remain in contact with the skin for 12 hours and should be washed off after this time. 2nd choice - Malathion liquid (Derbac M®), must remain in contact with the skin for 24 hours and should be washed off after this time. Apply to the whole body below the ears paying particular attention to the areas between the fingers and toes, wrists, armpits, external genitalia, buttocks and under finger and toenails. Allow it to dry before getting dressed. Residents or staff with crusted scabies may need 2-3 applications of the treatment on consecutive days.
Advice for partners & Contact tracing	<ul style="list-style-type: none"> Advise resident to avoid close body contact until they and partner(s) have finished treatment. Contacts from the previous 6 weeks should be traced. Two applications of treatments for asymptomatic contacts is required. Second treatment to be applied 7 days after the first application. Close family members, frequent visitors and sexual partners of confirmed cases e.g. contact of a staff member, should be treated and offered examination. Ideally treat all current contacts at the same time. Staff members who are identified as close contacts should be offered treatment.