

'Scabies' comes from the Latin word 'scabere', meaning 'to itch'. Scabies is caused by the *Sarcoptes scabiei*

parasite, which only infects humans. It is a highly contagious and extremely itchy skin infection caused by tiny mites the size of a pinpoint. Anyone can catch scabies and it has nothing to do with personal hygiene. It is transmitted from person to person through close bodily contact and to a lesser extent through sharing infected clothes, duvets, sheets and towels (Collins, 2003; keepkidshealthy.com).

Once the scabies mites have attached themselves to the skin (usually in moist skinfolds, such as between the fingers or toes, under the arm, inside the elbow creases), they burrow under the skin and lay eggs that hatch into adult mites approximately 10 days later. The adults then mate again on the skin and the cycle begins once more. The presence of the mites causes a hypersensitive or allergic reaction, resulting in intense itching (Collins, 2003; keepkidshealthy.com; Leary, 1990).

Symptoms

The symptoms of scabies may take up to 6 weeks to appear and include:

- Intense itching, especially at night.
- A red rash consisting of small bumps that have a flea-bite type appearance or resemble the vesicles of chicken pox, eczema, impetigo or a combination of these rashes.

- Small grey lines or tunnel-like burrows may be evident on the surface of the skin, surrounding the bumps in the affected areas.
- Sores, blisters and scabs may develop as a result of scratching.
- Inflamed lumps on the body.
- Fussiness in infants (Collins, 2003; keepkidshealthy.com; Leary, 1990).

Diagnosis

If your child is scratching intensely or shows any other signs of scabies, consult your doctor within 24 hours. If left untreated, the extreme scratching may result in impetigo. It is often difficult to diagnose scabies because of the secondary rashes produced by the intense itching. Scabies is suspected if any unusual, extremely itchy skin sore is present for several weeks, does not respond to the usual remedies and appears to be spreading. Also, if any of your child's caregivers have an intensely itchy rash, usually on their arms, and your baby is showing signs of fussiness, it may be a clue that she has scabies. In order to confirm the diagnosis, your doctor may place mineral oil on an infected area and scrape the burrows or new lesions, since these are the most likely to contain eggs or mites. The scrapings of the mites are then looked at under a microscope (Collins, 2003; keepkidshealthy.com; Leary, 1990).

Treatment

- The main treatment for scabies is a prescription lotion containing benzyl benzoate that kills the scabies mites. Apply the lotion at least once a day, preferably at night after your child has had a warm bath and you have scrubbed the lesions with a stiff brush, to allow for better penetration of the lotion. Apply the lotion to all areas of the body, except for the head and neck. Wash it off after 24 hours and repeat for 3 days or more. Children are no longer considered to be contagious 24 hours after starting treatment.
- All family members are usually treated, even if they have no obvious symptoms.
- Additional measures that may help control the itching are the use of antihistamines and steroid creams.
- The application of a soothing anti-itch compound, such as calamine lotion, may bring your child a certain measure of relief.
- Although the mites usually die within 3 days of treatment, the rash and itching produced by scabies can last for several weeks as your child's body heals from the allergic reaction.
- After treatment, wash and iron all clothing and bed linen. It is unnecessary to scrub the entire house because scabies mites are only able to survive for a few days without a warm nesting place (Collins, 2003; keepkidshealthy.com; Leary, 1990).