

# SCABIES EDUCATION

All scabies control plans should address educational needs and training of direct care staff (such as nurses, physicians, and health care students). General information should also be provided for residents, families, volunteers, and/or other visitors. Adequate and accurate knowledge about scabies treatment and control will improve understanding, reduce anxiety, and facilitate outbreak control. Included in this section are informational materials for staff, patients, families, and visitors.

During a scabies outbreak, information should be provided to all affected individuals, including staff, patients, families, and visitors. Preparing as much information as possible prior to an outbreak will save valuable time if an outbreak occurs and control measures need to be put into place. Frequently asked questions include:

- ▲ What is scabies?
- ▲ How is scabies transmitted?
- ▲ What is the scope of the outbreak?
- ▲ When did the outbreak begin?
- ▲ What methods are being used to control the outbreak?
- ▲ What medications are being used to treat the outbreak?
- ▲ Who is the contact liaison for additional information regarding the outbreak?
- ▲ To whom should additional scabies cases be reported?

Additional information is available through the Centers for Disease Control and Prevention web site at:

[http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht\\_scabies.htm](http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht_scabies.htm)

# SCABIES FACT SHEET

## FOR PATIENTS, FAMILY, AND VISITORS

### **What is scabies?**

Scabies is a fairly common infestation of the skin caused by a mite. Scabies mites burrow into the skin producing pimple-like irritations or burrows.

### **Who gets scabies?**

Scabies infestations can affect people from all socioeconomic levels without regard to age, sex, race or standards of personal hygiene. Clusters of cases, or outbreaks, are occasionally seen in health care facilities, institutions, and child care centers.

### **How is scabies spread?**

Scabies mites are transferred by any direct skin-to-skin contact. Indirect transfer from undergarments or bedding can occur only when these items have been in contact with an infected person immediately beforehand. Scabies can also be transmitted during sexual contact.

### **What are the symptoms of scabies?**

The most prominent symptom of scabies is intense itching, particularly at night. The areas of the skin most effected by scabies include the webs and sides of the fingers, around the wrists, elbows and armpits, waist, thighs, genitalia, nipples, breasts, and lower buttocks.

### **How soon do symptoms appear?**

Symptoms may appear two to six weeks after contact with the mite in people who have not previously been exposed to scabies infestations. People who have been previously infested with scabies mites may show symptoms within one to four days after re-exposure.

### **When and for how long is a person able to spread scabies?**

A person is able to spread scabies until mites and eggs are destroyed by treatment.

### **What is the treatment for scabies?**

The currently recommended treatment for scabies is 5% permethrin cream (Elimite) and is available through a physician's prescription. The lotion is applied to the whole body except the head and neck. When applied as directed, this product is approximately 90% effective after one application. All persons who have had skin contact with an infested person (including family members, roommates, direct care providers and sexual contacts) should also be treated.

### **How soon after treatment will symptoms resolve?**

Itching may continue for 2 - 3 weeks, and does not mean that you are still infested. Health care providers may prescribe additional medication for the itching if it is severe. No new burrows or rashes should appear 24-48 hours after effective treatment.

### **What can be done to prevent the spread of scabies?**

Avoid physical contact with infested individuals and their belongings, especially clothing and bedding. Health education on the biology of scabies, proper treatment and the need for early recognition, diagnosis, and treatment of infested individuals and contacts is extremely important.

### **For more information:**

Contact your local health department.

Additional information is also available on the web at:

[http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht\\_scabies.htm](http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht_scabies.htm)

# SCABIES FACT SHEET

FOR STAFF

## **Clinical characteristics and epidemiology:**

Scabies is a fairly common infestation of the skin caused by a mite, *Sarcoptes scabiei*. Scabies infestations can affect people from all socioeconomic levels without regard to age, sex, race or standards of personal hygiene. Clusters of cases, or outbreaks, are occasionally seen in health care facilities, institutions, and child care centers.

## **Scabies transmission:**

Scabies mites are transferred by any direct skin-to-skin contact. Indirect transfer from clothing or bedding can occur only when these items have been in contact with an infected person immediately beforehand. Scabies can also be transmitted during sexual contact.

## **Symptoms of scabies:**

Scabies appears as papules, vesicles, or tiny linear lesions, which contain the mites and their eggs. The most prominent symptom of scabies is intense itching, particularly at night. The areas of the skin most affected by scabies include the webs and sides of the fingers, around the wrists, elbows and armpits, waist, thighs, genitalia, nipples, breasts, and lower buttocks.

Norwegian or crusted scabies is an unusual clinical presentation involving crusting of the skin. Its "scaly skin" appearance is frequently misdiagnosed as psoriasis.

## **Incubation period:**

Symptoms may appear two to six weeks after contact in people who have not

previously been exposed to scabies infestations. People who have had a previous bout with scabies mites may show symptoms within one to four days after subsequent re-exposures. A person is able to spread scabies until mites and eggs are destroyed by treatment.

**Treatment:**

Currently, the recommended treatment for scabies is 5% permethrin cream (Elimite) and is available through a physician's prescription. The lotion is applied to the whole body except the head and neck. When applied as directed, this product is approximately 90% effective after one application. All persons who have had skin contact with an infested person (including family members, roommates, direct care providers, and sexual contacts) should also be treated.

**Length of symptoms:**

Itching may continue for 2-3 weeks, and does not mean that infestation is still present. Health care providers may prescribe additional medication for the itching if it is severe. No new burrows or rashes should appear 24-48 hours after effective treatment.

**Preventing the spread of scabies:**

Prompt identification of scabies infestation and appropriate treatment are essential in preventing ongoing transmission. New rashes or change in skin condition of patients should be reported and investigated. Gowns and gloves must be worn by all facility personnel who have direct contact with suspected or confirmed scabies patients until completion of effective treatment, or until scabies has been ruled out. Good hand hygiene techniques must be used before and after gloves are worn and between all patient contacts. Dispose of gloves immediately after use. Contact your infection control professional for additional information.

### **Care of clothing and bedding:**

All clothing recently worn and soiled bedding should be laundered in hot water and dried in a hot dryer. Wash water temperature should be 120 degrees Fahrenheit or 50 degrees Celsius for at least 10 minutes. Place materials in the dryer on the hottest setting for 20 minutes. Non-washable clothing such as shoes, coats, jackets, and scarves worn during the last week should be sealed in a plastic bag. Place the materials in a hot dryer for 20 minutes, or store the materials in a sealed plastic bag for one week (7 days) at room temperature or hotter. An alternative method is to seal materials in a bag and freeze at -20 degrees Celsius for 12 hours.

### **Reporting scabies at the workplace:**

All employees should immediately report any rash, illness, or complaints of intense itching of both patients, residents and employees to the facility's infection control professional. Appearance of a rash should also be documented in the patient's record and reported.

### **For more information:**

Contact your local health department. Additional information is also available on the web at:

[http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht\\_scabies.htm](http://www.cdc.gov/ncidod/dpd/parasites/scabies/factsht_scabies.htm)

*This fact sheet is for information only and is not meant to be used for self-diagnosis or as a substitute for consultation with a healthcare provider. If you have any questions about the disease described above or think that you may have a parasitic infection, consult a health care provider.*