Skin Infestation

Scabies

- Intensely pruritic disease of the skin caused by the ectoparasitic mite Sarcoptes scabei.

Transmission → By contact and infected clothes and linen.

Pathogenesis →

Pregnant Female mite
↓
Burrows into superficial layer of skin
↓
Lays Eggs
↓
Itching develop after 4 weeks of infection.

Clinical Features

- More common in children and young people
- Overcrowding, poor hygiene, and poverty predisposes to Scabies.

Sensation

- Itching which is usually at night, but might occur in the day also.
- Itching first in the affected part then becoming generalized.
- Pathognomic is curvilinear track burrows
- Papules, pustules, Vesicles and excoriation are seen.

Location

→ Webs of the fingers, flexor and extensor aspects of the arms, genitals, gluteal, and nipple.

Norwegian Scabies

- The lesions can be secondarily infected with Group A streptococcus and Staphylococcus aureus.
- The lesions are converted into pustules and may be converted to crusts called as the Crusty Scabies or Norwegian Scabies.
- In addition to classical area of involvement face, ear lobes and back are involved.
- Nodular Scabies is seen in the genitals.

Complication

- Pyoderma, Eczematization and acute Glomerulonephritis.

Diagnosis

- Mothers should always be examined for childhood Scabies.
- Presence of mite in the skin Scratching

Management

- All Family members should be treated
- All clothes and Bed linen should be done laundring on hot ironing.