Patient Information for Scabies

What is Scabies?
Scabies is an infestation of the skin with microscopic (i.e. can’t be seen by the naked eye) mites. These small insects burrow under the skin and cause intense itching, especially at night. Some people itch not just from the number of mites but because they are hypersensitive to the mites.

How do you get Scabies?
Scabies are spread from close contact with an infected person, their clothing, bedding, couches, carpet, etc. [There is a type of scabies that can be spread by dogs, “Mange” but this is much less likely to cause symptoms in humans and cannot be spread by humans.]

What are the symptoms of Scabies?
Usually patients notice itching as well as small red bumps or lines of bumps. It may look similar to other rashes or dermatitis. These bumps and the itching can be anywhere on the body, though they are less common on the head and back. The itching is often much more intense at night. It can take several weeks for symptoms to develop after an exposure.

Treatment of Scabies:
Medications are only available by prescription. The most common and safest treatment is overnight treatment with a cream made from permethrin. Clothing and linens (sheets and towels) used in the last 2-3 days must be washed in HOT water and dried on hot, or dry cleaned. Close contacts need to be treated as well. [A partner without symptoms may need treatment as they may not be as hypersensitive to the mites and may not show symptoms.]

To use the cream:
- Shower first and then apply the cream from the neck down, avoiding face and genitals, unless told to by your provider.
- Leave the cream on for eight hours (reapplying to hands and fingernails if hands are washed during this time!)
- Rinse/shower off after eight to fourteen hours and use only clean towels, linens and clothes after treatment.

Note: Leaving the cream on longer will NOT help, but may only cause irritation from the medication itself.

Treatment for Itching:
Treatment eliminates the mites but the itching may persist for one to two weeks after treatment due to a hypersensitivity reaction. It usually does not mean the scabies are still alive and that you need re-treatment (see below for when to follow up). Itching can be controlled with anti-histamines:
At night: use diphenhydramine (Benadryl) 25-50mg to relieve the itch and help with sleep
During the day: use an over the counter non-sedating antihistamine.
Cetirizine (Zyrtec) 10mg will help the most with itching and only causes sleepiness in about 15% of the population. Fexofenadine (Allegra) 180mg will help almost as well with itching and doesn’t cause drowsiness. Loratadine (Claritin) 10mg doesn’t have great effect on itching. 1% hydrocortisone cream may also help decrease itching after you use and rinse off the medicated cream.

Prevention of Spread to Others and Re-Infection:
Scabies can live off the body for 2-3 days which means:
- ALL clothes and linens (sheets and towels) which have been used in the past 2-3 days must be washed with HOT water and ideally dried in a HOT dryer
- Alternately, clothing and linens used in the past 2-3 days may be sealed in a large plastic bag for at least 72 hours.
- Those who have had close contact with you [even if they don’t have symptoms] may need treatment at the same time to prevent passing scabies back and forth. AT A MINIMUM: close contacts also need to wash or bag all linens as described above.
- Couches and carpets (cloth care interiors) should be thoroughly vacuumed.

When should I call to be seen again?
Re-infection is unlikely if all of the above steps are followed. Since the insecticidal cream can be irritating, it is not recommended to retreat unless symptoms are getting worse after treatment. See a medical provider if you are not improving (less itching each day) or if you have new red bumps or lines. You need to be seen urgently if you have signs of a secondary infection due to scratching, such as any skin swelling or warmth.

Where can I get more information? http://www.cdc.gov/parasites/scabies/gen_info/faqs.html