INFORMATION FOR PATIENTS

ABOUT

SCABIES

If you require this information in an alternative language or format (such as large print), please ask your nursing staff to arrange this or contact the Infection Prevention and Control Nurses on the number provided on the back page of this leaflet.
What is Scabies?
Scabies is caused by a mite (Sarcoptes scabiei) that burrows under the skin and lays eggs. The mites are very small and difficult to see with the naked eye. Symptoms appear on average 3-9 weeks following infection.

There are various forms of scabies. This advice leaflet covers classical scabies which is found in healthy people.

What does Scabies cause?
Scabies causes an itchy widespread rash which can be found on fingers, wrists, forearms, around the waist, armpits, sides of the chest, lower part of the buttocks, insides of legs, and around the ankles. Although it may not appear in all these areas at once, it usually affects both sides of the body alike. The rash is caused by an allergic reaction to the bites and this causes the itching and does not correspond to where the mites are in the body.

How do you get Scabies?
The scabies mite never voluntarily leaves a person so the only way it can be given to someone else is when two people (one person with mites) have prolonged skin to skin contact, eg holding hands. This allows the mites to move from one person to another person. The mite can not jump and transmission from clothes or bed linen is unlikely.

How is Scabies treated?
Treatment is in the form of a lotion or cream that is applied to the skin. Sometimes a once only tablet is given as well. Your doctor will decide which treatment is best for you. Please follow instructions/advice given carefully to ensure treatment is effective, if you miss out any area of the body then treatment may not work. Please ask the nurses to help you to ensure all areas of the body are covered with the treatment.
You may continue to itch for several weeks following treatment. However, this is your skins reaction to the old bites and not necessarily indication that the treatment has been unsuccessful. If irritation, soreness or flare of eczema develops, seek advice from your doctor or GP.

Persons such as your spouse/partner and/or children who have had prolonged skin to skin contact with you will also require treatment. Such persons should seek advice from their GP and everyone should commence their treatment on the same day at the same time to ensure that the scabies are all killed.

**How is the spread of Scabies prevented?**

Avoiding prolonged skin to skin contact prevents the spread of scabies. The following precautions are necessary until your treatment has been completed.

If you are in hospital or living in a care home, nursing staff will wear protective gloves and aprons for any skin to skin contact. Visitors should avoid prolonged skin to skin contact, eg holding hands. However, brief contact such as kissing and hugging is okay.

Close contacts such as your spouse/partner and/or children should avoid prolonged skin to skin contact with you until they have completed their treatment. Again brief contact is okay.

No special precautions need to be taken with used clothing and bed linen. Washing clothing and linen at the hottest temperature they can withstand in a washing machine is sufficient. If a duvet is used, it is adequate to wash the cover only. For clothing that is difficult to wash, press the seams with a hot iron or dry clean.