

Scabies

Scabies is a very itchy, contagious skin infection caused by microscopic mites that burrow into the skin's upper layers and cause a rash. It is an infection that occurs not only in children, but in people of all ages.

Symptoms

Scabies causes a rash that appears 2 to 4 weeks after the mites enter the skin. The rash is actually the body's reaction to the proteins, eggs, and excretions of the mites. It can be extremely itchy and become worse at night. Along with a rash, the burrowing mites can form threadlike gray or white lines on the skin that resemble irregular pencil marks.

In children younger than 2 years, the rash appears most commonly on the palms, soles of the feet, head, and neck. In older children, the rash is found between the fingers or in the folds and creases of the wrist and elbows, as well as at the waistline, thighs, buttocks, and genitals.

The incubation period for scabies is usually 4 to 6 weeks. If your child has had a previous scabies infection, symptoms can occur 1 to 4 days after being exposed again to the mites.

What you can do

If your child develops scabies, she will probably scratch the scabies rash, which will increase the likelihood of the skin developing a secondary bacterial infection. To lower this risk, keep your child's fingernails trimmed during a scabies infection.

When to call the doctor

If you notice that your child has an itchy rash, contact your pediatrician. The doctor will look at the rash, make the diagnosis, and recommend a treatment.

Diagnosis

Pediatricians can often diagnose a scabies infection by examining the rash and asking relevant questions (eg, the intensity of the rash's itchiness). Because children tend to scratch the rash repeatedly, the scratch marks and crusting of the rash sometimes make this infection hard to identify.

Your pediatrician may decide to confirm the diagnosis of scabies by gently taking a scraping from the rash or a burrow and having it examined under a microscope to identify the mite or its eggs.

Treatment

Children with a scabies rash should be cared for with one of several lotions or creams used for treating this infection. Most often, pediatricians choose a permethrin 5% cream. It should be applied over the entire body from the neck to the toes. In infants and young children, it should also be placed on the head, scalp, and neck because the rash can affect these parts of the body in this age group. About 8 to 14 hours after applying permethrin, bathe your child to remove the cream.

Other lotions and creams can also be used, such as crotamiton 10%. Ask your pediatrician whether the cream or lotion should be reapplied (often about a week after the first use).

Even after scabies has been treated effectively, the itching associated with it can continue for several weeks and even months. This persistent itching does not mean that your child is still infested with scabies. To soothe the itching, ask your pediatrician about giving your child an oral antihistamine or topical corticosteroid.

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Prognosis

Despite the itchiness and discomfort of a scabies infection, it is a mild and highly treatable condition. You can send your child back to child care or school after completing the treatment for scabies.

Prevention

A scabies infestation is easily spread from person to person through close contact, particularly skin to skin. If someone in your family has scabies, ask your doctor whether others in the household such as family members or live-in help should be tested or treated for scabies.

Source: Adapted from *Immunizations and Infectious Diseases: An Informed Parents Guide* (Copyright © 2006 American Academy of Pediatrics) and updated 2011

From your doctor

