

Guidance at a Glance – Scabies

These guidelines support the delivery of care in community and social care settings. This guidance reflects best practice/national guidelines.

KEY POINTS

Scabies is an infectious skin condition that causes intense itching. It is caused by tiny mites called *Sarcoptes scabiei* which burrow into the skin. Scabies is spread via prolonged skin to skin contact. The scabies mite cannot jump from person to person and they cannot survive long outside of the burrow, meaning that transmission via bedclothes or linen is unlikely

The mites burrows can often be seen as light brown or silvery wavy lines that usually appear on the hands (finger webs), inner wrists, elbow creases, under the armpits, and around the umbilicus (belly button), the nipples in adult females and the genitalia in men.

Scabies has an incubation period of approximately 4-6 weeks. This means that symptoms can start from several days to about six weeks after contact with an infected person.



SYMPTOMS

The symptoms of the scabies are caused by the allergic response to the excreta and saliva of a parasitic mite.

- Itchy red rash
- Rash is usually seen on the fingers, hands, wrists, waist, groin, umbilicus, buttocks and sole of feet. (Breasts of females and male genitalia).
- The rash is usually symmetrical (seen on both sides of the body).
- Itching is more common at night time.
- In some cases you may not have symptoms, but may have been told by a healthcare professional that you have been in contact with a person with scabies



TREATMENT

Treatment usually involves a cream or lotion that is prescribed by the GP or a dermatologist (for those confirmed cases registered under their care). This lotion is usually applied at night and is required to stay on for 24 hours; however the application instructions will be given at time of prescription.

Confirmed cases require two applications 7 days apart, the first to kill the mites and the second to kill any larvae that hatch from the eggs that survived the first application. Any contacts only need one treatment.

Ensure that everyone who has been prescribed the treatment is treated at the same time.

DID YOU KNOW?

There are two main types of scabies;

- Classic scabies
- Crusted (Norwegian) scabies – see picture below.

Residents who present with classic scabies do not usually require isolation, however, residents with Crusted (Norwegian) scabies are highly contagious and **DO** require isolation precautions until treatment has been completed.



- Hawker, J., Begg, N., Blair, I., Reintjes, R., Weinberg, J. and Ekdahl, K. (2018) Communicable Disease Control and Health Protection Handbook. Third Edition. Wiley-Blackwell, west Sussex
- Lincolnshire County Council (2024) [Outbreak Management: An information resource for care homes \(lincolnshire.gov.uk\)](https://www.lincolnshire.gov.uk/outbreak-management)
- [UKHSA guidance on the management of scabies cases and outbreaks in long-term care facilities and other closed settings - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/ukhsa-guidance-on-the-management-of-scabies-cases-and-outbreaks-in-long-term-care-facilities-and-other-closed-settings)