



Emerging Infectious Diseases and Diagnosis Journal

Research Article

Ali H, et al. Emerg Infect Dis Diag J: EIDDJ-100001.

Study of Factors Associated with Scabies in Out Patient Department of Bahawal Victoria Hospital

Hassam Ali*, Shiza Sarfraz, Shahzeb Ali and Mehak Batool

Department of Dermatology, Bahawal Victoria hospital, Pakistan

*Corresponding author: Hassam Ali, Department of dermatology, Quaid-e-azam Medical College Bahawalpur Cantt, Bahawalpur, Punjab 63100, Pakistan, Tel: +92629250411, Email: Hassamali@live.com

Citation: Ali H, Sarfraz S, Ali S, Batool M (2019) Study of Factors Associated with Scabies in Out Patient Department of Bahawal Victoria Hospital. Emerg Infect Dis Diag J: EIDDJ-100001.

Received date: 20 March, 2019; **Accepted date:** 01 April, 2019; **Published date:** 08 April, 2019

Abstract

Scabies has long been an issue of our hospital settings, not only among patients but the staff also gets affected from it. Objective of this study was to look into various factors that are associated with scabies transmission in the patients who came to our dermatology department. A cross sectional descriptive study was conducted in dermatology department of Bahawal Victoria hospital from 15th may 2018 to 15th June 2018, about one hundred patients were interviewed and a pretest questionnaire containing personal information and subject related questions was used to collect data. The study concluded that scabies is most commonly associated with low quality of life, skin to skin contact with affected person and low income. Most patients could not get desired benefit from medication as they were using it improperly.

Keywords: Dermatology; Scabies; Scabies in hospital; Scabies transmission

Introduction

Scabies, also known as sarcoptic mange and colloquially known as the itch, is a contagious ectoparasitic skin infection characterized by superficial burrows and intense pruritus (itching).

It is caused by the mite *Sarcoptes scabiei*. The word scabies itself is derived from the Latin word (scabere) for "scratch". More severe forms of scabies include crusted scabies and Norwegian scabies [1]. Scabies is highly contagious and can spread by scratching, picking up the mites under the fingernails and simply touching another person's skin. They can also be spread onto other objects like keyboards, toilets, clothing, towels, bedding, furniture, and anything else onto which the mite may be rubbed off, especially if a person is heavily infested.

The parasite can survive up to fourteen days away from a host, but often does not survive longer than two or three days away from human skin [2,3]. Scabies can be transmitted readily throughout an entire household, by skin-to-skin contact with an infected person (e.g. bed partners, schoolmates, daycare). It can be

spread by clothing, bedding, or towels. Washing clothing in very hot water and dry on high heat will help prevent the transmission. Alternatively, permethrin sprays can be used for items that cannot be laundered [4,5].

Scabies is common, major and neglected public health problem in developing countries. Scabies is rapidly spreading communicable disease in our community [4]. Scabies is preventable but good data regarding relevant risk factors in our geographical situation is important to understand the ways in which preventive measures can be effective in our region. So, our study will concentrate on these preventive measures Worldwide, the prevalence of scabies has been estimated at three hundred million cases annually [4].

Materials and Methods

Study Design: Descriptive Cross- Sectional Study

Setting: Dermatology outpatient department (OPD) Bahawal Victoria Hospital

Duration of Study: First of 15th may 2018 to 15th June 2018

Population: People with scabies seeking care in Dermatology Department

Citation: Ali H, Sarfraz S, Ali S, Batool M (2019) Study of Factors Associated with Scabies in Out Patient Department of Bahawal Victoria Hospital. Emerg Infect Dis Diag J: EIDDJ-100001.

Sampling Method: Convenient Sampling technique

Sample Criteria: Male & Female of all ages suffering from scabies

Data Collection: Predesigned and pretested questionnaire was used to collect data

Data Analyzed: Data was analyzed manually.

Results

Our research was conducted on one hundred Scabies patients in Dermatology outpatient department (OPD) Bahawalpur Victoria Hospital. Out of one hundred patients, 70% were male and 30% were female. All of the patients (100%) were inhabitants of rural area. Half of them (50%) were single and half of them were married. 70% patients were uneducated. 10% had studied below matric, 18% had done matriculation & only 2% were intermediate pass. Regarding monthly income, 72% patients had no income and remaining 28% had monthly Income of below Rupees ten thousand (one hundred dollars).

Itching was present in all the patients (100%), while half of the patients (50%) were also having red lesions. Regarding the part of body involved in itching, Fifty Two patients (52%) experienced itching on face & nipples, 62% patients experienced itching on web spaces, soles, and wrist and around umbilicus. 70% patients experienced it in axilla and 72 % on palms, while all the patients experienced itching on genitalia. Out of hundred patients, ten patients (10%) were having these symptoms only at daytime.

50% patients were having it in night while 40% of the patients had these symptoms both at day and night. Only 10% patients were taking some precautions while 90% were not. None of the patient was diabetic. None of the patients were sharing their clothes. 60% of the patients were sharing their beddings with their family members while 40% were not. Most of the patients i.e. 82% said that they wash their clothes immediately after changing. Out of hundred, eighty eight patients shared towels.

All the patients (100%) cut their nails regularly. 90 % of the patients were having good oral hygiene upon inspection. All the patients (100%) had been sleeping on bed. Regarding how patients walk in their home, 80% walked with shoes while 10% sometimes walked with shoes & sometimes were barefooted. Ten out of hundred were unable to walk. Eighty out of hundred (80%) patients said that they wash their hands before eating food & after going to toilet while 10% did not. Remaining Ten patients were unable to perform this action. Ten (10%) patients had been washing their hands after touching pets, 30% were not & remaining 60% were having no pets. Only 20% of the patients said that they wash their hands after sneezing, coughing or nose blowing, 40 % were not & remaining 40% were unable to perform. Fifty out of one hundred patients (50%) washed their hands after cleaning the room/house. 60% patients had used drugs for treatment but all of them did not remember which drug they were using. Out of these sixty patients who had been using some drugs for treatment, only twenty patients (33%) were using it with correct method. Fifty out of the sixty patients using drugs for treatment said that their family members also use the drugs.

Discussion

According to our study, 70% were male and 30% were female. These results were similar to another study that was conducted in America in which 60% were male and 40% were female. In our study all of the patients were inhabitants of rural area, but of low standard of quality of life and poor health education. In another study in America all of the patients were inhabitants of rural area, but of high standard of quality of life and good health education.

In our study, half of patients were single and half of them were married, which was similar in another study conducted in America in which, 60% of patients were single and 40% of them were married. According to our study 70% patients were uneducated and only 2% were having intermediate education, which was in contrast to another study in America in which 2% patients were uneducated and 98% were having intermediate education, so education has an indirect relationship with Scabies so it can be concluded that with education the person becomes more conscious about his health and also standard of living improves. Regarding monthly income, 72% patients had no income and remaining 28% had monthly income of below ten thousand rupees (one hundred dollars), which was in contrast to another study that was conducting In America in which 2% patients had no income and remaining 98% had monthly income of below ten thousand dollars, so it shows that Scabies is the disease of poor people. Our research, showed that itching was present in all the patients but it is more in genital areas which was similar to another research in America in which itching is more prevalent in genitalia.

In our research 60% of the patients were sharing their beddings with their family members so Scabies spreads by sharing of beddings which was similar to another research in America in which 60% were sharing their beddings. In our study 88% patients shared towels which was similar to the results of another research in America in which same number of patients were sharing towels, hence Scabies spreads by sharing of towels with infected individual in both researches.

Regarding how patients walk in their home in our research, 80% walked with shoes while 10% sometimes walked with shoes & sometimes were barefooted. Ten out of hundred were unable to walk which was similar to another study in America in which 80% walked with shoes while 10% sometimes walked with shoes & sometimes were barefooted. Ten out of hundred were unable to walk. In Our research only 20% of the patients said that they wash their hands after sneezing, coughing or nose blowing, 40 % were not & remaining 40% were unable to perform. Fifty out of hundred patients (50%) washed their hands after cleaning the room/house which was similar to another research in America. All the above data suggests that Scabies has no relation with being dirty. In Our research 60% of the patients had used drugs for treatment and only 40% of the patients were using it with correct method which was in contrast to another research in America in which 30% patients had used drugs for treatment and 70% were using it with correct method.

Conclusions

Scabies is rapidly spreading disease in our community. According to our research scabies is more common among

males due to more exposure to the external environment. People with weak immune systems and the elderly are more at risk of developing scabies. Scabies is more common among rural communities because of low standard of quality of life and poor health education. Most of the patients in our study were uneducated therefore they were less conscious about their health and also the standard of living. According to our study most of the patients were having no income or an income of less than ten thousand rupees or one hundred dollars so it shows that poverty plays a key role in the prevalence of the disease.

According to our research, itching on different body parts was the main symptom of scabies; half of the patients were also having red lesions which indicated advancement in the disease. Main parts involved in itching were genitalia, palms, axilla, around umbilicus, wrist, soles, and web spaces. Scabies symptoms intensify at night. As scabies is a very contagious disease so the chances of spread are more among family members. Most of the patients in our study shared their beddings and towels with their family members and they were not taking any precautions. Scabies disease can transmit from one place to another through migration of scabies affected patients. Scabies is almost always caught from another person, anyone who comes into close contact. According to our research scabies has no relation with being dirty because most of the patients were having satisfactory personal hygienic conditions.

According to our study most of the patients had used drugs for treatment but they were not using the drugs properly so they did not benefit from the treatment. Also it is important that all the family members, sexual contacts and others who have had skin-to-skin contact with a person diagnosed with scabies also need to be treated as soon as the person is diagnosed.

References

1. Raza N, Nadir S and Hassan A (2009) Risk factors for scabies among male soldiers in Pakistan: case-control study. *Eastern Mediterranean health journal* 15: 1105-1110.
2. Ursani NM, Baloch GH (2009) Scabies epidemic at Tando Muhammad Khan, Sindh. *Journal of Pakistan Association of Dermatologists* 19: 2.
3. Anwar HN, Zafar MI and Hussain S (2006) Health Screening of Primary School Children-A Case Study of district Sargodha-Pakistan. *Pakistan Journal of Life and Social Sciences* 4: 40-47.
4. Lapeere H, Brochez L, De Weert J, Pasteels I, De Maeseneer J, et al. (2005) Knowledge and management of scabies in general practitioners and dermatologists. *European journal of dermatology* 15: 171-175.
5. SR Khan, F Jaliil, S Zaman, BS Lindblad, J Karlberg (1993) Early child health in Lahore, Pakistan: X Mortality. *Acta Paediatrica Suppl* 390:109-117.