Skin conditions III

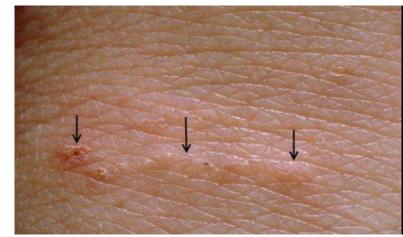
Scabies:

• Human scabies is an intensely pruritic skin infestation caused by the host-specific mite *Sarcoptes scabiei hominis*. Approximately 300 million cases of scabies are reported worldwide each year.



Signs & symptoms

- Burrows are a pathognomonic sign and represent the intra-epidermal tunnel created by the moving female mite. The mite is usually transmitted by direct physical contact.
- The fecal pellets she leaves in the burrow cause a local hypersensitivity reaction and this cause inflammatory mediators to release and cause intense itching. This can take 2-4 weeks.



 Scabies characterized by sever pruritus, especially at night, is the hallmark symptoms of scabies. Beside classic location of lesions, finger webs, in men penile and scrotal skin and in women beneath the breasts and nipples can affected. The rash is usually made up of small red papules that over time can change into

vesicles.

• Infants who are not yet walking may have marked sole involvement.











Conditions to eliminate

- Insect bites --- asymmetrical lesions.
- Allergic contact dermatitis --- past history of similar lesions.
- Dermatitis herpetiformis --- similar to regions of scabies, symmetrical lesions (knees, buttocks, elbows) hand involvement is rare, 90% of patients had gluten enteropathy.







- **Permethrin** is 1st line treatment suitable to be used for adults and children over 2 months. Single application of one tube(max. 2 tubes) for adults and children over 12. The whole body should be washed throughly 8-12 hrs after application.
- **Malathion** is 2nd line treatment, can be used for adults and children over 6 months. The medication must left on 24 hrs.
- **Benzyl benzoate** suitable for adults and children over 12 years. Its application to the whole body on three occasions at 12 hrs intervals.
- Crotamiton (Eurax) should be applied to whole body once a day for between 3-5 consecutive days.

Non pharmacological managments

- All people in the same household and close contacts should be treated at the same time (even asymptomatic).
- Trt. Should be repeated after 7 days. head and neck should be treated.
- The clothes, towels, blankets and bed linen should all be washed in hot water (≥50 °C) and sun exposure is necessary.
- Do not apply the drugs after hot bath.











Warts:

 Warts and verrucas are benign growth of the skin caused by human papilloma virus (HPV). Certain types of HPV have certain affinity towords specific body parts, for ex: hands, face, anogenital region and feet, resolution occur during 6 months-2 yrs. It considered selflimiting condition but it is cosmetically unacceptable. So OTC medication is helpful to control.

- HPV is transmitted by:
- 1. Direct contact with infected person.
- 2. Macerated skin can caught the virus from the environment (swimming pools).
- 3. Autoinoculation is responsible for multiple lesions, this occurred by picking, biting or scratching warts.

• <u>Warts</u> often occur in the back of the hands, fingers and knees either singly or in crops. it appears as a raised, hyperkeratotic papule with thrombosed black vessels visible as black dots within the wart. They tend to be rough texture, skin colored and less than 1 cm in diameter.







• Verrucas found on the sole of the foot, at weightbearing areas, ex: metatarsal heads or heel. Because of constant pressure on the sole, the growing wart grows inward. Pain, especially on walking, and tiny black dots on the surface of verruca are present. Like warts, less than 1 cm and occurs in crops or as single lesion. When a number of closely located planter warts(verruca) they can coalesce to form large single plaque called mosaic wart.



- They must differentiate from
- Plane warts --- groups, on face+ back of the hands, same skin color, small size, slightly raised skin.

• Molluscum contagiosum --- children under 5+pox virus+face & neck+ smooth & have central dimple.



• corn --- top of the toes+hard gray skin+fourth web space.



• basal cell carcinoma--- on the trunk+waxy appearance.



• *Salicylic acid:* 1st line treatment, effective in removal warts and verruca. Prior to apply salicylic acid, foot must be soaked in warm water and toweled dry. The surface of lesion must rubbed with a pumice stone to remove any hard skin, this done once weekly. Few drops must carefully apply in the lesion and repeated daily. For all pt groups can use except DM.

- *Glutaraldehyde* is 2nd line treatment, it is same salicylic acid but must apply twice daily. Staining the outer layer of the skin brown is its side effect, in addition to irritation.
- Formaldehyde, podophyllum resin and silver nitrate are commercially available agents for treatment of warts.
- Cryotherapy.



