

INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

## NEONATAL SCABIES - THINKING BEYOND THE USUAL SUSPECTS

D Appalla (1) - D Knutson (2)

Unity Point Health, St Luke's Hospital/department Of Pediatric Hospital Medicine, Cedar Rapids, United States (1) - Unity Point Health, St Luke's Hospital/department Of Dermatology, Cedar Rapids, United States (2)

Background: Neonatal Scabies is a distinct subset of scabies. Clinical presentation differs significantly from manifestations noted in adults. Due to atypical presentations, misdiagnosis is common. We present a case of neonatal scabies that presented with an episode of BRUE.

Observation: A two week old female child presented with erythematous rash involving the neck and trunk. The baby was born at term via normal vaginal delivery. Maternal history was significant for Pruritic urticarial papules and plaques of pregnancy. The prenatal and postnatal laboratory tests of the mother and child, including HIV, were negative. The infants lesions are erythematous papules and few scattered pustules with serous discharge. Despite empiric treatment with mupirocin, the rash spread to the scalp and extremities with vesicles noted on palms and soles over next four weeks. Face and groin were spared. Patient remained afebrile but was noted to have worsening irritability with decreased oral intake. She was noted to have an episode of cessation of breathing lasting approximately 30 seconds. She was hospitalized for work up for brief resolved unexplained event (BRUE). Differential diagnosis included Eosinophilic folliculitis, scabies and secondary syphilis. Mineral oil scraping demonstrated live scabies mite with eggs. The patient was treated with 5% Permethrin and received a second dose in 1 week for persisting lesions. All the family members were treated with the same.

Key Message: Neonatal scabies is easily misdiagnosed due to absence of characteristic symptom of itching. Erythema toxicum neonatorum and acne are usual rashes. Involvement of the face, neck, scalp, palms, and soles is a consistent finding along with formation of pustules early in the course of infestation. Poor feeding and failure to gain weight are also noted. Though permethrin has not been approved for neonates, 5% permethrin resulted in complete resolution of the rash without any adverse effects in our patient.





