



PRURITUS

CRUSTED SCABIES. A CASE REPORT

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Crusted scabies (previously known as Norwegian scabies), is a severe form of scabies that has been described as a parasitic infection caused by the mite *Sarcoptes scabiei* var. *hominis*, cataloged by the World Health Organization (WHO) as one of the main neglected diseases. It can affect any part of the body, especially pressure areas, particularly palms and soles, as well as in the scalp. It occurs in patients with some type of immunosuppression. The pruritus is not as intense as in that of vulgar scabies or it may be absent.

36 year old male, with a history of an unspecified mental disorder, comes to the hospital for presenting a disseminated dermatosis constituted by well-defined crusted plaques with irregular edges, yellowish scales on the surface and onychoglyphosis. The problem has been present for 1 year. On physical examination, he shows poor general and nutritional conditions (cachectic). Microscopic examination of the skin revealed the presence of mites. Histopathological report exposes hyperkeratosis with psoriasiform and verrucous hyperplasia of the epidermis, finding in the cornea layer numerous mites. The patient and his family were successfully treated with Permethrin 5% lotion, Ivermectin 200 µg/kg once a week for 2 weeks, and urea 40% cream on hyperkeratotic areas.

Scabies is considered a disease of worldwide distribution; it has become an epidemic that does not respect social classes. It is known to present whether a classic or an atypical clinical presentation, which becomes a real public health problem. Crusted scabies on its own has great contagious potential, can cause outbreaks in situations of overcrowding and poor hygiene and it can be particularly difficult to treat, however it is a pathology with a 100% cure rate through the application of the correct treatment, which implies the importance of its correct diagnosis and management.

