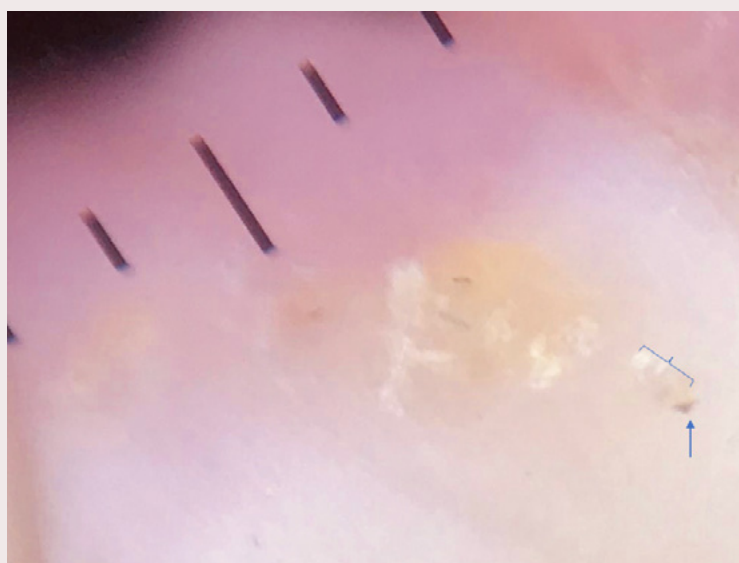


IMAGES IN DERMATOLOGY

Dermoscopy for Scabies

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1-month-old patient with no relevant medical history is brought in by her parents. She presents with erythematous papules scattered through the face, trunk and upper and lower limbs. In addition, she manifests 10-day-old papulo-vesicles and linear ridges on the palms, soles and interdigital spaces. Moreover, the clinical picture includes irritability and sleep loss. The parents also manifested disseminated lesions with intense itch on the trunk and thighs. Based on the clinical impression, the diagnosis of scabies was confirmed. Furthermore, dermoscopy revealed a lesion on the sole of the left foot, constituting a dark brown triangular structure located at the end of a wavy whitish line.

Treatment for the patient included a topical scabicide. The parents underwent oral systemic therapy. The follow-up visit evidenced full resolution of all lesions.

Scabies is an ectoparasitosis. Its definitive diagnosis is based on the visualization of the causal agent. Dermoscopy is considered as a non-invasive method, as well as easy and accessible for diagnosis. This procedure entails for a 91% sensitivity; similar to skin scraping (Muller Test), which could, as a result, replace the method or indicate the sampling site. The classic dermoscopic pattern of scabies represents a dark brown triangular and “jet with a contrail” structure located at the end of a wavy or curved whitish line. Microscopically, the dark brown triangle corresponds to the anterior part of the mite and the contrail corresponds to the ridge.

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