



EVALUATION OF ENDOWMENT OF LIFE OF SCABIES PATIENTS IN URBAN SLUM

Community Medicine

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ABSTRACT

Introduction: Scabies is a common skin disease caused by the parasite *Sarcoptes scabiei*, and it is a significant cause of morbidity and psychological distress in patients. The study aims to assess the quality of life in patients suffering from scabies. **Methods:** A cross-sectional study was conducted at Urban Health Centre (UHC) in Surajkund, Meerut, in August 2021. A total of 52 patients diagnosed with scabies, based on clinical features, were included in the study. Modified Dermatology Life Quality Questionnaire (mDLQI) for scabies by Worth et al. was modified for the Indian population. Demographic and clinical data were collected and analyzed using descriptive statistics. **Results:** The study included 27 males and 25 females, with the most affected age group being 21-40 years. The most common complaints were itching (100%), sleep disturbance due to night aggravation (73.07%), and skin lesions (82.6%). Out of 52 patients, 66% used the same towel, 70% took a bath daily, and only 20% washed their bedsheets within three days. **Conclusion:** Scabies has a significant impact on the quality of life of patients, causing itching, sleep disturbance, and skin lesions. The study highlights the need for public health interventions to improve hygiene and promote the prevention and control of scabies.

KEYWORDS

INTRODUCTION

The skin is the largest organ and is a sensitive indicator of the general health of humans. Skin disorders are one of the most common health problems in children. Skin disorders can cause emotional and psychological distress to a child and family [1]. Scabies is also known as seven-year itch, and it is a contagious skin disease caused by the parasite *Sarcoptes scabiei*. It is the most common ectoparasitic dermatosis seen in medical practices [2].

The International Alliance for the Control of Scabies, a newly formed organization, proposes to implement stigma control in vulnerable communities in 2013 [3]. Recently, the World Health Organization (WHO), a group of 10 tropical strategies and technical advice on tropical neglected diseases, has added to the list of "Neglected Tropical Diseases", thus recognising its impact on human health [4].

It affects men and women of all socio-economic backgrounds. Overcrowded living conditions such as those found in child care centers, group homes, and prisons increase the risk of infection [5].

Since it is not possible to eradicate scabies, disease control is the only way to reduce the burden of disease [6]. The morbidity of the disease is not only evident in the degree of clinical pathology but also includes the emotional aspects of the skin disease. Both types of illnesses can reduce the quality of life. In the last few years, there has been a growing interest in assessing the quality of life of patients with skin diseases and in developing diagnostic methods [7]. Patients with skin diseases can affect their health in many ways. This was demonstrated in a study in which the majority of patients reported itching and discomfort and sleep disturbances [8]. It has also been shown that skin diseases can cause anxiety, frustration, anger, and embarrassment, leading to social isolation from work and school [9]. Therefore, this study was done to find out the quality of life in patients suffering from scabies.

AIMS AND OBJECTIVES –

1. To study the quality of life in patients suffering with scabies coming at UHC surajkund.

MATERIAL AND METHODS-

A cross sectional study was conducted at URBAN HEALTH CENTRE, Surajkund, Meerut. The study was conducted in the month of August 2021 and included patients diagnosed with scabies and coming with clinical features of scabies. All adults and children greater than 10 years of age with diagnosis of scabies were included in the study. Diagnostic criteria included itching, most severe in the night time, family history of itching, and characteristic lesions like papules, excoriations and burrows at classical sites like finger webs, genitals, etc [10]. Total 88 patients attended the health centre for the treatment of

scabies but those whose diagnosis was not confirmed, patients with atypical scabies, with pregnant and lactating women and children under 10 years of age were not included in the study. Patients were diagnosed on the basis of clinical features. Informed consent was taken. Thus total of 52 patients were included in the study. Modified Dermatology Life Quality Questionnaire (mDLQI) for scabies by Worth et al., was modified accordingly with Indian population [11].

For children who were not able to answer, answers were given by either of the parents.

RESULTS-

TABLE 1- Demographic Distribution of scabies patient above 10 years of age coming to urban health centre.

AGE	NUMBER (%)
10-20 yrs	21 (40.3%)
21-40 yrs	23 (44.2%)
41-60 yrs	05 (9.6%)
>61 yrs	03 (5.7%)
SEX	
MALE	27 (51.9%)
FEMALE	25 (48.1%)
LITERACY	
LITERATE	36 (69.8%)
ILLITERATE	16 (30.2%)
OCCUPATION	
Student	23 (44.2%)
Worker/Farmer/Labourers	11 (21.1%)
Business	01 (1.9%)
Professional	00
Job	03 (5.7%)
Retired	00
Housewife	13 (25%)
Others	01 (1.9%)

Out of 52 patients, 27 were males and 25 were females. The most common age group affected was 21-40 years. Out of 52, 16 patients were illiterate. Total 23 students were affected and 13 housewives were affected.

TABLE-3 Hygiene Condition Of Scabies Patient Coming To UHC

USE OF TOWEL	NUMBER (%)
SAME	34 (66%)
DIFFERENT	18 (34%)
TAKING BATH DAILY	
YES	36 (70%)

NO	16 (30%)
BEDSHEETS WASHING WITHIN 3 DAYS	
YES	10 (20%)
NO	42 (80%)

Out of 52 patients, 66% use same towel while 70% used to take bath daily.

TABLE 3- Clinical Presentation of patients with scabies

COMPLAINTS	
Itching	52 (100%)
Sleep disturbance due to Night aggravation	38 (73.07%)
Skin lesion	43 (82.6%)
PAST HISTORY	
Present	03 (5.7%)
Absent	49 (94.3%)
FAMILY HISTORY	
Present	33 (63.4%)
Absent	19 (36.6%)

- All 52 patients presented with itching being most common clinical feature.
- 38 patients presented with sleep disturbance due to night aggravation. 43 patients were having skin lesions. Out of 52 patients only 3 were having past history and 33 were having family history.

TABLE 4- The impairment in quality of life in children (n=19)

QUESTIONS	VERY MUCH	SEVERAL TIME	ONLY A LITTLE	NOT AT ALL
Feeling embarrassed	00	01 (5.2%)	10 (52.6%)	08 (42.1%)
Affected schoolwork	00	04 (21.05%)	08 (42.1%)	07 (36.5%)
Affected playing	02 (10.5%)	03 (15.7%)	08 (42.1%)	06 (31.5%)
Experienced teasing	00	00	04 (21.05%)	15 (78.95%)
Affected friendship	00	00	02 (10.5%)	17 (89.5%)

Playing domain was maximum affected, 13 out of 19 children were affected followed by schoolwork where 12 children were affected.

TABLE 5- Impairment in quality of life in adult- (n=33)

Questions	Very Often	Several Times	Only A Little	Not At All
Feeling embarrassed	00	05 (15.2%)	18 (54.5%)	10 (30.3%)
Affected work activities	03 (9.1%)	07 (21.2%)	18 (54.5%)	05 (15.1%)
Affected social contact	00	06 (18.1%)	16 (48.4%)	10 (30.3%)
Feeling depressed	00	04 (12.1%)	18 (54.5%)	11 (33.3%)

Work activities were mostly affected in adults (28), followed by feeling of embarrassment (23).

DISCUSSION-

- The most common age group affected in our study was 21–40 years in 44.11% of patients followed by 5–12 years of age group in 39.2% of patients while Das S et al., The study found 9% of patients were 0–5 age group, 22% in both 6–15 years and 16–30 years of age [12].
- Sambo et al., Who studied the increase in ancestry among school-age children, reported that 55.8% of patients were 5–8 years of age, while 44.2% of patients were at the age of 9–12 years [13].

CONCLUSION-

Embarrassment, shame, stigmatization, and social exclusion were frequently perceived restrictions in adults compared to children. In this setting, scabies is an important health problem requiring action by healthcare providers.

Not only chronic conditions like vitiligo and psoriasis affects quality of life but infectious diseases like scabies also can affect quality of life. Importance of proper counselling regarding treatment and hygiene need to be emphasised to the patients.

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