



## Original Article

# Scabies Among Health Care Workers in Sarhad Psychiatric Hospital Peshawar Khyber Pakhtunkhwa (KPK)

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Scabies, Health Care Workers, Hospital, Disease, Poor Hygiene, Skin Disease

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Health Services Academy, Islamabad, Pakistan**ABSTRACT**

Scabies is a neglected parasitic disease but of great importance in developing countries. It is endemic in tropic and sub-tropical countries. It is caused by a mite and transmitted through skin-to-skin contact. **Objective:** The study will provide a better opportunity to adopt protective measures and thus reduce the disease burden in hospitalized patients. **Method:** The aim of my study is to assess the scabies level of health care workers at Sarhad Hospital for Psychiatric diseases Peshawar regarding scabies. In our study, the respondents were doctors, Nurses, and junior clinical technicians of both sexes. **Result:** Rather than this, no such studies have been conducted in Pakistan. There have been some reported studies in different countries where an outbreak of scabies has been reported. Where health workers were also been affected as well as patients. **Conclusion:** Scabies outbreaks occur due to poor personal hygiene, poor environmental sanitation, low socioeconomic conditions, lack of basic healthcare facilities, over-crowding and illiteracy.

**INTRODUCTION**

Scabies is a neglected parasitic disease but it is highly prevalent in developing countries [1,2]. The incidence of scabies is approximately 300 million cases worldwide, particularly in developing countries [3,4]. It is endemic in Africa, Egypt, Central, south, north and central America, Southeast Asia and Caribbean Islands India [5,6]. It is also endemic in some developed countries [7-9]. In well developed countries, it is found to be sporadic in nature [10,11]. Tropical and subtropical countries have higher prevalence of scabies [12]. Denmark is a developed countries but has reported scabies cases since many decades. Rate of scabies occurrence was observed to be high among infants, children, young adults and these rates vary according to the variations in season [13]. Efforts have been undergoing since many decades in different countries with higher prevalence rates of scabies. Nair from India proposed a national policy to overcome the scabies outbreaks in India and to lessen the heavy dependence on health education and awareness strategies, involvement of community and to reduce the burden on deteriorating health system [14]. A study from Pakistan suggested poor hygiene and low standard of living as a major contributing factor for scabies. Among other causative agents include lack of education, resources, poor hygiene, congested area of living [15]. The causative agent of scabies is the mite, *Scarcoptes scabiei* which are tiny (0.1-0.5mm), white, eyeless, round or oval arthropods and have eight jointed legs in the adult stage. They are obligate ectoparasites. They have variable feeding patterns. They have many variants which are host specific. The human specific species include *S. scabieivar. Hominis* which reproduce on human host. This mite tends to reside in folded skin. These mites are not infectious but cause irritation and itching due to their burrowing and feeding activities.

The main mode of transmission of this mite is direct skin-skin contact. They crawl and move to other individual's skin. On reaching the new host, they start burrowing within minutes. Any person who is in direct contact to a person



with scabies is always at high risk. They infest new hosts through shared clothes, beds and rooms. They survive and grow in humid and temperate environment. They can survive upto 2-5 days at normal room temperatures [18-20]. Scabies in slum areas and institutionalized patients are common. Current study will be hospital-based. Sarhad hospital for psychiatric diseases is the only Govt. hospital in the Khyber PakhtoonKhwa province for mentally ill and drug addict patients. Despite the magnitude of the problem awareness of the clinical & epidemiological aspects of this avoidable contagious disease in our hospitals is scarce. Therefore, in the present study scabies among health care workers in Sarhad hospital Peshawar, would help in strategic planning for the improvement of the health status of Indoor patients.

## METHODS

It was a cross-sectional quantitative study, where structured interviews were conducted through questionnaires from health care providers/workers regarding scabies, its risk factors, mode of transmission. The area of my study was Sarhad Hospital for Psychiatric diseases Peshawar. This is the only Govt. psychiatric hospital in Khyber Pakhtunkhwa situated in Peshawar. The capacity for indoor patients is 140 beds, but the admission rate is much higher than the actual number of beds in the hospital, because of the overcrowding of indoor patients, due to this skin diseases are common like scabies. The total number of health care workers in Sarhad hospital for psychiatric Diseases Peshawar are 120 in which 20 are Doctors, 40 Nurses, 60 junior clinical technicians All the health care workers in the hospital were interviewed through a questionnaire. A quantitative questionnaire was developed to assess and analyze health care workers regarding scabies transmission. Both genders were included in the study and the administrative staff and supporting staff were excluded. The data collected was entered into SPSS version 16.0 and analysed in the same software. The results were in the form of frequency and percentages. Tables and graph were drawn to show the results.

## RESULTS

This study was conducted at Sarhad hospital for Health care workers regarding Scabies, where n=120. It consists of a sociodemographic part, Age, Gender, and Education level, working experience, were assessed through a structured Questionnaire. In sociodemographic factors, the respondents were asked for their age, gender (Table 1), qualification (Table 2) and length of service (Table 3) are as follows:

Age-wise distribution of the HCWs	Percentages%
20 - 30years	13
31-40years	54
41-50 and <50years	33
Gender of respondents	
Male	75
Female	25

Table 1: Age and gender of the respondents

The age of the respondents between 20-30 years was 13%, between 31-40 was 54% and from 41-50 and onwards was 33%. Male respondents were 75% and females 25% (Table 1). More than 90% say that the problem is big enough to go to a doctor for treatment, while less than 10% do not know. Less than 30% Health care workers (HCWs) are educating the patients about scabies, while more than 70% do not do so.

Qualification of respondents	Number
Doctors	20
Nurses	40
Junior clinical technicians	60

Table 2: Qualification of the respondents

Working experien	Percent
1-10	48%
11-20	29%
More than 30	33%

Table 3: working experience of the Health care workers was from 1-10 years 48%, 11-20years was 29%, and more than 30years was 33%



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