Correspondence

Comment on 'Unexpected consequences of SARS-CoV-2 pandemic: scabies infestation'

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Linked articles: Griffin *et al. Clin Exp Dermatol.* 2022; **47:** 1196–7.

Turkmen and Altunisik, *Clin Exp Dermatol* 2022; doi: 10.1111/ced.15176

Dear Editor.

We read with great interest the recent article by Griffin et al. in Clinical and Experimental Dermatology, focusing on the changes and difficulties in scabies treatment during the ongoing pandemic era. In particular, the authors reported that the rate of patients affected by scabies unresponsive to topical treatments during the pandemic period was higher compared with the average numbers over the previous 4 years. The authors showed that during the pandemic period the development of resistance to topical treatments increased considerably, and concluded that this may be linked to the restriction of being in the home under strict quarantine conditions that could increase the rate of transmission of the disease. Turkmen et al.2 responded to the article by reporting their experience; they conducted a study comparing outpatient diagnoses from the prepandemic and pandemic periods, concluding that the number of patients with scabies also increased in Turkey during the pandemic period.

This increased rate is still under debate in the literature, with additional reports stating that the incidence of scabies did indeed increase during the pandemic, whereas others found it actually decreased.^{3,4}

We would like to add more information to these articles by reporting our Italian experience. Similarly to Griffin *et al.*, we also found that the pandemic and the consequent strict quarantine increase scabies incidence in our centre, as we reported previously. We suggested that daily habits including body care and personal hygiene practices changed due to confinement at home and consequent social isolation, leading to a significant increase in scabies diagnoses.

As stated by Griffin *et al.*, we also found an increased rate of resistance to topical therapies, such as topical

permethrin; however, we believe that this may be linked to the widespread heavy use of disinfectants containing permethrin, which were used to clean various types of surfaces during the pandemic. We believe that the overuse of this substance may have contributed to the increased resistance rates reported.

Diagnosis and treatment of scabies are often not easy because of the wide differential, with many dermatological conditions presenting similar and nonspecific manifestations^{6,7} and, as our experience suggests, treatments are often ineffective. We therefore believe it is useful to report our experience to encourage further studies on these disinfectants to clarify if they can cause resistance to the therapies currently available for this disease.⁸

We believe that the recent increase in scabies unresponsive to topical treatments may result in a deep change in scabies management, with a progressive increase in use of alternative therapies, both topical and systemic, such as oral ivermectin, to fight this actual and not treasurable problem. However, more studies are needed to better clarify the exact rates of resistance to available topical therapies, and understand how to manage these resistant cases of scabies.

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