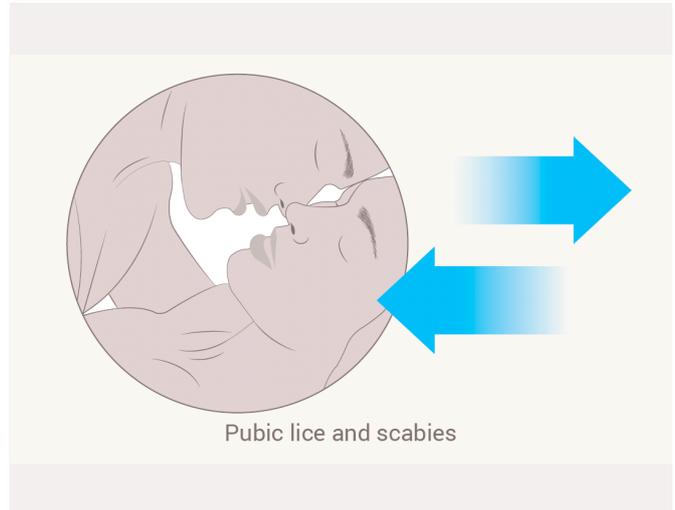


Factsheet Pubic lice and scabies

Key points

- Pubic lice and scabies are easily treated.
- Your GP or staff at a sexual health clinic can diagnose pubic lice or scabies.
- Pubic lice and scabies are passed on through skin-to-skin contact.



Pubic lice (also called crabs) and scabies are parasites, easily passed on through close body or sexual contact. They are common among sexually active men and women, gay and straight, and children can get them through close bodily contact. They are easily treated.

Pubic lice

Pubic lice are small parasitic insects, resembling crabs because of their claws. They usually live in coarse body hair, such as pubic hair (body hair near the genitals and anus), but can also be found in underarm, leg or body hair or – very rarely – in eyebrows and eyelashes. They do not live in head hair and are different to head lice. Their eggs (nits) look like small brown dots attached to the hair.

Pubic lice are spread through close body contact, usually during sex, but other intimate or close bodily contact can pass them on. You cannot prevent their spread by using condoms. It is possible, but rare, to get pubic lice from sharing infected towels, bedding or clothing.

Symptoms usually include an intense itching in the groin, especially at night. Some people notice the lice eggs firmly attached to pubic hair. Small spots of blood or black powder may appear on skin, underwear or sheets. Long-standing pubic lice infestations can make you feel generally unwell.

Your GP or staff at a [sexual health clinic](#) will be able to diagnose public lice. They may use a magnifying glass to look for lice or signs of lice, such as their eggs.

Scabies

Scabies is a skin disease caused by a mite that burrows under the skin. It causes intense itching, particularly at night or after a hot bath or shower. The mites are invisible to the naked eye, but can cause a red, blotchy rash and silvery lines, like tracks, on the skin where the mites have burrowed. The rash can appear anywhere on the body, but most commonly appears on the hands and feet (between the fingers and toes), the genital area (in men), the nipples (in women), wrists, elbows, stomach and buttocks. In elderly people, young children and people with a weakened immune system, such as people with a low [CD4 cell count](#), it can also appear on the head and neck. If the rash is scratched, it can become irritated, bleed or turn into crusty sores.

Scabies is passed on through prolonged skin-to-skin contact, including sexual contact. It can also be spread by sharing clothes, towels or bedding with someone who has scabies.

"Although they feed on blood, pubic lice and scabies mites cannot pass on HIV."

It takes about three to six weeks for symptoms to appear after infection (the incubation period). If you have had scabies before, symptoms will start much sooner if you become infected again. You can pass on scabies during the incubation period, before you know you have scabies.

Your GP can usually diagnose scabies by looking at the rash. They may do some tests to rule out other skin conditions such as eczema. If you, or a partner, have genital scabies, you could also go to a sexual health clinic for diagnosis and treatment.

Treatment of pubic lice and scabies

You can treat pubic lice at home using an insecticide lotion, available from chemists without prescription or from your GP or a sexual health clinic. The doctor or pharmacist will recommend the best treatment for you. Follow instructions for use, leaving the lotion on for the recommended time. You may need to use the treatment a second time, a week later, to make sure you have cleared the infestation.

Other people in your household should also be treated, as should any partners or anyone you have had intimate contact with, such as sharing a bed. Do not have sex or close body contact until you have been successfully treated.

Insecticide lotions are also effective against scabies. You apply them to your whole body (except your head) and leave them overnight, rinsing them off after 8 to 24 hours. Follow the instructions for applying the treatment carefully. You may need to do a second treatment a week later.

The itching may continue for a few weeks after treatment. Hydrocortisone cream, calamine lotion or antihistamines can help with this. Try not to scratch, as this can result in a secondary skin infection. If this happens, you may need antibiotic treatment. If left untreated, scabies can

cause severe skin irritation.

For both pubic lice and scabies, wash all clothes, towels and bedding you have used on a hot cycle (50°C or higher) when you start treatment. If there are items that can't be washed, put them in an airtight bag for three days.

In cases of crusted scabies (see below), clean the floors at home and vacuum your carpets and furniture such as sofas and armchairs.

Complications

There is a more severe form of scabies called crusted scabies (also known as Norwegian scabies). People with a weakened immune system (with a low CD4 cell count) may be more at risk of this complication, as your immune system may not be able to limit the mites reproducing.

Crusted scabies can affect the whole body including the head and nails. The flaky rash can look like the skin condition psoriasis and, unlike standard scabies, does not itch.

Crusted scabies can be treated with an insecticide taken orally (as a tablet), called ivermectin, alongside a cream.

This form of scabies is very contagious, so even minimal physical contact with others, or with infested bedding, towels or clothing, can pass it on.

Other health concerns

If you think you picked up pubic lice or scabies from sexual contact, consider having a full [sexual health check-up](#) to check for other sexually transmitted infections.

Although they feed on blood, pubic lice and scabies mites cannot pass on HIV.

Find out more

HIV & sex Information booklet

Sexual health check-ups Simple factsheet

Health checks Basic leaflet with pictures