

# WHO Action on Scabies

## June update: cases declining amongst the Rohingya

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Most displacement camps currently report community transmission rates of less than 5%. The WHO epidemiology team points to a range of intervention-related causes.

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- Infection rates show a 77% decline
- Scabies retains its position with a 40% share of skin infections
- Significant variance in camp distribution of scabies cases

### What is scabies?

Scabies is an infestation of the skin caused by tiny mites called *Sarcoptes Scabiei*. These mites burrow and lay eggs in the skin, causing rashes and sores. Scabies infestation can be transferred through skin-to-skin contact or through contact with clothes and furnishings. Though non-lethal, scabies can cause extreme discomfort and pain as the skin reacts to the invasion. Relentless itching is a common symptom and scratching can lead to more serious skin damage, including bleeding. Scabies is particularly distressing for young people and babies.

### Progress since April

In April 2022, WHO carried out community mapping in collaboration with Community Health Workers led by UNHCR. The survey provided an assessment of the extent of the ongoing scabies infestation amongst Rohingya displacement camps in Cox's Bazar. WHO and partners confirmed 18,505 scabies cases, crossing the 10% transmission threshold for

required mass drug administration. Since then, the health sector has scaled up scabies case management at the camp level, coordinating with partners to ensure the rapid mobilization of routine medications. Support from the WASH sector and Risk Communication and Community Engagement (RCCE) has proved effective in helping communities spot and protect themselves from scabies cases.

### Tracking the decline

Over the past two months, epidemiology teams have tracked a decline of 77% in the rates of scabies infections across all displacement camps. In the last two weeks alone, case rates have almost halved. As a proportion of total skin infections, scabies still retains a 40% share. However, absolute values have dropped considerably. The WHO epidemiology team believes the current decline may trend down to 2%—the point at which scabies can be routinely handled by health facilities.

### Camp-by-camp analysis

As scabies rates decline, WHO has noted a marked variance in camp distribution. In April 2022, eight camps had reported community transmission rates over the 10% threshold for drug administration. Currently, only one camp exhibits rates over this threshold; most others show rates between 2% and 4%. Overall, this suggests specific environmental factors are

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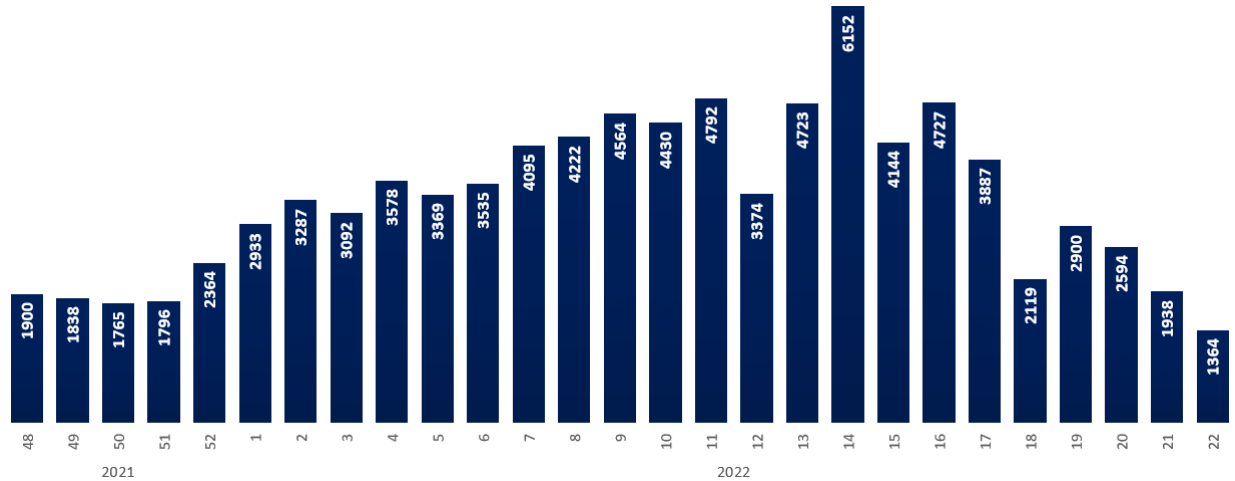


Figure 1. Absolute number of scabies cases across all 33 Rohingya displacement camps since 2021. Figure shows data captured from both health facilities and at the community level.

involved where transmission rates are at their highest.

### Surveillance and case management

It's plausible that the process of surveying the spread of scabies in the displacement camps has caused a rise in case identification and management. Given the nature of scabies transmission, it's likely that stronger case management is playing a role in declining rates. Improved community awareness and WASH responses are also likely to be contributing factors. Finally, environmental factors such as seasonality and community mobility may also be having an impact on changing rates.

### Next steps

Given the rapid decline in cases, the infestation doesn't meet the 10% threshold for mass drug administration (MDA). WHO continues to monitor the situation and MDA will be a viable option should cases surge further. For now, improvements to case management and WASH administration appear to be having the desired effect. Risk communication will remain a critical part of the ongoing intervention response, building community-level awareness of the scabies threat.

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