Bug Bites

| Bug (click name for images) | Risk factors | Description | Associated Diseases (partial lists) |
|-----------------------------|--|---|---|
| <u>Flea bites</u> | Pets | Clusters of small papules, often on ankles, some patients may develop <u>bullae</u> | Plague, rat bite fever, murine typhus, cat scratch fever |
| Mosquito bites | Outdoor activities, esp at dusk/dawn, standing water | Papules and wheals with central punctum, larger than flea bites, exposed body parts | Malaria, Zika, Dengue, Encephalitides, West Nile, Chikungunya |
| <u>Bedbugs</u> | Hotel stays, crowded living conditions | "Breakfast lunch & dinner" grouped papules, face, extremities | None |
| <u>Tick bites</u> | Outdoor hiking, camping | Tick attached to body, look in crevices, hair-bearing areas | Lyme, RMSF, Babesiosis, Alpha gal syndrome |

<u>Management</u> – next slide

<u>Papular urticaria</u> = hypersensitivity reaction to insect bites

Bug Bite Management

- Treat inflammation and pain
 - Ice / cool compresses, ibuprofen, elevation if significant swelling
- Treat itch
 - Cut nails short, short tepid baths/showers, cool compresses
 - Topical anti-histamine (pramoxine, diphenhydramine)
 - Topical calamine, menthol
 - Oral anti-histamine (diphenhydramine)
 - Low-potency topical corticosteroids (1% hydrocortisone)
- Assess for any superinfection and treat with antibiotic (topical or oral) as indicated
- Discuss prevention with parents / patients
 - Avoid high risk exposure situations
 - Treat flea / bedbug infestations
 - Insect repellent e.g. DEET, picardin
 - Spray on outside of clothing in young children
 - Wear long sleeves / long pants

How to remove a tick

<u>Video</u>

<u>Article</u>

Scabies

- Transmitted by direct contact or through a fomite (clothing, sheets)
- Risks: crowded living, others in family with rash / itch
- Burrows (serpiginous small white lines), erythematous papules (hypersensitivity to mite) esp on webspaces between digits, beltline, intertriginous areas
 - Nodular form: erythematous nodules often in the axillae and groin
 - Norwegian (crusted) scabies: widespread thick crusts
 - Highly contagious, occurs in immunosuppressed, infants, diabetes
- Severely itchy, especially at night
- Clinical diagnosis generally
 - Can observe mites & eggs in skin scrapings of a burrow viewed under a microscope
- Management
 - 5% permethrin applied neck to soles of feet at night, wash off next day in 8-14 hours
 - Young children may have face and scalp involvement apply sparingly to these areas
 - 30gm covers average adult, considered safe for age 2 months +, pregnant women
 - Warn patients itch and rash may initially worsen as mites die
 - Repeat treatment in 1 week to treat mites from unhatched eggs at first treatment
 - Wash all linens and clothes and stuffed animals in hot water
 - Treat itch

Lice

- Three types: <u>head lice</u>, body lice, pubic lice
- Head most commonly seen in children
 - Transmitted by head-to-head contact, sharing head gear (e.g. hats)
 - Commonly young children, girls (long hair) > boys
- Primary presenting symptom for head lice is itchiness of the scalp
 - Papules and crusts on scalp, nape of neck
 - On inspection, ovoid white nits (pinhead to sesame seed sized) firmly adherent to hair shaft
 - May see a live louse on scalp, but less common
- No shampoo x 24-48 hrs after topical therapy
 - After treatment, may comb out dead nits with a lice comb although schools should not exclude students for nits

| Med | Dose | Comment |
|--------------------------------|---|--|
| 1% permethrin (2mo & older) | Apply to hair, leave on for 10 min, rinse, repeat in 1.5 wks | Resistance concerns |
| Ivermectin (6mo & older) | Apply to hair, leave on for 10 min, rinse | Also oral 200mcg x 1 available* |
| Malathion (6yo & older) | Apply to hair, leave on overnight 8-10 hrs, shampoo, repeat in 1.5 wks | Resistance concerns, smelly, flammable |
| Spinosad (6mo & older) | Apply to hair, leave on for 10 min, rinse | Repeat in 1.5 wks as needed |
| Lindane | No longer used | Can cause seizures |

^{*} Oral ivermectin may be used in children > 15 kg for topical therapy treatment failures

Spiders

Tip: Patient-suspected "spider bites" are often abscesses

Black Widow

- Outdoors, garages, woodpiles, gardening tools
- Most bites on extremities
 - Initial bite = no or mild pain
 - Bite site may show fang marks
 - Become target-like: central punctum, pale center, red rim
- May develop generalized symptoms 30-120 minutes or longer after bite = lactrodectism
 - Muscle pain / rigidity, abdominal pain may mimic appendicitis
 - · Tremors, paresthesias, neurotoxicity
 - Autonomic symptoms, diaphoresis
- Local wound care, update tetanus, oral analgesics, antivenom only for severe symptoms
- Most recover in 24-48 hours

Brown Recluse

- South, West, Midwest
- Indoors, dark areas: under rocks and boxes, in shoes, in attics, basements
- Usually, patient accidentally crushed spider as roller over or stepped on it
- Bite site initially erythema, may have fang marks
 - Becomes pale in center with red rim, then develops central ulcer → dark escar "red white & blue lesion"
 - Eschar sloughs off, may take weeks
- Increasing pain at bite site over next 2-8 hours
- Rare systemic effects = loxoscelism
 - Malaise, nausea, vomiting, fever, myalgias
 - Hemolytic anemia, DIC, rhabdomyolysis
- Local wound care, update tetanus, oral analgesics, labs and hospitalize for systemic symptoms

Papular urticaria

- Chronic or recurrent itchy papules
- Hypersensitivity reaction to insect bites (mosquitoes, fleas, bedbugs, etc.)
- 2-10 years old most common
- Crops of symmetrically distributed papules & papulovesicles, often central punctum (<u>Images</u>)
 - Arms, legs, upper back, scalp
 - Lesions may blister
- Parents often confused about cause since only one household member affected and numerous lesions makes insect bites seem less likely
- <u>Treat itch</u> symptomatically, prevent insect bites

SCRATCHES Mnemonic

Symmetric

Crops or clusters

Rover - no pet present yet have "flea bites"

Age 2-10 years old

Target appearance can occur

Confused about cause / Chronic

Household members not affected

Exposed skin only

Seasonal (Spring and Summer)