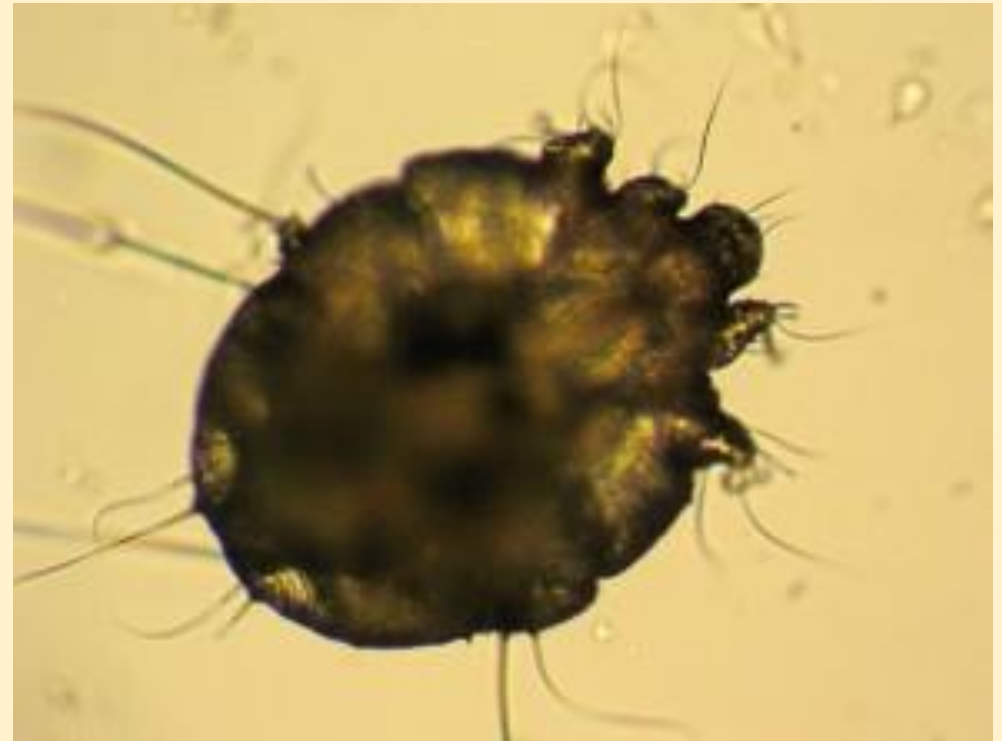


Scabies an equity issue:
South Auckland
primary care experience

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(and Matire Harwood, GP Papakura)

Overview

- Our context
- Risk factors in South Auckland
- Challenges in diagnosis....
- ..and treatment
- Requires an equity lens



<https://www.dermnetnz.org/topics/scabies/>

Our context

- GPs in Clendon (MN) and Papakura Marae Health Clinic (MH)
- Enrolled populations
 - Papakura: 90% Māori
 - Clendon: 1/3 Māori, 1/3 Pasifika
 - Majority high needs Q5
- See scabies every day
- Sometimes we take it home



South Auckland context

- Not a 'hygiene' or 'cultural' issue but an issue of poverty and overcrowding
- In our experience also an issue of 'mobility'

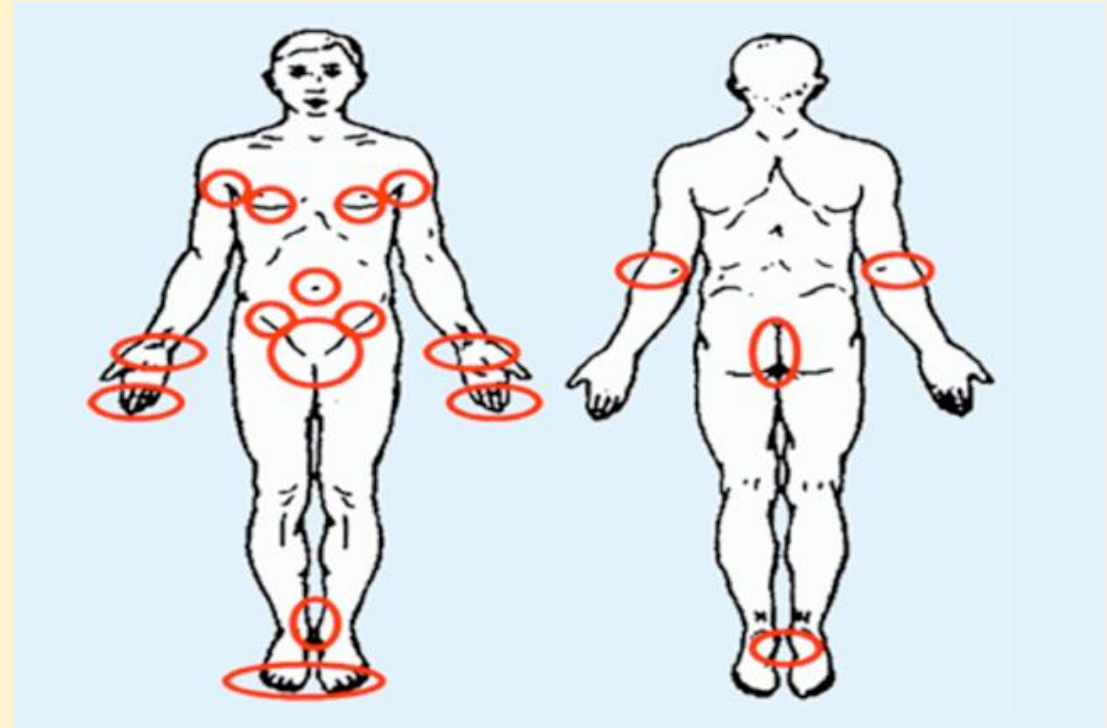


Important points in history

- Started not long after school holidays or weekend away
- Whole whānau affected
- Intense itch
- Past history of scabies (check medication list)
- How many people at home? (plan treatment)

Examination

- Lesions vary
- Typical sites?
- Secondary bacterial infection?



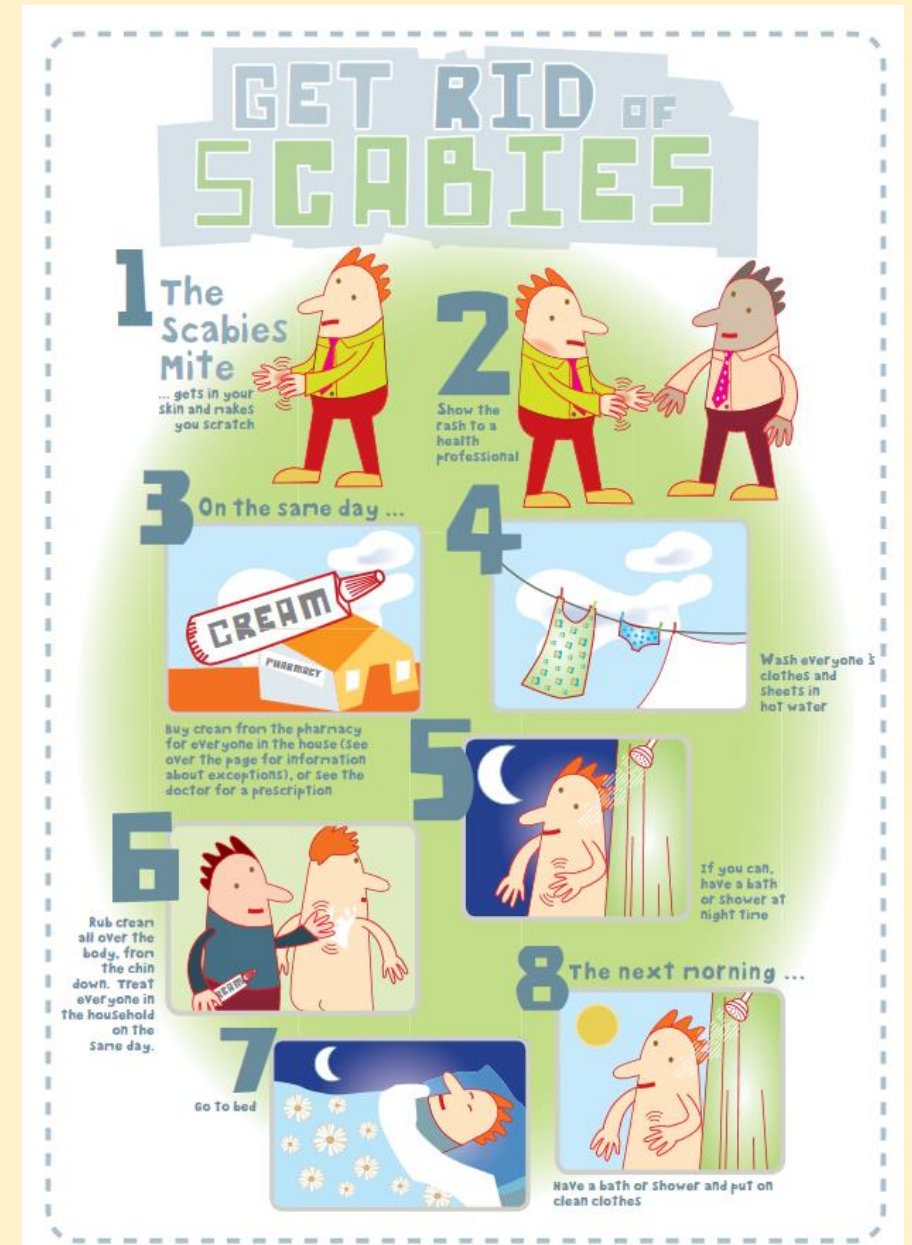
<https://www.healthnavigator.org.nz/health-a-z/s/scabies/>

We would appreciate support for diagnosis....

- Study by Thornley, Sundborn et al ‘What is the agreement between scabies diagnoses made in an early childcare centre in Auckland?’
- 40 children screened
 - Dermatologist – 0
 - GP – 9 = 38%
 - Nurse – 6 = 25%
 - IACS consensus criteria “suspected scabies” – 18/24 = 75%
- Conclusion: “highlights the need for standardisation in the diagnosis of this important skin disease.”

...and treatment challenges

- Stigma
- Multiple people to be treated at once
- Washing
- Whānau costs
 - Financial (Rx and laundromat)
 - Time
 - Effects on sleep, education, work
 - Health costs – cellulitis, PSGN



An equity lens to scabies

- Advocacy and ROOT CAUSES
 - Living wage
- Address WIDER DETERMINANTS
 - Refer whānau to AWHI
- Audit CLINICAL CARE
 - Guidelines
- Access to EFFECTIVE TREATMENT
 - Safe for tamariki

Ngā mihi

Any questions?