CASE 26-1

A healthy 20-year-old male presents with a 3-month history of worsening pruritus, which initially started on the hands and then spread to involve his arms, abdomen, and thighs. Examination shows mild, generalized, xerosis, as well as excoriated papules on the finger webs, wrists, arms, abdomen, flanks, and upper–inner thighs. He is having trouble sleeping because he is so itchy. He is not aware of any friends or family who feel itchy. He recently visited his girlfriend in another city, but other history is unremarkable.

Which next step(s) should you take?

(A) Check a complete blood count with differential

(B) Order a chest x-ray

(C) Perform a skin scraping for detection of scabies

(D) Begin a trial of emollients and topical steroid
The correct answer is (C), perform a skin scraping for detection of scabies

Certain conditions such as dry skin and scabies may be very pruritic, but have subtle primary skin lesions. Given the distribution and history, scabies is the likely diagnosis and a scraping of the lesions to look for mites and eggs is an easy initial office test.

A complete blood count and chest x-ray are tests to search for a systemic disease such as malignancy, but it would not cause this type of rash. Giving a trial of therapy without first ruling out infestation will ultimately not resolve the patient’s symptoms.