

Permethrin 5% Cream Application Guidance for Residents

**This guidance is to be used for the application of topical Scabies treatment -Permethrin 5% cream
(for external use only)**

Purpose and Scope

This guidance supports care home staff to apply permethrin 5% cream safely and effectively for the treatment of scabies in residents. It does not replace clinical assessment, prescribing advice, or outbreak/contact management advice.

Before you start

- **Do not bathe** or shower the resident immediately before application. Apply to clean, cool, dry skin.
- Check the prescription and the product leaflet for contraindications, allergies (including chrysanthemum/pyrethroid allergy), and age-related advice.
- **Do not apply to open wounds, broken skin, or mucous membranes** (eyes, inside nose/mouth, genital mucosa). Seek clinical advice if there is significant secondary infection.
- **Ensure adequate supply:** many adults need 1–2 x 30 g tubes per application. Plan enough for both applications if required 2 - 4 x30g tubes (tubes must not be shared between residents).
- Ensure the residents have **clean nightwear/clothing and clean bedding** available for the evening of treatment and the following morning.

Safety Notice

- Some permethrin preparations are in a paraffin-containing cream base. Paraffin/skin cream residue on clothing, bedding, dressings and bandages can increase flammability. **Keep residents away from smoking, naked flames and heat sources**, and launder bedding/clothing regularly.
- Permethrin may temporarily increase itching, stinging or burning. **It may worsen asthma or eczema** in some people—seek advice if symptoms deteriorate significantly.
- **Post-scabies itch** is common and can last for weeks after successful treatment.

Best Timing

- Apply the cream in the **evening** so it can remain on the skin for 8–12 hours (overnight is easiest).

Staff PPE and Hand Hygiene- IPC Steps

- Perform hand hygiene **before and after care**.
- Wear **disposable gloves and apron** when applying the cream and providing hands-on personal care.
- Consider a **long-sleeved disposable gown/over-sleeves** for tasks where extensive skin-to-skin contact may occur.

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Step-by-Step Application- How to Apply

1. **Remove the residents' clothing and jewellery.** If a ring cannot be removed, slide it up, apply cream to the skin underneath, allow to dry, then return the ring to position.
2. Apply a **thin layer** of cream to all areas of skin. Pay particular attention to **skin folds and creases**.
3. **Treat the whole-body** including neck, palms of the hands and soles of the feet; include face/ears/scalp. Avoid the eyes and mouth. If cream gets into the eyes, rinse immediately with water.
4. Ensure cream is applied: **between fingers and toes; wrists; elbows; armpits; under breasts; nipples; external genitalia; between buttocks; and any visible lesions**.
5. **Keep nails short.** Brush a small amount of cream under the ends of fingernails and toenails (mites can live under nails).
6. Allow the **cream to dry** before dressing (usually 10–15 minutes).
7. After treatment, the resident should put on **clean nightwear/clothing** and get into clean bedding.
8. It is often easiest to apply to the **soles last once the resident is in bed**; allow to dry and then put on clean socks/slippers if required.

During the Treatment time -8–12 hours

- The cream must **stay on for 8–12 hours**. Do not bathe or shower during this time.
- If hands are washed or personal care involving washing occurs during the 8–12 hours, **reapply cream to hands and any washed areas immediately** afterwards.

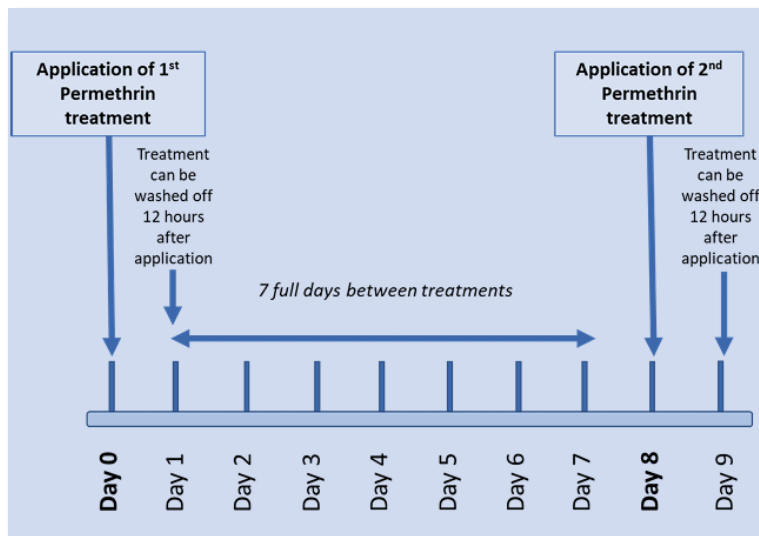
After Applying the Cream and Staff PPE Removal

Once treatment has been applied:

- Remove **gloves** → **wash hands**
- Remove **apron** → **wash hands**
- Wash hands with **soap and water up to the elbows**, paying attention to **forearms and elbows**.

Repeat Application

A second full-body application is usually required **7 days after** the first (unless the prescriber advises otherwise).



The next Morning: 8–12 Hours Later

- After **at least 8–12 hours**, wash the treatment off thoroughly using **soap and water**. Put on **fresh clothing and replace bedding** after the cream has been removed.

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Laundry and Bedding after Treatment

Items used by the resident 3 days **before treatment and up to 24 hours** after the first dose should be managed as follows:

- Wash clothing, night wear, slippers, towels and bed linen on the hottest wash the fabric will tolerate (preferably **60°C or above** where possible) and dry thoroughly (tumble dry if suitable).
- **Do not mix this laundry with other residents' laundry.**
- Handle laundry with **gloves and apron** to avoid skin contact; **use a soluble/alginate bag if available and place directly into the machine.**
- Items that cannot be washed should be **sealed in a plastic bag for at least 4 days** before reuse (then vacuum/clean if appropriate).

Cleaning the Room/Environment

- Routine cleaning: clean hard and high-touch surfaces with **warm water and detergent.**
- **Vacuum** carpets/rugs/soft furnishings **daily for 3 days** after the first treatment for classical scabies (longer if crusted scabies is suspected, as advised by IPC).
- Remove non-wipeable soft furnishings from use, **seal in plastic bags for 4 full days**, then vacuum.

Aftercare and Ongoing Symptoms

Nail care matters

- Long nails can **harbour mites** and can also damage skin due to scratching.
- Ensure nails are kept **short and clean** after diagnosis.

Post-scabies itch is common

- Itching may continue even after successful treatment ("post-scabies syndrome") due to an allergic reaction to dead mite debris. This can last **4-6 weeks**.
- GP may recommend/prescribe **emollients** and **antihistamines** to relieve symptoms.
- **Seek clinical advice if new burrows appear, symptoms worsen, or symptoms persist beyond 4–6 weeks after the final application.**

Contact for Advice

For support with Permethrin 5% application contact
IPC@cumberland.gov.uk

National guidance and links

- [UKHSA guidelines for the management of scabies cases and outbreaks in communal residential settings - GOV.UK](#)
- [Scabies | Health topics A to Z | CKS | NICE](#)
- [Scabies](#)
- [Scenario: Management of scabies | Management | Scabies | CKS | NICE](#)
- [Emollients: new information about risk of severe and fatal burns with paraffin-containing and paraffin-free emollients - GOV.UK](#)