

## **THE CHILD HEALTH CONNECTION, INC.**

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### **THE LATEST ON HEAD LICE (Pediculosis Capitis)**

#### **What Are Head Lice?:**

Head lice are small tan-colored insects (about the size of a sesame seed) that live on the scalp and shafts of the hair. The female lice can live up to three to four weeks. When mature they can lay up to ten gray/white eggs (nits) a day. They attach the nits firmly to the hair shafts because they need warmth from the scalp for hatching. Lice can only live one to two days away from the scalp. Eggs found more than one centimeter from the scalp are unlikely to be viable.

#### **Signs and Symptoms:**

- There may be itching of the skin where lice feed on the scalp or neck.
- Nits, glued to the hair, may be visible more commonly behind the ears and near or at the nape of the neck.
- Scratching behind the ears and at the nape of the neck.
- Open sores and crusting that may be associated with a secondary bacterial infection.
- With a first case of head lice, itching may not develop for four to six weeks, because it may take that long for sensitivity to occur.

#### **Incubation:**

- The incubation period is from six to ten days from laying to hatching of eggs.
- Lice can reproduce two to three weeks after hatching.
- The contagious period lasts until treated with a product that kills lice and viable eggs have been killed or removed.

#### **Myths and Facts About Head Lice:**

- Head lice are the second most common condition among children — second only to the common cold.
- Pre-school and elementary age children (3-12) are most commonly infested.
- Lice infestation is not due to poor hygiene. In fact, lice prefer to live on clean heads and spread easily through direct contact.
- Head lice are not a health hazard and are not responsible for the spread of any disease.
- Head lice can be spread whenever there is direct contact between the head or hair with an infested person.

- Although rare, head lice can also be spread through the sharing of personal articles like hats, towels, brushes, helmets, hair ties, etc.
- There is also the possibility of spreading head lice via a pillow, headrest or similar items.
- Head lice cannot hop, jump, or fly; they crawl.
- Humans cannot get head lice from pets.

**Roles of the Caregiver/Teacher and Family:**

- If a child is diagnosed with head lice, confidentiality must be maintained.
- Notify the parent or guardian by phone or a note for the parent at the end of the school day. Because there is little risk to others from infestation, the child should be allowed to remain in class.
- A no-nit policy is not recommended.
- Staff may check other children who may have had direct head to head contact with the infested child or who may be observed scratching their heads.
- It is not necessary to alert parents unless there is a high percentage of children infested in the child's classroom.
- Implement other control measures.
- Educate caregivers/teachers and parents of all children periodically about the diagnosis, treatment and prevention of head lice.

**Prevention of the Spread of Head Lice:**

- Teach children not to share personal items such as combs, brushes and hats.
- Do not restrict children from wearing protective headgear because of the fear of head lice.
- Adults should be aware of the signs/symptoms of head lice infestation.
- Infested children should be treated promptly to minimize spread to others.

**Treatment:**

- Never initiate treatment unless there is a clear diagnosis of head lice. Always check with your healthcare provider to avoid unnecessary treatment.
- Never use common household chemicals or kerosene as they are very dangerous.
- Other household products such as salad oils, mayonnaise, or petroleum jelly have not shown to be effective.
- The ideal treatment for lice would be completely safe, free of harmful chemicals, readily available without a prescription, easy to use and inexpensive.

### **Remedies (Pediculicides):**

- **Nix** (1% Permethrin) - It is currently recommended as one of the drugs of choice for head lice. It has an extremely low toxicity to humans and is less allergenic than pyrethrins. It leaves a residue on the hair that is designed to kill emerging nymphs from eggs not killed on the first application. It is available over the counter.
- **Rid, R&C, Clear Lice** (Pyrethrin) - Pyrethrin products have extremely low toxicity to humans. But, in some cases, a second treatment may be needed. Labels warn of a possible allergic reaction to those who may have other sensitivities. These products are available without a prescription.
- **Ovide** (0.5% Malathion) - It is only available by prescription as a lotion applied to dry hair. It has a high alcohol content which makes it highly flammable. Hair should be allowed to dry naturally. A single application is usually adequate. It is not recommended for children under age six and is contraindicated for children under age two.
- **Ulesfia** (Benzyl alcohol 5%) - It is approved as treatment for children older than six months. It is not neurotoxic and kills head lice by asphyxiation. It is available by prescription. Re-treatment may be needed.
- **Kwell** (1% Lindane) - It is available only by prescription and not widely used because of central nervous system toxicity. It should only be used as a second-line treatment.

### **Natural Products:**

Essential oils have been widely used in traditional medicine for treating head lice infestation. They are not required to meet FDA efficacy. Some products may produce toxic effects too. Many are available at health food stores and on-line as well.

### **Control of Head Lice:**

- Start treatment as soon as diagnosis is made.
- Family members should be checked and treated if live lice or nits are found or if they share a bed with the person with infestation.
- Items that have been in contact with the head of the person with infestation in the 24 to 48 hours before treatment should be considered for cleaning. Contaminated articles should be laundered at a temperature of 130 °F. Drying on the hot setting kills lice in bedding and clothing.
- Vacuum floors, carpets, mattresses, furniture and car seats as a safer alternative to chemical sprays.
- Although it is rarely necessary, items that cannot be washed can be bagged in plastic for two weeks. Newly hatched nymphs would not survive without a source for feeding.

- Extreme cleaning measures are not beneficial.

**The Key To Success:**

Whatever treatment you choose, be sure to use according to label instructions or the advice of your healthcare provider. Removing head lice completely from the environment is critical to breaking the cycle. Educational programs may be helpful in the management of head lice.

**Resources:**

American Academy of Pediatrics. (2005). Head Lice (Pediculosis Capitis). *Managing Infectious Diseases in Child Care and Schools*.

The Child Health Connection. (2006). *Head Lice (Pediculosis Capitis)*.

Frankowski, Barbara L., Bocchini Jr., Joseph A. and The Council on School Health and Committee on Infectious Diseases. Clinical Report Head Lice. *Pediatrics*. Published online July 26, 2010; DOI: 10.1542/peds.2010-1308.

*Head Lice Myths and Facts*. Found at <http://www.licemd.com/lice/lice-myth-facts.asp>.