HEAD LICE 101:

- Treatment for head lice includes the use of an OTC (over-the-counter) or prescriptions mediation. Follow the directions closely which often includes a second treatment to be done 7-9 days after the first.
- Retreatment is often needed because medications do not completely kill the eggs (nits).
- NEVER apply pesticides to any furniture, clothing or child in an attempt to control head lice. These applications do not help control lice and expose children to needless pesticide risk. Surfaces can be vacuumed or wiped with a damp cloth.
- Head lice are primarily transmitted by direct head-to-head contact. Discourage children from sharing combs, brushes, scarves, hats or headphones, and sharing of personal grooming items to diminish the spread of lice.
- Lice cannot jump, hop or fly, but they can crawl rapidly.

Source: Center for Disease Control (CDC)

http://www.cdc.gov/parasites/lice/head/prevent.html
**THE FACTS**

- More than 12 million people, mostly children and school personnel, get head lice every year. Several research groups have identified populations of head lice in the United States that could not be killed with commonly used insecticidal shampoos.
- Lice cannot live longer than 24-48 hours off their host. They cannot reproduce in carpets, pets, furniture, or in trash cans, etc. They dehydrate quickly.
- Do not panic! Head lice are not an emergency and, in most cases, do not pose a health risk - they are simply an inconvenience that should be dealt with compassionately and calmly.
- Children are often excluded from school even when they are not at risk to transmit head lice. In a Harvard University study, dandruff, fibers, dirt, scabs, skin cells, knotted hair, or other insects are misdiagnosed as head lice 40% of the time! (Harvard School of Public Health)
- If properly treated the child should be able to return to school within 72 hour or less. Children should not miss excessive days from school for head lice infestation.

**Head Louse** Photo: licekiller.com

Head lice are small, wingless parasitic insects. They are typically 1/8-1/6 inch long, brownish in color with darker margins. The claws on the end of each of their six legs are well adapted to grasping a hair strand.

**Translucent Nit** Photo: Nitcontrol.com

Female head lice glue their grayish-white to brown eggs (nits) securely to hair shafts. (When first laid they are translucent and mirror their surroundings.)

**Nits(Eggs)** Photo: Natural-Health-and-wellbeing.com

As the nits mature they turn from tan to brown in color before they hatch.

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1. Work in a well lighted area with a magnifier or reading glasses.
2. Use a hairbrush to remove tangles. Hair conditioner or detangler aids with combing.
3. Divide the hair in sections and fasten off the hair that is not being worked on.
4. Use a lice comb (metal comb) to detect and remove lice and nits.
5. Go through hair sections from the scalp to the end of the hair. Nits are usually found close to the scalp.
6. Dip the comb in a cup of hot soapy water or use tape to remove any lice, nits or debris from the comb.
7. Sift through the same section of hair and look for attached nits and live lice.
8. Move onto the next section until entire scalp and all hair has been checked.
9. Screen (with the lice comb) every day for 10 days and regularly thereafter.
10. If additional nits (at least 3-5 per day) are discovered, another manual search is recommended with the lice comb.

**Head lice have been around since the beginning of time; they are resilient and require diligence to break the cycle.**
Frequently Asked Questions for Head Lice Management:
Recommended Guidelines and Information for Administrators

What is Head Lice?
Head Lice are parasitic insects found on the heads of people. As many as 6-12 million people worldwide get Head Lice each year. Anyone who comes in close contact with someone who already has head lice, contaminated clothing, and other belongings is at risk for contacting head lice. According to the National Pediculosis Association (NPA), Head Lice can be spread whenever there is direct contact of the head or hair of an infested individual. Lice can also be spread by the sharing of personal articles like hats, towels, brushes, helmets, hair ties and so on. There is also a possibility that Head Lice can be spread via a headrest, pillow or similar item. Head Lice do not jump or fly and generally cannot survive longer than twenty-four hours off of the host. It is important to understand that, although lice can be transmitted from child to child, Head Lice does not transmit disease.

What does lice look like?
Forms of Lice:
Nits: Nits or head lice eggs, are difficult to see and are frequently confused with dandruff. Nits are firmly attached to the hair shaft and take approximately one week to develop.
Nymph: The nit hatches into a nymph. Nymphs, which look like an adult, but smaller, mature into adults about 7 days after hatching. In order to live, the nymph must feed on blood.
Adult: The adult is about the size of a sesame seed, tan to grayish-white, with six legs. Adult lice can live on the head of an individual for up to thirty days. In order to live adult lice need to feed on blood. If the louse does not have a source of food, it will die within two days.

What if a child is suspected to have head lice?
If a child is observed excessively scratching his/her head, the child should be discreetly referred to the school clinic for a head check. The school nurse, clinic assistant or designee will conduct an examination of the hair and scalp. This is necessary to determine a Head Lice infestation. If lice or nits are found, the parent will be contacted and provided information for monitoring and treatment.

Does a child need to be sent home if found to have live lice?
Yes, the school administrator or school nurse should:
- Have the parent of the student found to have live Head Lice contacted and information provided for treatment. The child does need to be sent home early from school; They can go home to receive treatment and return to class after appropriate treatment has begun.
- Schools may keep a list of children who have been sent home for the treatment of head lice. Children should not miss excessive days from school for head lice. If the child's absence is prolonged, the family will be contacted by the school and further assistance will be offered. Head lice can be a nuisance but they have not been shown to spread disease.
• Nits may persist after treatment, but successful treatment should kill crawling lice. Nits are glued to the hair shaft and do not pose a threat of being transferred to others. Personal hygiene or cleanliness in the home or school has nothing to do with getting head lice.
• Have the parent of the student found to have live Head Lice contacted and encourage to pick up child from school for treatment.

**Where do we find information to assist parents?**
The school nurse or clinic assistant can provide information and guidance for parents on head lice. Guidelines for treatment are available in English and Spanish on the School Health Services website. Many times parents become anxious when their child is discovered to have Head Lice. They may be embarrassed or concerned that they are seen as not being a good parent. It helps for them to have someone to talk to and be reassured that anyone can get lice; it is not a sign of poor parenting or uncleanliness.

**Does the whole class need to be checked if one student is found to have lice?**
No, head lice screening programs have not had a significant effect on the incidence of head lice in the school setting over time and have not proven to be cost effective (Frankowski & Bocchini, 2010). At the school administrator’s discretion, the sibling(s) of the infested child may be checked for lice. Head lice infestation is a social issue not a health threat. Over-emphasis can lead to unproductive use of time by school staff and parents, missed classes, unnecessary absences, and parents missing work.

**Do we have to send letters to parents notifying them that there was a child found to have lice in their child’s class?**
No, it would be beneficial to periodically provide information to families of all children on the diagnosis, treatment, and prevention of head lice. Parents should be encouraged to routinely check their children’s heads for lice or nits.

**Does a child need to be rechecked before re-admittance to class?**
Yes, children should be permitted to return to school after appropriate treatment is started. Nits may persist; however, there is no threat of spreading lice to others being nits are glued to the hair-shaft. If requested by the parent, the parent may bring the child to the school clinic where the child could be checked by a trained school representative for clearance.

**Why do some children get re-infested?**
Re-infestation can occur if product directions are not followed carefully. Some resistance to pediculicide’s have been reported. Retreatment of head lice usually is recommended because no approved pediculicide is completely ovicidal (whether it can kill lice eggs). To be most effective, retreatment should occur after all eggs have hatched but before new eggs are produced. The retreatment schedule can vary depending on whether the pediculicide used is ovicidal. If crawling lice are still seen after a full course of treatment the parent should contact their health care provider. If a child is sent home for more than two infestations with live lice,
additional assistance may be obtained by contacting the nursing supervisor. If a home visit is requested, the visit will be conducted by the nursing supervisor with the school social worker.

**What if a parent cannot afford to purchase the product for treatment?**
If the parent cannot afford or does not wish to use a pediculicide, manual removal via wet combing or an occlusive method may be recommended, with emphasis on careful technique and the use of 2 to 4 properly timed treatment cycles. Alternative methods have not been FDA approved and success with eliminating lice varies. Coupons are often available for printing from product websites. Seeking assistance from the school PTA to purchase product for parents who cannot afford it may also be a resource.

**What are the side effects of the medications to treat head lice?**
Treatments for head lice are generally safe and effective when used correctly. Some treatments may cause an itching or a mild burning sensation caused by inflammation of the skin on the scalp. Most products used to treat head lice are pesticides that can be absorbed through the skin. Therefore, all medicines used for the treatment of lice should be used with care and only as directed.

**If a child is found to have lice and the parent is unavailable to pick up their child from school, what do we do?**
A child with an active head lice infestation likely has had the infestation for 1 month or more by the time it is discovered and poses little risk to others from the infestation. The child could remain in class but be discouraged from close direct head contact with others. If a child is diagnosed with head lice, confidentiality must be maintained. The child’s parent or guardian should be notified that day by telephone or by having a note sent home with the child at the end of the school day stating that prompt, proper treatment of this condition is in the best interest of the child and his or her classmates. Common sense should prevail when deciding how “contagious” an individual child may be (a child with many versus a child with 2 live lice).

**Can a child be allowed to ride the bus home if found to have lice?**
Yes, the parent can be contacted and requested to have their child picked up from school. If this is not possible, the child should not be excluded from the bus. The child may need to sit separate from other students on the bus to avoid head to head contact with others.

Head Lice Education:
School and Community Resources to Avoid and Take Control of Head Lice (click on link to view PPT presentation)
**S.C.R.A.T.C.H.**
RESOURCES


Health Services
11/2011
HEAD LICE INFESTATION
(PEDICULOSIS)

FACT SHEET

What are head lice?
Head lice are parasitic insects found on the heads of people. As many as 6-12 million people worldwide get head lice each year.

Who is at risk for head lice?
Anyone who comes into close contact with someone who already has head lice, contaminated clothing, and other belongings, may be at risk for getting head lice. Preschool and elementary-age children, 3-10, and their families are infested most often. Girls get head lice more often than boys, women more than men. In the United States, African-Americans rarely get head lice.

What do head lice look like?
- **Nit**: Nits, head lice eggs, are difficult to see and are frequently confused with dandruff. Nits are firmly attached to the hair shaft and take approximately one week to develop.
- **Nymph**: The nit hatches into a nymph. Nymphs, which look like an adult, but smaller, mature into adults about 7 days after hatching. In order to live, the nymph must feed on blood.
- **Adult**: The adult is about the size of a sesame seed, tan to grayish-white, with six legs. Adult lice can live on the head of an individual for up to thirty days. In order to live adult lice need to feed on blood. If the louse does not have a source of food it will die within two days.

Where are head lice most commonly found?
Head lice are most commonly found on the scalp behind the ears and near the neckline at the back of the neck. Head lice hold onto hair with hook-like claws found at the end of each of their six legs. Head lice are rarely found on the body, eyelashes, or eyebrows.

What are the signs and symptoms of head lice infestation?
- Tickling feeling or something moving in the hair
- Itching, caused by an allergic reaction to the bites
- Irritability
- Sores on the head caused by scratching, can sometimes become infected.
How did my child get head lice?

- By head to head contact with an already infested person. Contact is common during play at school and at home (slumber parties, sports activities, at camp, on a playground).
- By wearing infested clothing, such as hats, scarves, coats, sports uniforms, or hair ribbons.
- By using infested combs, brushes, or towels.
- By lying on a bed, couch, pillow, carpet, or stuffed animal that has recently been in contact with an infested person.

How are head lice diagnosed?

By looking closely through the hair and scalp for nits, nymphs, or adults. Finding a nymph or adult may be difficult; there are usually few of them and they can move quickly from searching fingers. If crawling lice are not seen, finding nits within a ¼ inch of the scalp confirms that a person is infested and should be treated. If you only find nits more than ¼ inch from the scalp, the infestation is probably an old one and does not need to be treated.

How can I treat head lice infestation?

Step 1: Treat the infested person/any infested family members

Requires using an OTC (over-the-counter) or prescription medication. Follow these treatment steps:

1. Before applying treatment, remove all clothing from the waist up.
2. Apply lice medicine, also called pediculicide, according to label instructions. If your child has extra long hair, you may need to use a second bottle.

WARNING: Do not use a creme rinse or combination shampoo/conditioner before using lice medicine. Do not rewash hair for 1-2 days after treatment.

3. Have the infested person put on clean clothing after the treatment.
4. If some live lice are still found 8-12 hours after treatment, but are moving more slowly, do not retreat. Using a metal lice comb, remove dead and remaining live lice out of the hair. The medicine sometimes takes longer to kill the lice.
5. If no dead lice are found 8-12 hours after treatment and lice seem to be as active as before, the medicine may not be working. See your health care provider for a different medication and follow the treatment instructions.
6. A lice comb should be used to remove nits and lice from the hair shaft. Many flea combs made for cats and dogs are also effective. Finer tooth nit combs, available through Wal-Med® and the National Pediculosis Association *, may also be helpful.
7. After treatment, check hair every 2-3 days and use a nit comb to remove any nits or lice you see.
8. Retreat in 7-10 days.
9. Check all treated persons for 2-3 weeks after you think that all lice and nits are gone.

**Step 2: Treat the household**
1. To kill lice and nits, machine-wash all washable clothing and bed linens that the infested person had touched during the 2 days before treatment. Use the hot water cycle (130°F) to wash clothes. Dry the laundry using the hot cycle for at least 20 minutes.
2. Dry clean clothing that is not washable, (coats, hats, scarves, etc.) OR
3. Store all clothing, stuffed animals, comforters, etc., that cannot be washed or dry cleaned into a plastic bag and seal for two weeks.
4. Soak combs and brushes for 1 hour in rubbing alcohol, Lysol®, or wash with soap and hot (130° F) water.
5. Vacuum the floor and furniture. Do not use fumigant sprays; they can be toxic if inhaled.

**Step 3: Prevent Reinfestation**
Lice are most commonly spread directly by head-to-head contact and indirectly through sharing of contaminated clothing or belongings. Teach your children to avoid activities that are likely to spread lice.
- Avoid head-to-head contact common during play at school and at home (slumber parties, sports activities, at camp, and on a playground).
- Do not share clothing, such as hats, scarves, coats, sports uniforms, hair ribbons, or barrettes.
- Do not share infested combs, brushes, or towels.
- Do not lie on beds, couches, pillows, carpets, or stuffed animals that have recently been in contact with an infested person.

**When treating head lice:**
1. Do not use extra amounts of the lice medicine unless instructed. Drugs are insecticides and can be dangerous when misused or overused.
2. Do not treat the infested person more than 3 times with the same medication if it does not work. See your health care provider for alternative medications.

*Use of trade names is for identification purposes only and does not imply endorsement.*