



Don't Let Head Lice Keep You Up At Night!

Here's What You Should Know



Any child can get head lice.

- Head lice are a common condition in school-age children—nearly 6 to 12 million get them every year¹
- Personal hygiene and cleanliness of home, clothes, or hair, or where you live or play, have nothing to do with getting head lice¹
- Lice mostly spread by direct head-to-head contact. They don't jump or fly^{1,2}

Consult your child's doctor.

- Speak with your doctor about treatment options and whether a prescription medicine may be right for your child³
- Only use head lice medicine when it's certain that your child has head lice. Head lice have shown resistance to some over-the-counter treatments in different parts of the US. Prevalence of this resistance isn't yet known and can vary throughout the country^{3,4}



Treat immediately!

- If your doctor decides a prescription medication is right for you, carefully follow the directions for the head lice medicine your doctor prescribes⁵
- Remember that only adults should apply head lice medication
- Check with your doctor if you think a second round of treatment is necessary

References

1. Centers for Disease Control and Prevention. Frequently asked questions. http://www.cdc.gov/parasites/lice/head/gen_info/faqs.html. Accessed August 3, 2016. 2. Centers for Disease Control and Prevention. Epidemiology and risk factors. <http://www.cdc.gov/parasites/lice/head/epi.html>. Accessed August 3, 2016. 3. Centers for Disease Control and Prevention. Treatment frequently asked questions. http://www.cdc.gov/parasites/lice/head/gen_info/faqs_treat.html. Accessed August 3, 2016. 4. Gellatly KJ, Krim S, Palenchar DJ, et al. Expansion of the knockdown resistance frequency map for human head lice (phthiraptera: pediculidae) in the United States using quantitative sequencing [published online March 31, 2016]. *J Med Entomol*. 5. Centers for Disease Control and Prevention. Treatment. <http://www.cdc.gov/parasites/lice/head/treatment.html>. Accessed August 3, 2016.

Frequently Asked Questions About Head Lice



As a school nurse, you're likely to get a lot of questions from families facing a head lice infestation. Here are some questions and concerns that may come up, and information to help you respond to parents, teachers, and administrators.

Q

What are head lice?

A

Head lice are tiny, wingless insects that live close to the human scalp. They feed only on human blood. Head lice cannot jump or fly, and they do not spread disease.¹ Adult lice are about the size of a sesame seed and are tan to grayish-white in color.¹

Q

What are nits?

A

Nits are head lice eggs. The definition of "nit" covers both the eggs that female lice lay on hair shafts, and the shell that's left behind once the eggs hatch in 8 or 9 days.¹

Q

What do head lice look like?

A

When nits first appear, they may be mistaken for dandruff because of their size and color. They may be visible to the naked eye at the back of your child's neck and/or behind the ears. Nits attach firmly to the hair follicles, so they are difficult to remove, unlike dandruff. Once the louse hatches, it is called a nymph. Nymphs are also small, and grow to adult size in 1 to 2 weeks. An adult louse can live as long as 30 days on its human host, but only about 2 days if it is removed from a person.¹

Q

Who is at risk for head lice?

A

Anyone can get head lice. Head lice are a common condition in school-age children—nearly 6 to 12 million get them every year. Personal hygiene and cleanliness of home, clothes, or hair, or where you live or play, have nothing to do with getting head lice.¹

Q

How do I know my child has head lice, and not something else?

A

The most common head lice symptom is an itchy scalp, but that's only if the person is allergic to head lice saliva. Some people feel a tickling sensation, as if something is moving in their hair. Others may have trouble sleeping, as lice are most active in the dark. Head lice are often mistaken as dandruff. An easy way to tell the difference is that dandruff can easily be removed from the hair shaft with your fingers, while nits will stay put.¹ If you suspect your child has head lice, the best way to make sure is to get a diagnosis from your family doctor. Your doctor can recommend effective treatment options for you.

Q

I've heard home remedies can kill lice. Can't I use mayonnaise or a homeopathic shampoo?

A

There is no clear scientific evidence to show that home remedies are effective. The last thing you want to do is to let head lice linger, as they are so easy to pass from person to person. It is best to consult your doctor right away to get appropriate care.¹ There are a number of available treatments that are safe and do not require nit combing, although you can remove nits for aesthetic reasons if you'd like.

Q

Can I use an over-the-counter medication to treat head lice?

A

While over-the-counter medications have been used for years, there have been recent reports that head lice may be resistant to them. A 2016 study showed that 48 states have head lice that may not respond to commonly used over-the-counter treatments.² Treatment failure may also be caused by incorrect use of the product, misdiagnosis of the original condition, or re-infestation.³ That is why it is important to talk with your family doctor right away to get a diagnosis and an appropriate treatment recommendation.

Q

Does my whole family need to be treated for head lice?

A

Head lice are easily transferred from person to person. All household members and other close contacts (including friends or relatives who have recently been to your home) should be checked for head lice. Anyone with signs of an active infestation should also be treated right away.⁴

References

1. Centers for Disease Control and Prevention. Frequently asked questions (FAQs). http://cdc.gov/parasites/lice/head/gen_info/faqs.html. Accessed May 31, 2016.
2. Gellatly KJ, Krim S, Palenchar DJ, et al. Expansion of the knockdown resistance frequency map for human head lice (phthiraptera: pediculidae) in the United States using quantitative sequencing. *J Med Entomol*. 2016;1-7.
3. Burkhart CG. Relationship of treatment-resistant head lice to the safety and efficacy of pediculicides. *Mayo Clin Proc*. 2004;79(5):661-666.
4. Centers for Disease Control and Prevention. Treatment. <http://www.cdc.gov/parasites/lice/head/treatment.html>. Accessed October 26, 2016.

Head Lice

Head Lice (Pediculosis Capitis) do not transmit disease, but cause concern, anxiety, and unnecessary absences for students. Clover Garden School follows these head lice procedures to protect students and staff from head lice infestations.

1. If a teacher/school personnel suspects a student of having lice or nits, the school nurse or trained school personnel will inspect the student's hair.
2. If lice or nits are detected, the parent/guardian/emergency contact will be notified by phone and asked to pick up the child.
3. Written instructions will be given to parent/guardian regarding treatment of lice infestation. *The school nurse will be available, as needed, to educate parent/guardian on head lice treatment and management.
4. When student is sent home for lice, parent must accompany child upon return to school. The student must be re-checked by the school nurse or trained school personnel. School nurse or trained school personnel may continue to monitor presence of nits, as needed.
5. If a student is dismissed due to lice, it is expected that the student return to school the following school day. The absence will be coded "excused" for no more than three consecutive calendar days per incidence. The absences will be coded "unexcused" beginning the fourth consecutive calendar day and the school social worker will be notified.
6. Individuals with repeated infestations will be referred to the school nurse and/or school social worker, who will determine appropriate interventions.
7. School administration may designate staff to screen for lice. The school nurse is available to train and educate school personnel.
8. The school nurse will educate staff regarding prevention and management of lice transmission in the school environment.
9. Management of classroom environment suggestions: Classroom carpet in recent identified classrooms will be vacuumed the day of lice or nits. Keep outer garments separate when possible (i.e. in cubby, in separate plastic bags, in book bags, etc.). Non-washable items may be stored in tightly sealed plastic bags for 10-14 days.