

MIDDLEBOROUGH PUBLIC SCHOOLS

HEALTH SERVICES

PEDICULOSIS CONTROL INFORMATION

Pediculosis (head lice) is tiny insects that live only on people's scalps and hair. Head lice hatch from small eggs, called nits, that are firmly attached to individual hairs near the scalp and cannot be easily moved up or down the hair (as could specks of dandruff). Nits may be found throughout the hair but are most often located at the back of the scalp, behind the ears, and at the top of the head. Eggs hatch in about 10 days, with new lice reaching adulthood in about 2 weeks. The female louse, about the size of a sesame seed, typically lives for 20 to 30 days and lays about six eggs a day. Lice live by biting and sucking blood from the scalp. Lice can survive up to 8 hours between feeding and can survive off the body, although generally not for more than 48 hours.

The major symptom of head lice is itching caused by the bite of the louse. Persistent scratching of the head and back of the neck should be cause for concern. Red bite marks and scratch marks may be observed on the scalp and neck, and a secondary bacterial infection can occur, causing oozing or crusting. Swollen neck glands may also develop.

Transmission: Head lice should **not** be considered a sign of unclean individuals or homes. They may affect individuals of any age or sex. Anyone who has close contact with an infested individual or shares personal items can become infested. Lice are spread **only** when they crawl from person to person directly or crawl onto shared personal items, such as combs, brushes, head coverings, clothing, bedding, or towels. An infested individual can transmit head lice or others continuously until undergoing treatment to kill the insects and eggs.

Diagnosis: Diagnosis is usually made by detecting nits (tiny, pearl-gray, oval-shaped specks) attached to the hair near the scalp. Use a magnifying glass and natural light when searching for them on the hair at the back of the neck, behind the ears, and at the top of the head.

Treatment: Treatment consists of getting rid of the lice from infested individuals, their surroundings, and their personal items. All household members and individuals with close physical contact should examine for lice and treated with one of the recommended shampoos or hair rinses.

Pyrethrin products, which are now sold over-the-counter, are often recommended if infested. Some health care providers may routinely recommend simultaneous treatment of the members of a household.

For individuals suspected of having head lice:

1. Treatment includes shampooing or rinsing the hair with medicine.
2. After appropriate treatment, removal of the nits should take place. This can be a difficult and time-consuming process because nits typically have a firm grip on the hair. A solution of vinegar and water may help loosen nits so they can be removed more easily with a special, fine-toothed, nit-removal comb. Metal tooth combs seem to work better than plastic.
3. Check for nits daily for the next 10 days. If new nits or newly hatched lice appear, treatment may need to be repeated.

Treatment is typically repeated in 10 days to kill newly hatched lice even when an ovicidal preparation is used.

To treat personal items and surroundings in the school environment:

- Machine-wash all washable and possibly infested items in hot water. Dry them in a hot dryer.
- Put non-washable items (furry toys, pillows) in a hot dryer for 20 minutes or dry-clean them.
- Place items that cannot be washed or dried in a tightly sealed plastic bag for 10 days (the life cycle of the louse).
- Soak combs and brushes for 10 minutes, or wash them, with a shampoo approved to kill lice.
- Thoroughly vacuum rugs, upholstered furniture, and mattresses, and car upholstery.
- **Do not use insecticide sprays in an attempt to stop the spread because they can be harmful to people and animals.**

School attendance guidelines: Individuals found to have an active case of head lice should be treated immediately. Notify parents

that the student may not return to school until treated.

Removal of nits is difficult and the majority of nits will be killed by the appropriate treatment. Parents should accompany their child upon return and the school nurse will check the child before they can return to class. The school nurse will educate the student and family regarding the importance of nit removal after treatment. Children should be checked daily at home for new nits for 10 to 14 days after treatment.

Stop spread guidelines

- Teach parents to recognize nits and to check family's hair periodically. Because outbreaks of head lice occur periodically in almost all schools and because parental concern may exceed the threat of head lice on health, this is a prime area for preventive education and information. A well- organized and prompt response to the first few cases can prevent a widespread problem and avoid the spread of misinformation.
- If a case is identified, follow recommended treatment procedures closely. If a parent finds nits, it should be reported to the school nurse.

Exclusion:

1. The school nurse has the responsibility to inform the parent/guardian and provide the instruction and information letter to the parent.
2. The infected student is excluded from school until:
 - a. Appropriate treatment has been instituted.
 - b. Hair is free of live lice.
 - c. Student has been checked by the school nurse.

The school nurse will continue to collaborate with the parent/guardian to prevent reinfestation.

