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Frequently Asked Questions about Head Lice

What are head lice?

Head lice are small, parasitic insects that are brown or gray in color. They have six legs and they crawl. They do not hop, fly or jump. They live on the scalp and neck of human hosts where they feed on human blood.¹

How do people get head lice?

Direct head-to-head contact with an individual who has head lice is the most likely mode of transmission.² Examples of situations where head-to-head contact is likely include, but are not limited to: sharing a pillow with an infested person, sleeping next to an infested person or wrestling with an infested person. Indirect transfer of lice is less common; it may occur, rarely, from contact with brushes, combs or hats from an infested person.³

What are the symptoms of head lice?

Itching is the cardinal symptom of an infestation. Scratching at the area where the lice feed should lead to an examination of the head for head lice. The most common area of the head to itch is the back of the head and around the ears. It may take 2-3 weeks for itching to begin once an individual is infested.⁴

How is head lice treated?

Treatment can be managed by mechanical removal (combing), treatment with a pediculicidal product (over-the-counter or prescription strength) or by a combination of both. Mechanical removal requires patience and a significant commitment of time. Treatment with an OTC or prescription product requires that the label directions be followed precisely. These products should never be used unless the presence of a live, crawling louse is confirmed.⁵

¹ (Frankowski, 2010)

² (Frankowski, 2010)

³ (Pollack, Kiszewski, & and Speilman, 2000)

⁴ (Frankowski, 2010)

⁵ (Mumcuoglu, Head Louse Infections: The "No-Nit" Policy and Its Consequences, 2006)

How can I prevent my child from getting head lice?

*Head-to-head contact with others and the sharing of bedding and other personal items can be discouraged. However, due to normal developmental behaviors, especially in young children, head-to-head contact cannot always be avoided. In all cases, the focus on education should be on detection and proper methods of treatment.*⁶

*To prevent re-infection following treatment, bedding should be laundered in hot water and dried in a hot drying cycle. Combs and brushes can be boiled or replaced. Furniture and rugs should be vacuumed. Items that cannot be laundered can be placed in a hot dryer or they can be removed to another area (or sealed in a plastic bag) for several days. Note that lice cannot survive away from the human host for more than 24-48 hours.*⁷

Did my child get head lice at school?

Research suggests that schools are rarely the source of lice transmission. This is due to the fact that head-to-head contact is not common in schools. The exception to this might be in the youngest student populations (pre-K and kindergarten, for example), where developmentally appropriate behaviors may result in head-to-head contact.

*It is statistically much more probable that head lice transmission has occurred outside of school.*⁸

What should I do if I think I have found head lice on my child's head?

If you believe you have found head lice or the eggs they lay on your child's head, you may contact your pediatrician and/or your school nurse for guidance and support. Your school nurse will assist you in identifying lice and nits and she will assist you in checking and rechecking your child's head as you proceed through the process of removing the lice and eggs from your child's head.

The American Academy of Pediatrics concludes that the focus of controlling lice infestations should be on lessening the risks of head to head contact and reducing the number of lice on the head.⁹ Since classroom transmission is rare, having parents communicate directly with close personal contacts and family members is recommended.¹⁰

⁶ (Frankowski, 2010)

⁷ (Frankowski, 2010)

⁸ (Aston, 2002)

⁹ (Frankowski, 2010)

¹⁰ (Aston, 2002)

If my child has head lice, how soon can they return to school?

As soon as treatment has been initiated, your child may return to school. Your school nurse will request that you provide information regarding the type of treatment you have chosen so you may be better assisted with follow up care.

Why would a child repeatedly have head lice?

A child with "repeated" head lice infestations, if treated with a pesticide product may not have been treated according to product specifications. Or, resistance to over the counter treatments is possible. In some cases, viable nits may not have been thoroughly removed with combing, leaving the eggs to hatch. Then again, due to the fact that lice infestations are not easily identified, they may have been misdiagnosed at the outset. ¹¹If you believe that your child has a case of head lice that is not responsive to conventional treatments, speak to your child's primary care physician for guidance.

If my child has head lice, should everyone in my family be treated?

Household members should be checked, but only the person with evidence of a live, crawling head louse should be treated. Chemical lice shampoos contain insecticides which can be dangerous if used incorrectly and ineffective if used too frequently. Your house and/or clothing and bedding should not be sprayed with insecticide.¹²

¹¹ (Pollack, Kiszewski, & and Speilman, 2000)

¹² (Aston, 2002)

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