Head Lice

What teachers need to know

What are head lice?

Head lice, or *Pediculus capitis*, are parasitic insects that feed on human blood and can be found on the head, eyelashes, or eyebrows of people. Infestation is common among children between 3 and 12 years of age. While they can be an annoyance, head lice are not known to transmit disease. Head lice exist in three stages, the nit (egg), nymph (immature louse), and adult. They move by crawling and cannot hop or fly.

Symptoms of Lice

A head lice infestation causes intense itching of the head, neck, and ear areas. It may feel like a tickling sensation of the hair moving. Itching may be more prevalent at night as head lice are most active in the dark. Although lice are not known to spread disease, intense scratching may allow bacteria, naturally found on the skin, to enter the body and cause infection.

How head lice spread

Lice spread rapidly through direct contact, particularly head to head contact from playing with other children or during sports activities. Less frequently, lice may spread through sharing hairbrushes, hats, or towels. Coatrooms with an infested jacket, scarf, or cap have been known to spread lice as well.

Head lice are not affected by personal hygiene and can infest anyone regardless of hair length or cleanliness. Pets do not transmit head lice.

Treatment

Over-the-counter or prescription medications may be used to treat head lice. The CDC recommends treating infected persons with FDA-approved products twice, with the second treatment 7-10 days after the first, in order to kill any remaining nits. The infested person should put on clean clothes after treatment.

Clothing and bedding should be washed in hot water for at least 20 minutes and dried on the hot cycle. Lice and nits cannot survive in temperatures above 125 degrees for more than 10 minutes. Non-washable items can be sealed in a plastic bag for at least 10 days.

Hairbrushes and combs can be soaked for 10 minutes in a pan of water heated to about 150 degrees or for one hour in a phenol solution (i.e. Lysol).

Vacuum furniture, floors, cars, and bus seats thoroughly after exposure.

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Prevention Tips

Avoid head to head contact

Discourage head-to-head contact during play, school, and sports activities

Do not

Do not let children share share brushes, hats, scarves, combs or coats, hair bows, or clothing other items.

Wash clothing and bedding on the hot cycle Frequently wash clothing and bedding using the hot cycle and high heat drying.

Vacuum thoroughly Vacuum classroom floors and seats thoroughly after exposure.

Absenteeism

Children should be treated with FDAapproved products the day of diagnosis. Children can return to school and should be discouraged from making head to head contact.