What are head lice?

The head louse, *Pediculus humanus capitis* is a form of parasitic insect commonly found on the head, eyelashes, and eyebrows of people. Head-lice live on blood which they draw several times a day from the human scalp.

What are the symptoms?

Symptoms of head lice include: itching of the skin or scalp produced by a sensitive reaction to head louse bites, sensation of movement or feeling of something moving in the hair, irritability and inability to sleep related to head-lice being most active in the dark, and sores on the head related to scratching which may become infected by bacteria found on the individual's skin. Head lice do not spread disease, but secondary infection may occur related to scratching and irritation of the scalp.

What is the life cycle of the head louse?

Lice live near human scalp, and crawl to deposit tiny gray or white eggs (nits) on a hair shaft about 3-4 mm from the scalp. Head lice nits generally take approximately 8−9 days to hatch. The adult lice cannot survive more than 48 hours off the human scalp, and the nits cannot hatch if beyond ¼ inch from the base of the hair shaft.

How is head louse spread?

Common transmission of head-lice includes direct head-to-head contact with an already infested individual's hair, especially during play at school, at home, and during extracurricular or social activities. Less common transmission of head-lice includes: sharing clothing, such as hats, scarves, coats, and/or sports uniforms, articles such as combs, brushes, hair ribbons, barrettes, towels, and stuffed animals that are worn or used recently by an affected individual. Transmission may occur via furniture or house decor that has been used recently by an infected individual.

Who is at risk for head louse infestation?

Individuals at high risk for obtaining head lice include: pre-school children attending childcare, elementary school children, and the household members of infested children. Head lice infestation is a common occurrence in every socioeconomic group, and it is not tied to poor hygiene.

What preventive measures and treatments are available?

Head lice can be prevented by avoiding head-to-head contact with other children, and by avoiding sharing clothing. Close contacts, including household members should be examined and treated if infestation is identified; nit and lice may be mechanically removed from wet hair using fine-tooth comb (nit comb).

Medication (pediculicides) that kills lice and nits (ovicidal) can be used to treat individuals that have head lice infestations, as recommended by their health care professional. Environmental treatment should include machine washing or dry cleaning bedding and other articles that came into contact with an affected individual. The dryer should reach a temperature above 128.3 °F (53.5 °C) for at least 5 minutes to most effectively kill nits. Carpets and furniture that cannot be stored in a plastic bag should be vacuumed and cleaned.

What should schools do?

- Notify exposed staff and family members to monitor for symptoms,
- Monitor symptoms (head scratching), in children and assess them for head lice.
- Refer parents and guardians to their health care providers for head-lice treatment recommendations,
- Educate teachers, caregivers, and parents regarding recognition of lice and nits.

What are recommendations for exclusion?

If you detect live lice, exclude the individual at the end of the school day or program. However, the individual should avoid head-to-head contact with other children or sharing of clothing. Readmit the individual to school after receiving recommended treatment by the health professional. Nits-free is not recommended since its' effectiveness is yet to be proven in controlling head-lice outbreaks (AAP, 2013)

For more information, visit Head Lice | CDC or Head Lice - Symptoms and Causes | Mayo Clinic.