

Lice

Head lice (*Pediculus Capitis*) are insects that create problems and many concerns for families, such as the costs of lice killings (pediculicide) products, time lost from work or school and embarrassment/anxiety. Since children between the ages of 3-11 contract head lice more than adults, schools face problems with head lice because of the large amount of absenteeism that occurs when children are excluded for having head lice, fear by teachers that they may “get lice” and anger of parents (Dillenburg, 1999). Head lice affect approximately 6-12 million people each year in the United States. Head lice are equal opportunity insects; they can infect anyone. They do not choose to infest a person’s head because of a certain race, sex or social status.

Our goal in the Hempfield School District is to make the school experience as healthy as possible for your child. The school setting places children in close proximity to one another. This “proximity” exposes your child to head lice or pediculosis.

The head louse lays its eggs on the hair shaft near the scalp. A live louse and its eggs are most often found behind a child’s ears, in bangs and at the base of the neck. They look like a fleck of dandruff, but they do not come off the hair shaft unless you scrape them off with your fingernail. To help you deal with this common problem, the following preventative measures are suggested.

1. Be mindful of early warning signs such as head scratching or the appearance of white specks that remain in the hair.
2. Check your child’s head at least once a week throughout the school year.
3. Inspect your child’s head especially before and after a group activity such as a slumber party or camping activities.
4. Wash hats, scarves, hair ribbons, combs, brushes, and other hair accessories at least once a week.
5. Remind your children not to share their hats, combs, brushes, barrettes, etc.
6. Outer clothing that comes in contact with the head or neck should be washed frequently.
7. Be sure to wash you child’s hair frequently.
8. Notify neighbors, friends, or playmates who have been in contact with your child that your child had head lice and is being treated.

In spite of all these precautions, your child may still get head lice. Head lice do not discriminate between “dirty” hair and “clean” hair. All children may contract head lice if appropriate conditions occur.

If you have any questions about head lice, or if you find head lice in your child’s hair, please contact the school nurse or building principal immediately.

Related links: Photographs of Lice and Nits

<http://www.hsph.harvard.edu/headlice/images/lice.jpg>

Frequently Asked Questions and Myths

Where do head lice come from?

Head lice have been around for thousands of years. They have been found on mummies in Egypt and Peru. Most recently, a louse egg was found on human hair from a site in northeastern Brazil that dates back 10,000 years (Netting, 2000). Lice live off of humans and are transmitted from person-to-person through direct contact.

Do head lice jump, hop or fly?

No. Head lice are wingless and do not have hind legs. They cannot jump, hop or fly. However, with their six legs, each with a claw, they can cling well to hair and crawl very fast.

Can I get head lice from an animal?

No. Head lice can live only on humans.

Do African Americans get head lice?

Yes. However, because of the oval shaped hair strand, the head lice cannot grip African American's hair as well. Caucasians get head lice 99% more often than African Americans (Dillenburg, 1999).

How can I tell if a nit is dead or alive?

Do not spend time trying to decide if a nit is dead or alive. Treat all nits as if they are alive and remove all of them.

How long can head lice survive off of a human?

Head lice must have a blood meal within a 24-hour period and a surrounding temperature in the high 80's to survive. They cannot live off of a human because they will starve to death.

Can a person get head lice from a swimming pool?

Head lice firmly hold on to hair with their six claws. The pool water will not easily wash the head lice off of the hair. Head lice are able to "hold their breath" for approximately 30 minutes. However, sharing a beach towel at the pool with someone that has head lice is one way to get head lice.

Should sprays be used in the house or school to kill head lice?

No. Sprays can be toxic. They are not safe for humans or the environment. Sprays can also be a trigger for children with breathing conditions such as asthma. Vacuuming is the best way to rid furniture and carpeting of head lice.

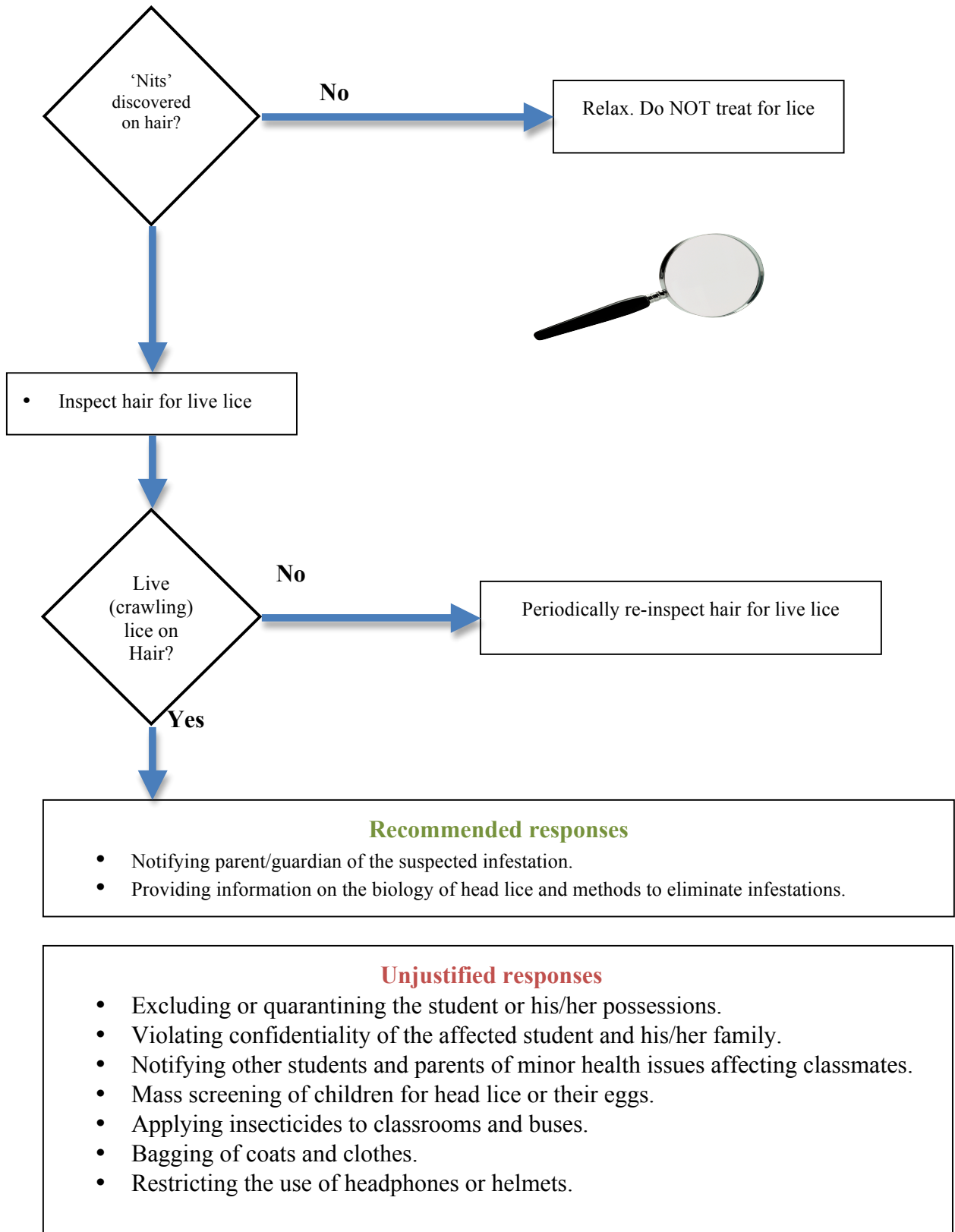
Do head lice spread disease?

No. Head lice do not carry diseases. They are just pests that can cause stress because they can be difficult to get rid of in a home.

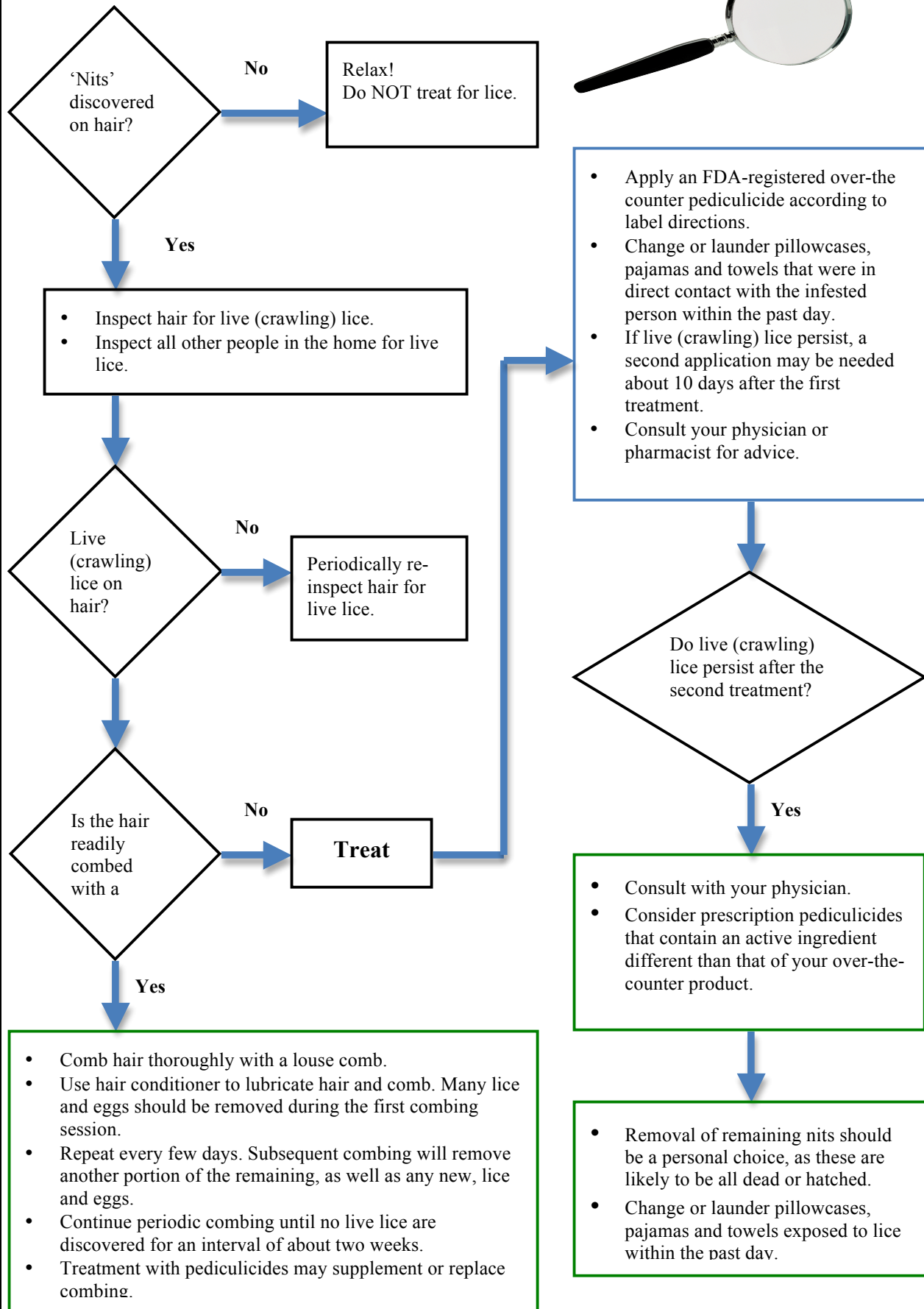
Can you get head lice from sharing helmets or headsets?

Possibly. It is best if each child has their own helmet or headset and does not share with others. If a helmet or headset has been shared with a person who has head lice wash it after use with hot soapy water or store it in a plastic bag for 14 days.

Managing presumed head louse infestations in schools



Managing presumed head louse infestations at home



Hempfield School District

Pediculosis (Lice) Guidelines

A Move to Evidenced-Based Practice

Presented to nursing staff as part of their ongoing professional development series on school-based best practices in health.

Susan Horan, RN, CSN

Why are the Pediculosis Guidelines being updated?

- **Many lice protocols that exist in U.S. schools today were established years ago.**
 - **These protocols, or practice procedures, were based on tradition and misinformation rather than scientific evidence.**
 - **The data suggests that health policy developers consider re-evaluating the usefulness of a “no-nit” policy that excludes children from school just because nits alone are found in the hair.**
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What should be taken into consideration when nursing procedures are being updated?

- Best Practice Guidelines
 - Evidence-Based Practice
 - Credible Research
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Best Practice Guidelines

- **Systematically developed statements about appropriate health care based on nationally normed procedures.**
 - **Provide a way for nurses to utilize the most current, reliable information about how to handle a specific problem, condition, or illness.**
 - **Are based on the best possible and highest quality evidence.**
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Evidence-Based Practice

- **Current research and knowledge from biological, statistical, clinical, and population health sciences are used to substantiate specific nursing practices worldwide.**
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Sources for Evidence-Based Practice for Head Lice

- **American Academy of Pediatrics**
 - **National Association of School Nurses**
 - **Center for Disease Control**
 - **Harvard School of Public Health**
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What Were the Recommendations of Our Resources?

- **Screening – does screening have a significant effect on the incidence of head lice?**
 - **Exclusions – research shows that a child with an active head lice infestation likely has had the infestation for 1 month or more by the time it is discovered, therefore is exclusion appropriate?**
 - **Treatment – what are the efficacy studies of current treatment options?**
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Is screening cost effective and appropriate?

- School based screening is not supported by the literature. (*American Academy of Pediatrics, 2009; CDC, 2007; Pollack 2009*)
 - Dr. Pollack supports caregiver screening in the home environment as opposed to the school setting.
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Screening continued

- “Screening for nits alone is not an accurate way of predicting which children are or will become infested.”
 - Lice are not highly transferable in the school setting and no outbreak of lice resulted when allowing children with nits to remain in class.
 - “Screening for live lice has not been proven to have a significant effect on the incidence of head lice in a school community over time.” *Pediatrics* 7/26/10
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Is exclusion appropriate?

- Exclusion of children from school with nits or live lice has not been supported by current literature.
 - No healthy child should be excluded from or allowed to miss school because of head lice.
 - “No-nit policies for return to school should be abandoned.” *Pediatrics* 7/26/10
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Exclusion continued

- **“Students infested with head lice are excluded unnecessarily from school and miss valuable academic time.”** *Sciscione and Krause-Parello, 2007*
 - **“No-Nit policies that require a student to be free of nits before returning to school are not recommended.”**
CDC 5/26/07
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Exclusion continued

- “It is the position of the National Association of School Nurses that the management of pediculosis should not disrupt the education process.” www.nasn.org
 - “The discovery of lice or their eggs on the hair should not cause the child to be sent home or isolated.” Pollack, 2007
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Treatment

- **The use of home remedies has not been supported by literature.**
 - **Parent/Guardians need a simple process to follow for the treatment of active head lice infestations.**
 - **Decision making algorithms have been developed by Dr. Richard Pollack (Harvard School of Public Health) and are included in our Guidelines.**
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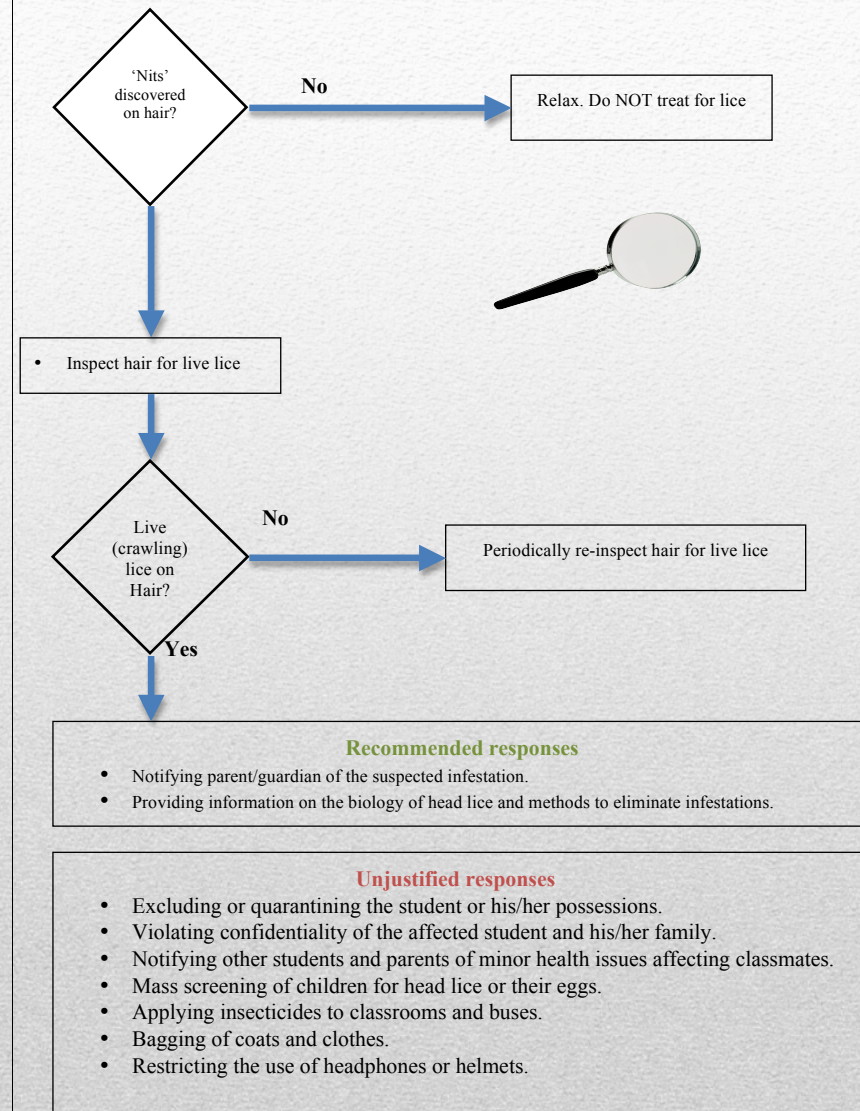
What was eliminated from our previous Guidelines?

- **Elimination of classroom head lice screening programs due to the lack of evidence of efficacy for this procedure**
 - **Elimination of no-nit exclusion policies – not evidenced based nor an effective means to control head lice infestations**
 - **Bagging of clothes**
 - **Restricted use of headphones or athletic gear such as helmets (prescribed cleaning protocols were put in place)**
 - **Notification of classmates' parents (to preserve anonymity and personal dignity)**
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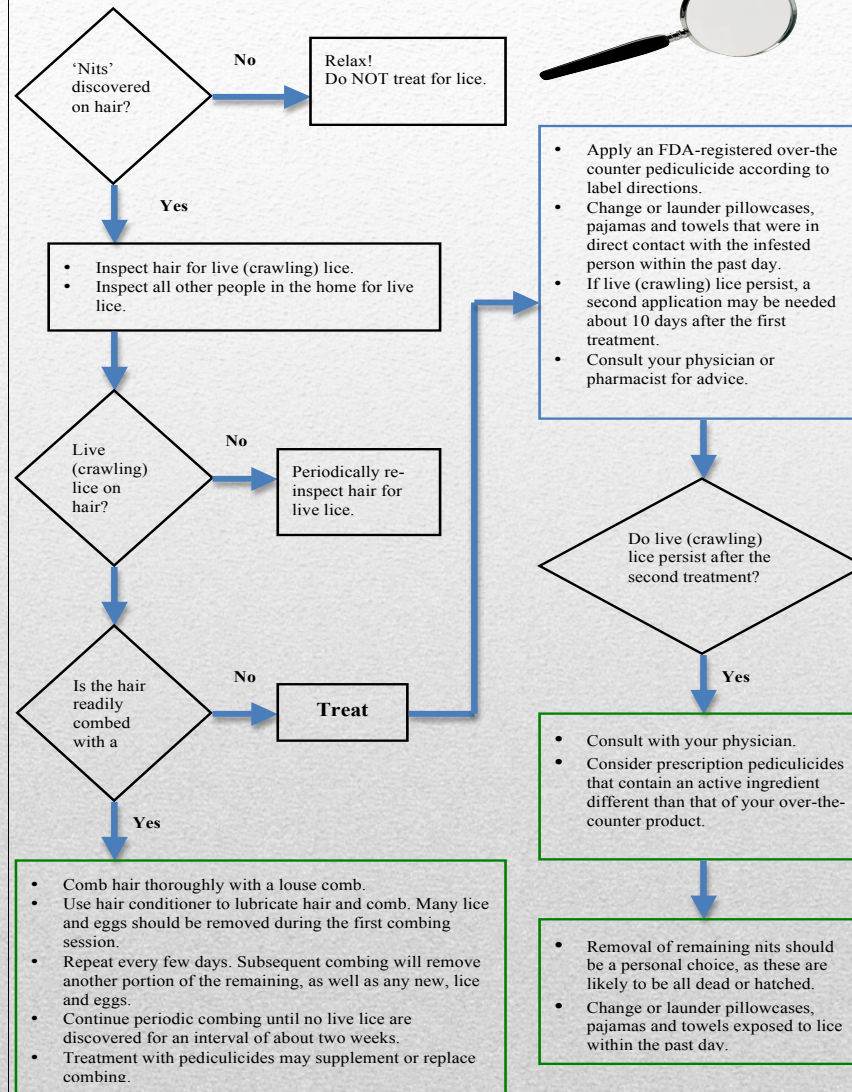
What is included in our new Guidelines?

- **Guidelines for School Nurse include:**
 - **Education of staff and parents**
 - **Adaption of algorithms for treatment in presumed cases**
 - **Referral process**
 - **Preventative measures**
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Managing presumed head louse infestations in schools



Managing presumed head louse infestations at home



In Conclusion

- **Aside from an itchy scalp caused by a reaction to their saliva, head lice cause no physical distress and transmit no diseases.**
 - **Lice are considered a nuisance, not a public health threat.**
 - **Our guidelines are based on the most current research and evidence concerning the transmission of lice.**
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References

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- **NASN Position Statement - Pediculosis**
 - **NASN (2010). Scratch (School and Community Resources to Avoid and Take Control of Head Lice).**
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