

**Head Lice**

(Pediculosis Capitis)

**What are head lice?**

Head lice are small insects (less than 1/8-inch long). They range in color from red to brown, black, yellow-tan or gray-white. Head lice live on blood they draw from the scalp and lay tiny, gray/white eggs (known as nits) on a hair shaft near the scalp. The warmth from the scalp is needed for the eggs to hatch. Head lice are not known to spread disease.

**Who is at risk for head lice?**

Head lice infestations occur in all socioeconomic groups, are not an indication of poor hygiene, and can affect anyone.

**What are the symptoms of head lice?**

Most people who have head lice do not have symptoms at all. When symptoms do occur, the most common signs include itching of the skin on the scalp or neck where lice feed. Nits are glued to hair, commonly behind ears and at or near the nape of the neck. Scratching, especially behind and around ears and at the nape of the neck, may lead to open sores and a bacterial infection that also may cause swollen lymph nodes.

**How soon do symptoms appear?**

Symptoms appear when a live louse is present.

**How are head lice spread?**

Head lice are spread most commonly by direct contact with hair. Additionally, infested people can also spread head lice by sharing combs, brushes, hats, blankets or sheets with others, but this is not very common. It can be spread only by live lice and not nits.

**When and for how long is a person able to spread head lice?**

Head lice will spread until they are treated with a chemical that kills lice and until the eggs have been killed or removed. Research has shown that removal of nits may not be necessary.

**How is a person diagnosed?**

Diagnosing head lice is done by identifying the presence of live lice or nits within ¼-inch of the scalp. Identification of eggs and lice with the naked eye is possible; however, the use of a hand lens or microscope may help to confirm the identification.



## **What is the treatment?**

Over-the-counter treatments and prescriptions that kill lice and most viable eggs are available. Follow the directions on the label. Retreat nine days after initial treatment if not otherwise specified on the product label. Contact your health-care provider or local public health unit for more information.

## **Does past infection make a person immune?**

No. A person who previously had head lice may get it again.

## **Should children or others be excluded from child care, school, work or other activities if they have head lice?**

No. Young children with head lice do not need to be excluded from child care and school, but they should be treated as soon possible after diagnosis. However, try to minimize any activity that involves the child in head-to-head contact with other children or sharing of any headgear until after the child has been completely treated.

Additionally, older children and adults do not have to be excluded from child care, school, work or other activities, but should be treated as soon as possible after diagnosis. Just like younger children, older children and adults should minimize any activity that involves head-to-head contact with other people or sharing of any headgear until after treatment has been completed.

## **What can be done to prevent the spread of head lice?**

Follow these steps to prevent the spread of head lice:

- Avoid sharing headgear, coats, hats, hair ornaments, helmets, headphones, combs, brushes, towels, and bedding.
- Combs and brushes should be washed in hot water (130°F) for 10 minutes.
- Items that cannot be washed should be bagged and stored for two weeks.
- Provide separate storage areas for clothing so that the personal articles of one person do not touch the personal articles of another.
- When an infestation is found, check the hair and scalp of all household members and treat only those who have lice and those who share the same bed with the infested person

## **Additional Information**

For additional information about head lice, head lice removal, school exclusions, etc., contact the North Dakota Department of Health, Division of Family Health, at 800.472.2286.

### **Resources:**

American Academy of Pediatrics. [Pediculosis capitis]. In: Pickering LK, ed. *Red Book: 2009 Report of the Committee on Infectious Diseases*. 28<sup>th</sup> ed. Elk Grove Village, IL: American Academy of Pediatrics; 2009: [495-497]

North Dakota Department of Health. (2012). *Head Lice: A Lousy Problem*. Division of Family Health. pp.1-30.