

HEAD LICE

WHAT ARE HEAD LICE?

- **Head lice** are **tiny insects** that live in hair, where they breed and feed on blood from the scalp. They are about the size of a sesame seed, have six legs, and range from tan to greyish-white in colour. They live up to 30 days and cannot survive for more than two days away from the human scalp.
- **Nits** are the **eggs** of the head lice. They look like small whitish specks about the size of a pinhead and are glued to the hair shaft. Nits are first laid very close to the scalp, and then grow out with the hair. Nits hatch within seven to 10 days and mature into adult lice in about seven days.
- **Head lice** crawl; they cannot fly or jump and they do not live on animals. They hang on to the hair with hook-like claws at the end of each leg.
- **Nits** are usually found on the hair shaft at the nape of the neck, under the fringe and behind the ears.

HOW ARE THEY SPREAD?

- Lice are spread by head-to-head contact, or sometimes from sharing hats, headgear, combs or brushes with an infested person.

WHAT ARE THE SYMPTOMS?

Symptoms may be absent, or may include:

- A tickling feeling in the hair
- Itchy scalp from lice bites
- Sores can develop from scratching and these can sometimes become infected
- Fine black powder (lice faeces) or pale grey lice skins may be seen on the pillow.

TO CHECK FOR HEAD LICE AND NITS:

- Look closely through the hair and scalp for nits and lice with a bright light, magnifying glass and fine-tooth comb.
- Nits are usually noticed first and are easier to see. They are glued to the hair shaft, behind the ears and at the back of the neck. Unlike dandruff they cannot be brushed off.

IF YOU FIND HEAD LICE:

Check the rest of the household for head lice, and **only treat if they are detected**.

- *Treat everyone* found to be infested *on the same day*.
- *Treat again* in seven days.
- Tell any possible close contacts, such as friends and work mates.
- After the first treatment, the affected person can return to school or work.

HOW DO YOU TREAT HEAD LICE?

- For a baby under 12 months of age, or if you are pregnant, or breast feeding, or have sensitive skin, consult a health professional for advice. Manual removal may be recommended in preference to chemical disinfection.
- Head lice treatments can be purchased from a chemist without a prescription. Follow the instructions.
- Avoid getting the product into eyes; cover eyes with a towel or washer and wear gloves when applying the product. Wash your hands thoroughly after use.

HELPFUL HINTS

- Do not use a conditioner on hair before (or after) applying the treatment.
- Do not blow dry hair after treatment as the heat may inactivate the product.
- Do not re-wash hair for one to two days after treatment.

AFTER TREATMENT

- Check that the product worked. Comb hair with a fine-tooth comb, wipe contents onto a tissue or cloth, and look for any movement. If lice are still active, the head lice could be resistant to the insecticide. Wash hair and treat again using a product with a **different insecticide** base (ask your pharmacist).
- If the other preparation fails, daily inspection and removal of eggs and lice with a fine-tooth comb or fingernails is the only option left. This procedure is tedious but, if followed strictly, will eventually clear the hair of lice. A magnifying glass may help you to see the eggs and lice more easily.
- Check combs, brushes, headgear and bedding for lice. Combs and brushes may be soaked in hot water (>50°C) and detergent for 10 minutes. Bed linen, clothes, and towels can be washed in the hot cycle in the washing machine or in a hot drier. Items that cannot be washed or dry-cleaned (for example, hats) can be placed in a plastic bag for a minimum of four days.
- Nit removal is not necessary.
- To help minimise levels of head lice within the community, it is a good idea to check your child's hair on a weekly basis.

For more information please contact your local public health unit, community health centre, pharmacist or doctor. ☒

This is the first in a series of fact sheets on public health issues that will appear in the *NSW Public Health Bulletin*.