



Head Lice Detection, treatment and prevention

Head Lice Detection, treatment and prevention (Language)

Head lice

Head lice are tiny insects that live on the scalp and neck of humans. They are grey or brown in colour, have six legs which have hook-like claws to hold onto the hair with. When fully grown, they are about 2 mm long and have no wings. Head lice cannot jump, hop or swim. There can be up to 12 adult head lice on an infested scalp at any one time.

Head lice cause no illness but being infected can cause itching and can be embarrassing. Sometimes sores can develop due to scratching.

Life cycle of Head lice

Adult head lice feed on blood and can live up to 30 days. The female can lay up to six eggs a day, attaching them to the hair near the scalp. The eggs hatch 7-10 days later. The unhatched eggs, called nits, are yellow-white in colour and are often mistaken for flakes of dry skin or dandruff. However, the nits stick to the hair and are difficult to remove.

How do you become infected

About 80% of head lice infections are amongst children aged 4-16 years. They are usually caught via prolonged head-to-head contact or very rarely, by sharing hairbrushes, combs or hats. However, head lice cannot survive for long when away from the scalp and those found in clothing are usually dying. Therefore fumigation is not necessary. Head lice can be found in all types and lengths of hair. Many people associate head lice with dirty hair. Head lice are equally happy living in clean hair.

Symptoms

Head lice infection can cause an itchy head or neck, or a rash, which is often worse behind the ears or on the back of the neck. However, a person may have been infected for several months before the itchiness is noticed, and some people may not notice itching at all. It's important to check anyone who has been in contact with someone with confirmed head lice so that all cases can be treated and re-infestation prevented. Other signs of head lice infection are nits stuck to the hairs as they grow out, and louse droppings, which look like a fine black powder and may be seen on pillows or sheets. If nits or droppings are spotted then further investigation is required.

How to detect head lice

Head lice are easier to detect on wet hair.

- Wash the hair with ordinary shampoo. You may find it useful to apply conditioner if the hair is thick
- Comb the hair with a normal comb to get rid of tangles
- When the hair is untangled switch to a plastic lice detection comb
- In sections, comb right from scalp to the tips of the hair. Check the comb for lice after each stroke. A magnifying glass may help. Comb all sections of scalp in all directions
- If you see any lice, clean the comb by wiping it on a tissue or rinse it before using over another area of the scalp. Combing over a white surface such as white paper helps find head lice that are picked out by the comb
- If you use a conditioner remember to rinse it out when you have finished combing. It takes about 15 minutes to do detection combing, depending on how thick the hair is.

Treatments for head lice infection

Head lice should only be treated with insecticides when live, moving lice have been found. Once an infection is confirmed there are a number of treatments available:

- Insecticides
- Thorough and frequent combing (bug-busting)
- Alternative treatments

Insecticides and alternative head lice treatments can contain chemicals that may cause side effects. They should only be used according to their specific instructions. They should only be used on a confirmed head lice infection. When an infection is confirmed, all family members should be checked and anyone who has lice should be treated.

1. Insecticides

Some types are available over the counter, such as Malathion (Quellada) and Phenothrin (Full Marks). Another type, Carbaryl (Carylderm), is only available on prescription. It is often best to get a prescription from the doctor for at least the first treatment.

These insecticides are available in shampoos, mousses, lotions, liquids or cream rinses. Shampoos and mouses are not considered effective. Alcohol-based lotions are most effective, but may not suitable for everyone.

Liquids or cream rinses are water-based and are recommended for young children and for people who get asthma or eczema. Pregnant or breastfeeding women should check with their doctor or health visitor before using insecticides.

The treatment involves rubbing the insecticide lotion onto the scalp and dry hair and leaving it for a minimum of 12 hours before washing out. This will kill the living lice, but may not kill the eggs.

To destroy any lice that have hatched later, the treatment must be repeated a week later.

Insecticides do not always work as head lice can build up a resistance to these treatments. However, the more common reason for treatment failure is the incorrect use of the insecticides. To prevent further resistance it is important to use the insecticides according to the instructions.

2. Combing or “bug-busting”

This is a method of removing lice with the regular use of a plastic lice detection comb. It is effective only if followed meticulously. This treatment method requires four sessions over two weeks. The advantages of this method are that it avoids the use of strong chemicals. Head lice cannot become resistant to combing. It can also be used for routinely checking the hair for infection. However the available research suggests it's not as effective as using insecticides.

3. Alternative treatments

These include treatments containing essential oils (including tea-tree), herbal extracts or homeopathic tinctures. These treatments may not be totally effective, but some people find them helpful. It is worth bearing in mind that even ‘natural’ chemicals can cause side effects, such as irritating the scalp. If you choose an alternative treatment follow it up by wet combing the scalp.

Prevention

The best way to prevent head lice spreading is to check regularly and treat as soon as infestation is confirmed. Contact tracing is essential so that re-infestation can be avoided. This means that schools and nurseries, friends and relatives such as grandparents should be informed and the whole family checked. The use of louse repellents is not recommended.

Whichever treatment is used, a follow up check using a plastic lice detection comb should be carried out a few days afterwards. Finding eggs or a live adult does not mean failure of the method, as there could be a re-infestation or the method needs follow up treatment.

If a treatment does fail, the infestation will have to be treated again, possibly with a different method.

Head lice is a problem for the wider community and not just a school problem. Exclusion of children from schools or nurseries is not advised as this is unlikely to prevent infection.

For further advice speak to your pharmacist, school nurse or health visitor
