

What is Pediculosis?

Pediculosis is an infestation of the body with human lice - adults, nymphs and/or nits (eggs). The crawling stages of lice feed on human blood, causing severe itching.

There are three types of human lice, each of which requires a different environment to survive. Only specific portions of the human body are infested by each type of louse.

- **Head lice** live in the hair of the head and feed on the scalp.
- **Body lice** do live in the seams of infrequently changed and washed clothes. They are on the skin only long enough to feed.
- **Pubic or crab lice** are usually found on the pubic hairs, but can also occur on facial hair (including eye lashes and eye brows), chests, armpits and abdomens.

Who gets pediculosis?

Anyone, regardless of age, race, sex, or standards of personal hygiene, can become infested through contact with an infested person.

How is pediculosis transmitted?

Head lice are most commonly transferred by direct hair-to-hair contact with an infested person. Transmission by contact with personal belongings, such as combs, hair brushes, and hats, is uncommon. *Lice do not jump or fly!*

Body lice are transmitted from person to person on shared clothing and/or bedding.

Pubic lice are most commonly transmitted by direct skin-to-skin contact, usually during sexual contact. Other routes are possible, but less likely.

Head, body, and pubic lice infest only humans; they do not come from other animals and cannot be contracted from dogs, cats, birds, etc. Animal lice can crawl onto humans and feed, but they cannot reproduce and will eventually die.

What are the symptoms of pediculosis?

Head Lice: Itching of the infested area is the most common symptom. Frequent scratching occurs as a result, often breaking the skin and leading to secondary bacterial infections. A tickling sensation in the hair or sensation of something moving, irritability or sleeplessness, and sores on the head caused by scratching are other potential symptoms of head lice. The back of the head and behind the ears are the places most favored by head lice, both for feeding and laying their eggs, however lice and nits can be found anywhere on the head.

Pubic Lice: Genital itching, accompanied by slate-blue marks where the lice have fed, is characteristic of pubic lice.

Body lice: Intense itching and rash caused by an allergic reaction to the louse bites are common symptoms of body lice infestation. When body lice infestation has been present for a long time, heavily bitten areas of the skin can become thickened and discolored, particularly around the midsection of the body (waist, groin, upper thighs).

How soon do symptoms occur?

Itching begins a few days to several weeks after infestation. Head lice infestations can be asymptomatic, particularly with a first infestation or when an infestation is light.

For how long can a person spread pediculosis?

Lice can be spread as long as live lice are present and until all lice and eggs are killed.

What is the treatment for pediculosis?

Treatment for head lice is recommended for persons diagnosed with an active infestation. All household members and other close contacts should be checked; those persons with evidence of an active infestation should be treated. Some experts believe prophylactic treatment is prudent for persons who share the same bed with actively-infested individuals. All infested persons (household members and close contacts) and their bedmates should be treated at the same time.

Retreatment of head lice usually is recommended because no approved pediculicide is completely ovicidal. To be most effective, retreatment should occur after all eggs have hatched but before new eggs are produced. The retreatment schedule can vary depending on whether the pediculicide used is ovicidal (whether it can kill lice eggs).

When treating head lice, supplemental measures can be combined with recommended medicine (pharmacologic treatment); however, such additional (non-pharmacologic) measures generally are not required to eliminate a head lice infestation. For example, hats, scarves, pillow cases, bedding, clothing, and towels worn or used by the infested person in the 2-day period just before treatment is started can be machine washed and dried using the hot water and hot air cycles because lice and eggs are killed by exposure for 5 minutes to temperatures greater than 53.5°C (128.3°F).

It is not necessary or recommended to spray, fumigate, or otherwise chemically treat the home, school or child care center for lice.

What can be done to prevent the spread of pediculosis?

Head Lice: Household and other close contacts should be examined and treated if infested. Bedmates of infested people should be treated prophylactically at the same time as the infested household member and contacts. Prophylactic treatment of other non-infested people is not recommended. Children should not be sent home early from school because of head lice. Parents of infested children (i.e. with at least one crawling head louse) should be notified and informed that their child may return to school after treatment with an effective pediculicide. **This should not result in prolonged absenteeism. Treatment can be accomplished overnight, allowing readmission the following day.** "No-nit" policies requiring that children be free of nits before they return to a child care facility or school have not been effective in controlling head lice transmission and are not recommended.

Body Lice: The most important factor in the control of body lice infestation is the ability to bathe, and change and wash clothing. Close contacts should be examined and treated appropriately; clothing and bedding should be laundered. Care should be taken to avoid extensive contact with infested clothing and bedding in the process of accomplishing this task. Parents of infested children (i.e. with at least one crawling body louse) should be notified and informed that their child may return to school 24 hours after treatment with an effective pediculicide.

For more information, contact your local health department or the Ohio Department of Health (ODH) Outbreak Response and Bioterrorism Investigation Team (ORBIT) at 614-995-5599.