

head lice

Facts

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Facts

- Head lice are six-legged wingless insects that live on the hair close to the scalp.

They are the size of a pin head when they hatch and smaller than a match head when they are fully grown.

Head lice infection is common. Anyone with hair can get them, no matter how clean or how long the hair is.



- Head lice eggs are glued individually to hairs near the scalp. They are dull and hard to see when unhatched but the empty egg sacs (nits) become white and easy to see after lice hatch.
- Head louse eggs take up to 10 days to hatch, baby lice take 6–14 days to grow fully and younger lice tend to stay for at least six days on the head where they hatch.
- Once fully grown, head lice spread by climbing swiftly along hairs during close head-to-head contact.
- Head lice can't fly, jump or swim and are not harmful.
- They are easily missed in dry hair and may not cause itching.
- If you do find lice, there may only be 10 or fewer.

Detection

Head lice can't be prevented but regular checking ensures early detection and treatment if necessary.



The best detection method is wet combing (see page 5). Parents and carers should aim to check their children's hair once a week during hair washing. You need your usual shampoo, ordinary conditioner and a louse detection comb.

The comb must be fine enough and robust enough to catch the lice. Your pharmacist will be able to recommend a suitable fine-toothed detection comb.

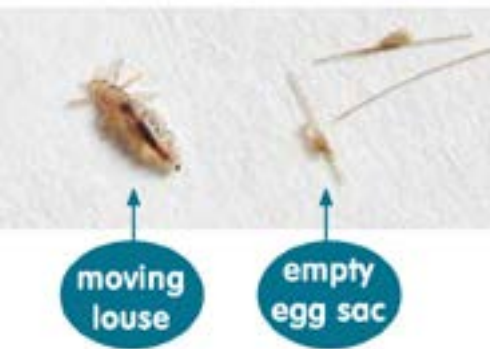
Remember that you are looking for living, moving head lice – the only evidence that your child has a head lice infection.

Treatment

Head lice treatment options include silicone oil, an insecticide product or 'bug busting'.

These are all available on the Minor Ailment Service (if you are eligible) from your pharmacist, or **free on prescription** from your doctor and from nurse prescribers (some practice nurses and health visitors). You can also buy them over the counter at your local pharmacy.

Treatment products



Do not use treatment products unless you find a living, moving louse (see photo).

- Silicone oil coats head lice and interferes with the water balance of the lice – it seems to work on eggs but two applications are still recommended.
- Insecticide lotion or gel will kill head lice, but will not kill eggs, so will need to be applied again seven days after the first application to kill any newly hatched lice.
- Seek advice from your school nurse, health visitor, pharmacist or doctor about which treatments might work best for you – this is especially important for people with asthma or allergies, pregnant or breastfeeding mothers, and carers of very young children.
- Treatment products should never be used to try to stop infection before it happens – doing this will not stop you getting an infection in the first place and may help the lice become resistant to treatment.

- Do not mix your own potion for treating or repelling lice – it is unlikely to work and could be dangerous. In particular, essential oils, like tea tree, must be used with extreme caution on children and pregnant or breastfeeding mothers.
- Whichever treatment product or method you use, always follow the instructions carefully. Do not apply a product for longer than advised, or more often than advised, as this will not increase effectiveness.

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If living head lice are still found after two different treatments, ask a health professional for advice.



Bug Busting

Wet combing is a non-insecticide alternative that involves combing out all lice with a fine-toothed detection comb. Bug busting can be done on dry or wet hair but wet combing, following the step-by-step guide below, is preferable. To be effective, these steps need to be repeated every three days for up to three weeks to ensure all head lice are removed.



Wet combing step by step

1



Shampoo the hair, rinse, apply lots of conditioner and use a wide-toothed comb to untangle and straighten.

2



Once the tangles have gone, section the hair and comb with the fine-toothed detection comb from root to end. Comb one section at a time, paying particular attention to the back of the neck and the area around the ears.





Regular wet combing can help to prevent head lice infection.

Check all family members at the same time and arrange treatment if living, moving lice are found.



3
Check the comb for live lice between each stroke and remove them.



4
When the whole head of hair has been combed through and checked, rinse off the conditioner.

A 'Bug Buster Kit' may be available on the Minor Ailment Service if you are eligible (ask your local pharmacist) and free on prescription. Only one kit is required for a family and it is reusable. The kit, which includes an illustrated guide and comb for the detection and removal of head lice, is also available to buy over the counter from community pharmacies and by mail order from:

Community Hygiene Concern (Charity reg no: 801371)
Helpline: 01908 561928 Website: www.chc.org

'Alert' letters from schools and nurseries

You may find that your school or nursery no longer sends out letters to alert parents that a child in the school has head lice. There are a few reasons for this. Most schools and nurseries are likely to have a few children with head lice at any one time. On that basis, 'alert' letters could potentially be required every day. 'Alert' letters also frequently lead parents to attempt to treat their children preventatively, which is not effective or advised. Head lice infection cannot be prevented, and overuse of insecticide treatments may lead to resistance.

Schools and nurseries should, though, provide helpful information for parents about the detection and treatment of head lice infection regularly, for example at the start of a new term.

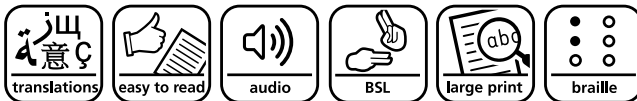
Further information on head lice can be found at:

www.nhsinform.scot/illnesses-and-conditions/skin-hair-and-nails/head-lice-and-nits

The Scottish Government publication, National guidance on managing head lice infection in children, can be found at:

<https://beta.gov.scot/publications/national-guidance-managing-head-lice-infection-children/>

This resource may also be made available on request in the following formats:



☎ 0131 314 5300

✉ nhs.healthscotland-alternativeformats@nhs.net

www.healthscotland.scot