Pediculosis

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 can be infested by each type of louse.

- **Head lice** live in the hair of the head and feed on the scalp.
- **Body lice** do not live on the human host but in the seams of infrequently changed and washed clothing, getting onto 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. Head louse infestations are common in schools and child care settings, while pubic lice are more common among the sexually active population. Body lice are prevalent in populations with very poor hygiene habits.

How is pediculosis transmitted?
**Head lice** are most commonly transferred from the hair of an infested person to that of another by direct hair-to-hair contact, or indirectly through shared combs, brushes, hats, etc. *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?
Itching of the infested area is the most common symptom of a louse infestation. Frequent scratching occurs as a result, often breaking the skin and leading to secondary bacterial infections. 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. Genital itching, accompanied by slate-blue marks where the lice have fed, is characteristic of pubic lice.

Body lice tend to get onto the skin in areas clothing fits snugly, hence the belt line and collar and cuff areas are the usual sites for their feeding activities.

How soon do symptoms occur?
Itching begins a few days to several weeks after infestation.

For how long can a person spread pediculosis?
As long as live lice are present and until all lice and eggs are killed and removed, pediculosis can be spread from one person to another.
What is the treatment for pediculosis?
Medicated shampoos, lotions, and cream rinses are available, by both prescription and over-the-counter, to kill lice and their eggs. Since it is impossible to be sure that the chemicals have penetrated every egg casing, removal of all nits ensures that they will not survive to hatch. Any of the products, when used according to the manufacturer’s instructions, is safe and effective. Directions must be followed exactly, since over-use, particularly of lindane products, can be harmful. Most products recommend a second treatment 7 to 10 days after the initial treatment.

Clothing and bedding used in the 48 hours prior to treatment should be washed in hot water and dried on the hot cycle, or dry-cleaned, or tightly sealed in plastic bags for 10 to 14 days to eliminate the possibility of reinfestation. Routine vacuuming of carpets and upholstered furniture is sufficient to eliminate any accidentally dislodged lice from the environment.

_It is not necessary 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?
Clothing, headwear, combs, brushes, and bedding should not be shared if head lice are to be avoided. Children with symptoms suggestive of head lice should be examined promptly by school or child care personnel. Close contacts, household members, sitters, and playmates of infested children should also be examined. Those found to be infested should be excluded from school and/or child care until treated. _This should not result in prolonged absenteeism. Treatment can be accomplished overnight, allowing readmission the following day._ Sharing of lockers and coat hooks should not occur. Coats and hats can be placed in individual paper or plastic bags in a storage area or at the student's desk to eliminate these practices.

Body lice can be eliminated by laundering infested clothing and bathing the individual. Care should be taken to avoid extensive contact with infested clothing and bedding in the process of accomplishing this task.

For more information, contact your local health department, ODH Outbreak Response and Bioterrorism Investigation Team (ORBIT) at 614-995-5599 or the ODH Vector-borne Disease Program at 614-752-1029.