Treatment

General Guidelines

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 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). Items that cannot be laundered may be dry-cleaned or sealed in a plastic bag for two weeks. Items such as hats, grooming aids, and towels that come in contact with the hair of an infested person should not be shared. Vacuuming furniture and floors can remove an infested person’s hairs that might have viable nits attached.

*Treat the infested person(s):*. Requires using an over-the-counter (OTC) or prescription medication. Follow these treatment steps:

1. Before applying treatment, it may be helpful to remove clothing that can become wet or stained during treatment.

2. Apply lice medicine, also called pediculicide, according to the instructions contained in the box or printed on the label. If the infested person has very long hair (longer than shoulder length), it may be necessary to use a second bottle. Pay special attention to instructions on the label or in the box regarding how long the medication should be left on the hair and how it should be washed out.

**WARNING:**

Do not use a combination shampoo/conditioner, or conditioner before using lice medicine. Do not re-wash the hair for 1-2 days after the lice medicine is removed.

3. Have the infested person put on clean clothing after treatment.

4. If a few live lice are still found 8-12 hours after treatment, but are moving more slowly than before, do not retreat. The medicine may take longer to kill all the lice. Comb dead and any remaining live lice out of the hair using a fine-toothed nit comb.

5. If, after 8-12 hours of treatment, no dead lice are found and lice seem as active as before, the medicine may not be working. Do not retreat until speaking with your health care provider; a different lice medicine (pediculicide) may be necessary. If your health care provider recommends a different pediculicide, carefully follow the treatment instructions contained in the box or printed on the label.

6. Nit (head lice egg) combs, often found in lice medicine packages, should be used to comb nits
and lice from the hair shaft. Many flea combs made for cats and dogs are also effective.
7. After each treatment, checking the hair and combing with a nit comb to remove nits and lice every 2-3 days may decrease the chance of self-reinfestation. Continue to check for 2-3 weeks to be sure all lice and nits are gone.
8. Retreatment generally is recommended for most prescription and non-prescription (over-the-counter) drugs on day 9 in order to kill any surviving hatched lice before they produce new eggs. However, if using the prescription drug malathion, which is ovicidal, retreatment is recommended after 7-9 days ONLY if crawling bugs are found.

**Supplemental Measures**: Head lice do not survive long if they fall off a person and cannot feed. You don't need to spend a lot of time or money on housecleaning activities. Follow these steps to help avoid re-infestation by lice that have recently fallen off the hair or crawled onto clothing or furniture.

1. Machine wash and dry clothing, bed linens, and other items that the infested person wore or used during the 2 days before treatment using the hot water (130°F) laundry cycle and the high heat drying cycle. Clothing and items that are not washable can be dry-cleaned

   OR

   sealed in a plastic bag and stored for 2 weeks.

2. Soak combs and brushes in hot water (at least 130°F) for 5-10 minutes.
3. Vacuum the floor and furniture, particularly where the infested person sat or lay. However, the risk of getting infested by a louse that has fallen onto a rug or carpet or furniture is very small. Head lice survive less than 1-2 days if they fall off a person and cannot feed; nits cannot hatch and usually die within a week if they are not kept at the same temperature as that found close to the human scalp. Spending much time and money on housecleaning activities is not necessary to avoid reinfection by lice or nits that may have fallen off the head or crawled onto furniture or clothing.
4. Do not use fumigant sprays; they can be toxic if inhaled or absorbed through the skin.

**Prevent Reinfestation:**

More on: Prevention & Control (/parasites/lice/head/prevent.html)

Over-the-counter Medications

Many head lice medications are available "over-the-counter" without a prescription at a local drug store or pharmacy. Each over-the-counter product approved by the FDA for the treatment of head lice contains one of the following active ingredients. If crawling lice are still seen after a full course of treatment contact your health care provider.

1. Pyrethrins combined with piperonyl butoxide;

   Pyrethrins are naturally occurring pyrethroid extracts from the chrysanthemum flower. Pyrethrins are safe and effective when used as directed. Pyrethrins can only kill live lice, not unhatched eggs (nits). A second treatment is recommended on day 9 to kill any newly hatched lice before they can produce new eggs. Pyrethrins generally should not be used by persons who are allergic to chrysanthemums or ragweed.

2. Permethrin lotion 1%;
   Brand name product: Nix*.

   Permethrin is a synthetic pyrethroid similar to naturally occurring pyrethrins. Permethrin lotion 1% is approved by the FDA for the treatment of head lice. Permethrin is safe and effective when used as directed. Permethrin kills live lice but not unhatched eggs. Permethrin
may continue to kill newly hatched lice for several days after treatment. A second treatment often is necessary on day 9 to kill any newly hatched lice before they can produce new eggs. Permethrin is not approved for use on children less than 2 years old.

Prescription Medications

The following medications approved by the U.S. Food and Drug Administration (FDA) for the treatment of head lice are available only by prescription. If crawling lice are still seen after a full course of treatment contact your health care provider.

1. **Malathion lotion 0.5%;**
   Brand name product: Ovide*

   Malathion is an organophosphate. Malathion lotion 0.5% is approved by the FDA for the treatment of head lice. The formulation of malathion approved in the United States for the treatment of head lice is a lotion that is safe and effective when used as directed. Malathion is pediculicidal (kills live lice) and partially ovicidal (kills some lice eggs). A second treatment is recommended if live lice still are present 7–9 days after treatment. Malathion is intended for use on persons 6 years of age and older. Malathion can be irritating to the skin and scalp; contact with the eyes should be avoided. Malathion lotion is flammable; do not smoke or use electrical heat sources, including hair dryers, curlers, and curling or flat irons, when applying malathion lotion and while the hair is wet.

   More on: Malathion (/parasites/lice/head/gen_info/faqs_malathion.html)

2. **Benzyl alcohol lotion (5%);**
   Brand name product: Ulesfia lotion*

   Benzyl alcohol is an aromatic alcohol. Benzyl alcohol lotion 5% is a white topical lotion approved by the FDA for the treatment of head lice; it is considered safe and effective when used as directed. Benzyl alcohol kills live lice (it is pediculicidal) but does not kill unhatched lice eggs (it is not ovicidal). A second treatment with benzyl alcohol lotion is necessary on day 9 after the first treatment (or as recommended by the manufacturer) to kill any newly hatched lice before they can produce new eggs. Benzyl alcohol lotion is intended for use on persons who are 6 months of age and older. Benzyl alcohol can be irritating to the skin and eyes; contact with the eyes should be avoided.

3. **Lindane shampoo 1%;**
   Brand name products: None available

   Lindane is an organochloride. The American Academy of Pediatrics (AAP) no longer recommends it as a pediculocide. Although lindane shampoo 1% is approved by the FDA for the treatment of head lice, it is not recommended as a first-line therapy. Overuse, misuse, or accidentally swallowing lindane can be toxic to the brain and other parts of the nervous system; its use should be restricted to patients for whom prior treatments have failed or who cannot tolerate other medications that pose less risk. Lindane should not be used to treat premature infants, persons with HIV, a seizure disorder, women who are pregnant or breastfeeding, persons who have very irritated skin or sores where the lindane will be applied, infants, children, the elderly, and persons who weigh less than 110 pounds.

When treating head lice

1. Do not use extra amounts of any lice medication unless instructed to do so by your physician and pharmacist. The drugs used to treat lice are insecticides and can be dangerous if they are misused or overused.
2. Do not treat an infested person more than 2-3 times with the same medication if it does not seem to be working. This may be caused by using the medicine incorrectly or by resistance to the medicine. Always seek the advice of your health care provider if this should happen. He/she may recommend an alternative medication.
3. Do not use different head lice drugs at the same time unless instructed to do so by your physician and pharmacist.

*Use of trade names is for identification purposes only and does not imply endorsement by the Public Health Service or by the U.S. Department of Health and Human Services.*