HEAD LICE

1. Distribution
2. Nits
3. Itching

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MODE OF TRANSMISSION
From person to person, mostly via head-to-head contact, sometimes also through objects coming into contact with the hair on your head (e.g. headwear, scarves, hair brushes, cuddly toys, etc.)

SYMPTOMS
2–3 mm large parasites on the human scalp. These suck blood from the scalp several times a day, which may lead to severe itching. The oval, 0.8 mm small lice eggs are called "nits" and are attached close to the hairline. You can easily spot the infestation behind the ears and in the temple and neck region.

NOTIFIABLE DISEASE
Community facilities must not be visited when infested with head lice. Infestations with head lice must be reported immediately to the director of the communal facility. In the case of head lice in nurseries, all parents must check their children for head lice. The parents can detect the infestation themselves, apply a suitable treatment and confirm this with a separate written note.

TREATMENT
A medical lotion or similar is applied locally for treatment. These kill off lice and nits. A second treatment is always required 8 to 10 days after the initial treatment. After applying the lotion, thoroughly comb out the damp hair with a nit comb.

FURTHER MEASURES
- Clean combs, brushes, hair clips or hair bands in hot soapy water with a fine brush.
- Wash headwear and bedsheets at 60°C or more in the washing machine without energy-saving programme.
- Place non-washable clothing and cuddly toys in a sealed plastic bag for 3 days or for 24 hours in the freezer at -15°C. All surfaces that come into contact with the hair must be vacuumed.

READMITTANCE
If this is the first infestation, children can be readmitted to the nursery if the parents have carried out the proper treatment and submit a written declaration of treatment. With a second infestation, the child can only be readmitted to community facilities when presenting a doctor's certificate.

FOR FURTHER INFORMATION
SEE THE NHS WEBSITE