

## **RESEARCH, EPIDEMIOLOGY, AND POSTION STATEMENTS**

1. Lice are very common: Reliable data on how many people get head lice each year in the United States are not available; however, an estimated 6 to 12 million infestations occur each year in the United States among children 3 to 11 years of age. [CDC](#)
2. Lice are becoming resistant to Over-the-Counter (OTC) Treatments: Lice from 138 geographical collection sites, ranging from rural to metropolitan areas, were collected from 48 states have shown substantial decrease in the ability of the Permethrin-based OTC products in providing effective control of infestations over time. [Expansion of the Knockdown Resistance Frequency Map for Human Head Lice in the United States Using Quantitative Sequencing](#)
3. [American Academy of Pediatrics Clinical Report on Head Lice](#) provides the following guidance:
  - a. No healthy child should be excluded from school or allowed to miss school time because of head lice or nits.
    - i. Pediatricians may educate school communities that no-nit policies for return to school should be abandoned.
  - b. Unless resistance to these products has been proven in the community, Permethrin or Pyrethrins are a reasonable first choice for primary treatment of active infestations if pediculicide therapy is required.
    - i. Carefully communicated instructions on the proper use of products are important. Because current products are not completely ovicidal, applying the product at least twice, at proper intervals, is indicated if Permethrin or Pyrethrin products are used or if live lice are seen after prescription therapy per manufacturer's guidelines. Manual removal of nits immediately after treatment with pediculicide is not necessary to prevent spread.
    - ii. If resistance to available OTC products has been proven in the community, if the patient is too young, or if parents do not wish to use a pediculicide, consider the manual removal or an occlusive method with emphasis on careful technique, close surveillance, and repeating for at least 3 weekly cycles.
    - iii. School personnel involved in detection of head lice infestation should be appropriately trained. The importance and difficulty of correctly diagnosing an active head lice infestation should be emphasized.
    - iv. Head lice screening programs have not been proven to have a significant effect over time on the incidence of head lice in the school setting and are not cost-effective. Parent education programs may be helpful in the management of head lice in the school setting.

## **WHAT GREENFIELD SCHOOL DISTRICT WILL DO**

1. Track Data – The District Nurse track data to determine whether or not an “outbreak” of head lice is occurring based on the number of reported cases.
  2. Inspect students – The District Nurse may inspect other known household contacts such as siblings.
  3. The District Nurse in coordination with the building Principal, may consider classroom Head Lice Inspection if there are 3 or more cases of live lice in an individual classroom.
  4. Inform and Educate – Head lice information shall be available upon request from the District Nurse. Please go to the [District Nurse](#) page for resources. An informational letter about head lice prevention, diagnosis, and treatment will go home to the parents/guardians of all the students in a classroom if there are 3 or more cases of live lice in that individual classroom.
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## **WHAT FAMILIES CAN DO**

1. Inspect your children's hair several times a week for lice and/or their eggs (nits). This is important so the lice can be discovered early and treated. This should be done whether or not there are known lice in the school.
2. Carefully follow the instructions when you use any treatment. Most require two treatments at a specific interval. Careful inspection, combing and nit removal between treatment intervals may improve results.
3. If OTC lice treatments do not work, consult your health care professional for further guidance.

Please go to the [Health Office](#) page on the Greenfield School District website for more information and resources. I hope you find this information useful regarding the common yet uncomfortable issue.

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