

Infestations

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Most of us would be confident in our diagnosis of lice or scabies. However do we give patients the right advice on how to administer the treatments for them? This review from the National Prescribing Committee highlights the fact that, if treatments are to be most effective, patients need to follow specific instructions that often vary from those on the packet. *So as the school term starts and head lice the country over leap with joy at the prospect of new heads to colonise, here is a brief review of the evidence and specific advice on how to use the relevant treatments.*

Head Lice

- Structured detection combing is more reliable than visual inspection to confirm infection.
- Treat only if live lice found!
- Rotating insecticides on a district basis is no longer considered helpful.
- Wet combing and insecticides are equally effective, so patient choice is important.
- However wet combing must be done for a minimum of 4 sessions over 2 weeks to be effective.
- There is only anecdotal evidence for tea tree oil.
- Using insecticides (malathion 0.5% lotion, phenothrin 0.5% liquid or dimeticone 4%).
 - **Rub into dry hair and then allow to dry naturally.**
 - **Leave on for 12 hours (or overnight) then wash off (the packet suggests washing off much sooner, but this is less effective).**
 - **Repeat after 7d to catch lice emerging from eggs.**

Scabies

- Highly contagious and often missed as a diagnosis. You don't need to see the parasite before starting treatment: diagnosis is based on history and examination.
- Whole family (and all close contacts) must be treated, even if asymptomatic.
- Contact tracing over the previous 2 months is recommended.
- **5% permethrin cream is recommended 1st line as this has the best evidence base.**
 - **Apply over whole body and allow to dry naturally.**
 - **Do apply to the head, neck and face, even though the packet says avoid these areas for adults.**
 - **Wash off after 8-12hrs.**
 - **If any area is washed during this time (hands most commonly) reapply.**
 - **Repeat the whole process 7 days later.**

Pubic lice

- Confirmation of infestation needed before treatment: look for live lice/viable eggs.
- Not always caught by sexual contact, but if it is, consider GUM referral for STI screening.
- Contact tracing is recommended for those with close contact in previous 3 months.
- **Expert recommendation is for aqueous malathion 0.5% or permethrin 5% dermal cream.** (Very little evidence base for any treatment!)
 - **Apply over whole body and allow to dry naturally.**
 - **Do apply to the head, neck and face, even though the packet says avoid these areas for adults.**
 - **Wash off after 8-12hrs.**
 - **If any area is washed during this time (hands most commonly), reapply.**
 - **Repeat the whole process 7 days later.**

Are you starting to feel itchy yet?

How much should I prescribe?

This comes from the BNF. It applies to adults:

	Skin creams	Lotions/liquid
Scalp	–	50-100mls
Body	30-60g	100ml

Take home messages: Infestations

- **Make sure the patient knows how to use the medication correctly!**
- **Don't forget to contact trace if scabies or pubic lice are diagnosed.**

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