



Title	Body and Pubic Lice Policy
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BODY & PUBIC LICE POLICY

Aim: To provide advice on the treatment & management of body & pubic lice treatments in tandem with effective detection and preventative measures

Standards

- diagnosis must be made by appropriately trained medical or nursing staff
- further advice can be obtained by contacting a member of the IPCT.

General Information

Body lice infect the hairy parts of the body and clothing (especially along the seams of the inner surface) with adult lice, larvae and nits. They are capable of living for a limited time in infected clothing.

Pubic lice usually infect the pubic hair area but may also infect hair of the face (including eyelashes) axillae and other hairy body surfaces. Pubic lice are temperature dependent and generally exist only for a short time away from the host.

What to Look For

- evidence of adult lice, larvae or nits in hairy areas and / or clothing
- severe itching and excoriation of the body
- secondary infection may occur
- there may be bites at areas closest to underclothes.

Incubation Period

Approximately 17 days. Eggs of lice hatch in a week in optimal conditions and reach maturity in 8-10 days.

The detection and subsequent management of body and pubic lice infection demands tactful and sensitive management by all professionals concerned.

1. MANAGEMENT [the following guidance is <i>specific</i> to body and pubic lice and some only applicable to the hospital inpatient; other precautions may have to be taken following assessment of patient]	
Spread	Direct contact with an infected person, indirect contact with their personal belongings especially shared clothing. Pubic lice are frequently transmitted through sexual contact.
Single room	Not always required; risk assessment must be performed based on likelihood of transmission in the care environment.
PPE	<p>Plastic Apron: must be worn by all members of staff having contact with patient/ linen and immediate patient environment</p> <p>Gloves: must be worn by all members of staff having contact with patient/ linen and immediate patient environment</p> <p>Facial Protection: unnecessary for body or pubic lice</p>
Hand Hygiene	After contact with patient, contaminated articles or patients immediate environment. Gloves should be removed and hands washed and dried thoroughly. Instruct patient in hand washing technique as condition allows.
Linen	Treat linen as infected linen. (See Linen Policy).
Crockery, cutlery and medicine cups	Medicine cups are single-use disposable Routine domestic <u>hot</u> wash for other reusable items.
Clinical Waste	Routine disposal, unless otherwise indicated.
Cleaning of room	Routine cleaning, unless otherwise indicated.
Baths/ showers	Routine cleaning, unless otherwise indicated.
Charts	Not applicable unless patient requires isolation. Refer to isolation policy
Laboratory specimens	See section 4.2. Routine collection and transport sufficient unless otherwise indicated.
Transporting patients	Receiving units must be informed of patient's status and any precautions required.
Visitors	Instruct visitors on correct precautions to take.
Terminal cleaning	Not required unless otherwise indicated; routine discharge cleaning sufficient.

1. TREATMENT	
Lice remain infectious until treated; period of communicability lasts as long as lice and eggs remain alive on the infected person and/or clothing.]	
Contact Pharmacy for current product and follow the manufacturer's recommendations. NB Patients with asthma may require a different preparation to the one usually recommended.	
<ul style="list-style-type: none"> • wear disposable apron and gloves. Apply lotion as per manufacturers instructions • dispose of protective clothing in yellow clinical waste bag, wash & dry hands • after treatment period is over wash off lotion wearing protective clothing • dispose of protective clothing in yellow clinical waste bag, wash & dry hands • treat linen and clothing as infected as per local policy for up to 24 hours after treatment is discontinued. 	
Since pubic lice are sexually transmitted the patient should be advised to consider a referral to the GUM department for further screening tests	
If symptoms persist after initial treatment contact IPCT for advice.	
Staff	If concerned, contact Occupational Health Service for advice. See also Scabies - Staff Guidelines.
Visitors	Close Contacts Should seek advice from their own GP. Clothing and linen to be washed in a dedicated hot water cycle of an automatic washing machine and tumble dry/iron or dry clean. <i>(Manufacturers washing instructions should be followed to prevent unnecessary damage to clothing).</i>