

Encouraging combing instead of using lotions seems to be paying off.

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Lin Sutherland

Nit combs: naturally the best?

Headlice have been on the increase again in Swindon schools. Fears that some lotions may be pre-carcinogenic, and the discovery that others are losing their effectiveness against resistant louse strains, are adding to our health professionals' 'headache'. We found ourselves under pressure from schools and parents to find a solution, which seemed to lie in the trusty nit comb.

In September 1995 I set up a working party representing school nurses, medical officers, the pharmaceutical services, and general practitioners, and the outcome was to recommend the Bug Busting method — in other words, regular combing, using lotions only as a last resort.

A national campaign has been organised by school nurses in conjunction with Community Hygiene Concern (developers of the Bug Busting pack). Guidelines were prepared and sent to all schools and NHS general practices, as well as some GP fundholders and pharmacies, in the Swindon area; school nurses informed the parents at every opportunity, and the schools were encouraged to take part in Bug Busting Day on 31 October. In order to measure the effectiveness of the scheme, questionnaires were sent to all the recipients at the end of the school year, and some of the results are presented below.

General practices

These results refer to the 70% of practice managers (28 out of 40) that returned a completed questionnaire. In some cases, questions were unanswered. All of them reported having

given out guidelines to patients.

Were they favourably received?

- Yes 68%
- No 32%

Is the practice still prescribing pediculicides?

- Occasionally 71%
- No 29%

How has the number of lotion prescriptions changed?

- Decreased 82%
- No change 14%

How has the number of cases dealt with changed?

- Decreased 50%
- No change 39%
- Increased 4%

Does the practice support the physical ('natural') method?

- Yes 75%
- No 25%

This certainly looks like 'success'. It is interesting that the respondents altered the 'yes' in the second question to 'occasionally'. They pointed out that they were trying to encourage parents to use a comb, but occasionally had to prescribe lotions when the infestation would not clear up.

In some practices, locums were prescribing lotions freely. There was tremendous pressure for lotions from parents, and it was sometimes

Tremendous pressure for lotions from parents means that they may buy them even when not prescribed.

felt that even if they didn't prescribe, the parents would just buy the lotion anyway.

GP fundholders

Questionnaires were sent to eight of these. All of them reported a decrease in the number of headlice cases.

With respect to prescribing lotions:

- ONE is still prescribing.
- FOUR prescribe when infestation is bad.
- THREE are not prescribing.

Again, for the 'natural' movement, good news.

Community pharmacies

The Director of Pharmaceutical Services sent out questionnaires to four community pharmacies: three were branches of different multiple retailers, while the fourth was a private pharmacy.

While this was a very small 'snapshot', the survey did show that pharmacists are aware of the 'natural' bug-busting guidelines.

With respect to the sale of lotions:

- THREE were recommending combing.
- The sale of pediculicides had generally DECREASED.
- Generally the number of prescriptions had either STAYED THE SAME OR DECREASED.

These responses suggest a real fall in the level of lotions sold, whether on or off prescription.

Schools and parents

Questionnaires were sent to 139 primary and secondary schools in the area, although many had not had any headlice cases that they were aware of. Also, a few had not been sent the original Bug Busting guidelines, an oversight we quickly remedied.

A parents' questionnaire was also supplied to the schools, and they were requested to pass on the comments. Feedback was also obtained by school nurses when they carried out health assessments and talked to parents; in addition they were able to help the teaching staff pass on correct advice when there were cases in the classroom.

We had a 78% response to our questionnaire follow-up.

School nurses were able to help the teaching staff pass on correct advice.

Prescriptions for lotions, and sales, have fallen. So have the number of infestations reported by surgeries and schools.

With respect to distributing the guidelines:

- 76% had sent a copy of the guidelines to ALL PARENTS.
- 15% sent them to parents linked to an 'INFECTED' CLASS.
- The remainder informed parents of the NEW INTAKE ONLY, or put up POSTERS.

What about the parents' reaction?

- 41% of the parents were reported to have been POSITIVE.
- 39% were NEGATIVE.
- 20% of responses were UNCLEAR.

How did instances of reported headlice change?

- Increased 17%
- Unchanged 56%
- Decreased 27%

The schools were asked if they supported the 'natural' method.

- Yes 94%
- No 6%

Ironically, the reaction of the schools to this initiative is less encouraging than that of the 'dispensers'. They report that the same proportion of parents (40%) are for and against the guidelines. Without further details, it is impossible to know where this disaffection lies — or how the schools managed to find out what their parents thought.

In retrospect

Overall, this audit shows that lotion prescriptions and sales have fallen, and so have the number of infestations reported by surgeries and schools. Putting these two facts together suggests that the 'natural' combing method has made an impact.

However, there are other things we would like to know. For example:

- Can the Swindon figures be compared with any regional or national trend, to see if the lower reported level of infestation could be part of a general pattern that is independent of the method employed?
- Is the pattern of infestation within the 25% of schools that did not distribute the guidelines to parents different from that in the 75% that did? [In other words, can they be made to act as a 'control' group?]

- What did 40% of parents object to in the guidelines? Was it the 'natural' method itself, or the way it was presented? Can they be altered?

Where now?

Continued education and support are needed, and we shall certainly encourage our schools to take part in Bug Busting again. We need to publicise the results and ensure that as many people as possible are told how to prevent headlice and how to treat them if they do get them.

The new Bug Busting pack has an excellent wall chart showing the correct method to use to treat headlice, and this would be ideal for schools and for doctors' surgeries. Practice nurses are often asked to advise patients when GPs are not prescribing lotions, so they would probably find this poster very useful in the treatment room.

Nit combs

We have now found a promising source of supply at only 40p each when a minimum of 50 are ordered, plus £2 for carriage. Order from Yvonne Morley, 152 Humber Road, London SE3 7EF (0181 293 3031).

A new Bug Busting video

This has been brought out by Community Hygiene Concern, and is ideal for showing to parents. As it costs only £10 post free, schools could consider ordering their own copy (32 Crane Avenue, Isleworth, Middlesex TW7 7JL (0181 292 7208). Bug Busting packs cost £11.90 from Joanna Ibarra, Programme Co-ordinator (0181 341 7167).

THE BUG BUSTING METHOD

1. Wash hair with normal shampoo, and rinse.
2. Using ordinary conditioner, condition hair. This makes the hair too slippery for the lice to hold on.
3. *Don't rinse yet!* With the conditioner still on the hair, first use a wide-toothed comb to sort out tangles. Then apply the fine-toothed Bug Busting comb, lock by lock, carefully and slowly, making sure that the teeth of the comb slot into the hair at the roots with every stroke.
4. Clear the comb of lice between each stroke. Finally, rinse hair as usual.
6. If lice are present, repeat this routine every 3 days for at least 3 treatments.

Lin Sutherland may be contacted through the School Health Services, Wroughton Health Centre, Barratt Way, Wroughton, Swindon, Wilts. SN4 9LW (01793 815127). She says: "I should be delighted to hear from other groups that have been faced with similar concerns to ours."