



PEDICULOSIS PUBIS

DEFINITION	Infestation of lice (the crab louse) or nits in pubic hair region. (Occasionally are found on coarse hairs such as eyelashes, eyebrows, beards, mustaches, chest, armpits, ect.)
SUBJECTIVE	May include: <ol style="list-style-type: none">1. Itching and scratching in genital area, with or without papules.2. Known exposure to pubic lice.3. Increased symptoms at night.4. Client may note rusty spots in underwear.
OBJECTIVE	May include: <ol style="list-style-type: none">1. Nits, parasites and brown parasite excrement visible at base of hair shaft.2. Inflamed maculopapular lesion; crust may form.
LABORATORY	May include: <ol style="list-style-type: none">1. Microscopically identified lice.
ASSESSMENT	Pediculosis pubis.
PLAN	<ol style="list-style-type: none">1. Recommended treatment regimes:<ol style="list-style-type: none">a. Permethrin 1% cream (i.e. NIX). Apply to affected areas and wash off after 10 min. ORb. Pyrethrins with peperonyl butoxide (i.e.RID, Triple X, R&C, A-200 pyrinatate gel). Apply to affected areas and wash off after 10min. (Do not use with pregnant or breast-feeding women.)2. Alternative regimes:<ol style="list-style-type: none">a. Ivermectin 250mcg/kg orally, repeated in 2 weeks. It is currently not approved by the FDA for treatment. (Can be used as a treatment option if treatment failure is a result of drug resistance).3. Special considerations:<ol style="list-style-type: none">a. Pregnancy or lactating: Recommend use of OTC preparation, not prescription regimens.b. HIV: Persons with HIV and lice should receive same treatment as others.c. Management of sex partners: Sex partners within the preceding month should also be treated. Patients should abstain from sexual contact with their partner(s) until patients and partners have been treated and reevaluated to rule out persistent disease.d. Pediculosis of eyelashes should be treated by applying occlusive ophthalmic grade ointment (by RX only) to the eyelid margin 2-4 times a day x 10 days.4. Screen for other STDs as appropriate.
CLIENT	<ol style="list-style-type: none">1. Provide client education handout for crab/lice.2. Advise and reinforce client that nits may have to be manually removed.

EDUCATION	<ol style="list-style-type: none"> 3. Bedding and clothing should be decontaminated (i.e., machine-washed in hot water, at least 130 degrees F), machine-dried using heat cycle, or dry clean) or removed from body contact for at least 72 hours. Fumigation of living areas is not necessary. Items not able to be washed can be stored in a sealed bag for 2 weeks. 4. Review safer sex education, as appropriate. 5. Repeat-treatment in 9-10 days if live lice are still found. 6. Evaluate for other STDs.
CONSULT / REFER TO PHYSICIAN	Only if treatment options are ineffective.

Revised 09/12

References:

1. Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2010. MMWR (2010; 59) December 17. (No. RR12) pp.-88-89.
2. *Parasites-Lice*. (2010, November). from cdc.gov/parasites/lice