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BCCDC Non-certified Practice Decision Support Tool
Pediculosis Pubis (Pubic Lice)

PEDICULOSIS PUBIS (PUBIC LICE)

DEFINITION

An ectoparasitic infestation in the genital area which causes itching, erythema, skin irritation, and inflammation.

CAUSES

Phthirus pubis (crab louse)

PREDISPOSING RISK FACTORS

Intimate sexual and non-sexual contact including, sharing of personal articles (e.g., clothing, bedding) with a person who is infected.

TYPICAL FINDINGS

Sexual Health History

- May report itching, skin irritation and inflammation, usually in the pubic hair but, may also be noted in the chest, armpit, eyelashes or facial hair
- Intimate or sexual contact or shared personal articles (e.g., bedding, clothing) with someone diagnosed with pubic lice

Physical Assessment

- Evidence of adult insects or eggs (nits) in the hair
- May appear as:
 - Nits are approximately 0.8 mm in length and 0.3 mm in width, oval in shape and opalescent in colour
 - Nits are cemented to the hair shaft (not loose, difficult to remove)
 - Adult lice are about 1 mm in length, are attached to the base of the hair, and may appear as small brown/tan specks
 - Small blue spots where louse has bitten

BCCDC Clinical Prevention Services
Reproductive Health STI Decision Support Tool – Non-certified Practice
Pediculosis Pubis (Pubic Lice)
December 2014



A research and teaching centre affiliated with UBC

BCCDC Non-certified Practice Decision Support Tool
Pediculosis Pubis (Pubic Lice)

Note: Full STI screening is recommended, if appropriate, for men and women when they are initially assessed for pubic lice.

Diagnostic Tests

Diagnosis is based on history and clinical signs including:

- Careful examination for adult lice and nits (eggs)
- If necessary, submit nits or scabs in a container for microscopic examination

CLINICAL EVALUATION

On clinical findings of pubic lice:

- Offer treatment
- Refer to physician or nurse practitioner (NP) as needed

MANAGEMENT AND INTERVENTIONS

Goals of Treatment

- Reduce transmission
- Treat infection
- Prevent secondary bacterial skin infection

TREATMENT OF CHOICE

First Choice

- Permethrin 1% (e.g., Nix Crème Rinse) applied to infested and adjacent hairy areas and washed after 10 minutes

Second Choice

- Pyrethrin-Piperonyl Butoxide .33% (e.g., R&C Shampoo/Conditioner)

Notes:

- Advise clients to follow directions in package insert in whatever product they choose to use.
- Re-treatment is usually not required after the use of Nix since it binds to the hair and remains effective for several weeks. Overuse can lead to skin irritation and have toxic effects.
- Re-treatment is required if pediculosis persists 7 days after initial treatment.
- Pediculosis of the eyelashes should be treated by the application of occlusive ophthalmic ointment (e.g., Lacri-Lube or Duolube; no prescription required) to the eyelid margins bid for 10 days.
- May require additional treatment for pruritis (e.g., diphenhydramine).

ALTERNATE TREATMENT

Refer to NP or physician.

PREGNANCY AND BREASTFEEDING

Refer to nurse practitioner (NP) or physician.

PARTNER COUNSELLING AND REFERRAL

- Recent sexual partner(s) should be treated
- Partner notification done by client (client/self referral).

POTENTIAL COMPLICATIONS

Scratching can lead to a secondary bacterial skin infection.

CLIENT EDUCATION

Counsel client that:

- pruritus may persist for several days or weeks after treatment.
- humans are the only hosts for pubic lice.
- pubic lice cannot live off of their host for more than 24 hours.
- pubic lice can be transmitted by close contact and/or sexual contact.
- attention must be paid to the instructions of the treatment preparation being used. Overuse of these preparations will result in itchy skin. Many of these preparations are absorbed through the skin and can be toxic.
- clothes, bedding and fomites (e.g., pillows) that may have come into contact with pubic lice within the past two days should be washed in hot water (50° C), placed in a hot dryer for at least 30 minutes or dry-cleaned. Alternatively, place in plastic bags for one week. Mattresses can be vacuumed.

CONSULTATION AND/OR REFERRAL

For clients who are pregnant and/or breastfeeding.

DOCUMENTATION

- Pediculosis pubis (pubic lice) is not reportable.
- As per agency guidelines.

REFERENCES

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