Prescribing Guidelines for Head Lice
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When live head lice are identified on a child, treatment should be quickly initiated. Many treatment options exist with the ideal treatment being safe, readily available, easy to use, effective and inexpensive. This prescribing guideline, developed by Partners For Kids in collaboration with experts at Nationwide Children's Hospital, is designed to help guide you in the pharmacologic treatment of head lice.

Pediculocidal vs. Ovicidal Agents
- A pediculicide is an agent that kills live lice which includes nymphs and adults.
- An ovicide is an agent that kills lice eggs (nits).
- All topical lice agents have pediculicidal activity, but all do not have complete ovicidal activity.
- Because of the life cycle of a louse, retreatment with most topical lice products is necessary. Retreatment at day 9 is optimal.

Treatment Failure
When lice persist despite treatment, the following should be considered:
- Misdiagnosis
- Lack of adherence
- Inadequate treatment or application
- Reinfestation
- Lack of ovicidal or residual killing properties
- Resistance
# Head Lice Medication List

<table>
<thead>
<tr>
<th>Generic Drug Name (Brand Name)</th>
<th>Average Cost Per Script*</th>
<th>Age</th>
<th>Type of Activity</th>
<th>Application</th>
<th>Retreatment†</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Line</strong></td>
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</tr>
<tr>
<td>Pyrethrins/piperonyl butoxide 0.33%-4% (LiceMD® and Rid®)</td>
<td>$11</td>
<td>&gt; 2 years</td>
<td>Pediculocidal</td>
<td>Apply to dry hair. Rinse after 10 minutes. Avoid in patients with chrysanthemum allergy (low risk for reaction).</td>
<td>Recommended between day 7 to 10; day 9 is optimal per guidelines.</td>
</tr>
<tr>
<td>Permethrin 1% (Nix®)</td>
<td>$7</td>
<td>&gt; 2 months</td>
<td>Pediculocidal</td>
<td>Apply to damp hair that is shampooed with a non-conditioning shampoo and towel dry. Rinse after 10 minutes.</td>
<td>Recommended between day 7 to 10; day 9 is optimal per guidelines.</td>
</tr>
<tr>
<td><strong>2nd Line</strong></td>
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</tr>
<tr>
<td>Malathion lotion 0.5% (Ovide®)</td>
<td>$225</td>
<td>&gt; 6 years; &gt; 2 years for resistance/failure to permethrin/pyrethrins</td>
<td>Ovicidal &amp; Pediculocidal</td>
<td>Apply to dry hair and let air dry. Wash off after 8-12 hours. <strong>Highly flammable - no smoking or flames near child.</strong></td>
<td>If live lice seen, may reapply in 7-9 days.</td>
</tr>
<tr>
<td>Spinosad suspension 0.9% (Natroba®)</td>
<td>$256</td>
<td>&gt; 6 months</td>
<td>Ovicidal &amp; Pediculocidal</td>
<td>Apply to dry hair, including scalp, working outward to the ends of the hair. Rinse after 10 minutes.</td>
<td>If live lice seen, may reapply in 7 days per labeling; day 9 is optimal per guidelines.</td>
</tr>
<tr>
<td><strong>3rd Line</strong></td>
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</tr>
<tr>
<td>Ivermectin lotion 0.5% (Sklice®)</td>
<td>$252</td>
<td>&gt; 6 months</td>
<td>Pediculocidal</td>
<td>Apply to dry hair and scalp. Rinse after 10 minutes.</td>
<td>Not required.</td>
</tr>
</tbody>
</table>

* Average cost per script is based on generic drug when available using an average length of therapy. Prices are for reference and actual cost may vary based on drug strength, quantity and other factors.

† If retreatment is recommended, prescription quantity should be sufficient for both applications.

**References**
Referrals and Consultations

Online: NationwideChildrens.org
Phone: (614) 722-6600 or (877) 722-6220 | Fax: (614) 722-4000

Physician Direct Connect Line for 24-hour urgent physician consultations:
(614) 355-0221 or (877) 355-0221.