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Lice, Scabies and Pregnancy

This sheet talks about the risks that exposure to lice or scabies can have during pregnancy. With each pregnancy, all women have a 3% to 5% chance of having a baby with a birth defect. This information should not take the place of medical care and advice from your health care provider.

What are lice?

Lice are parasitic insects that can live on the body or in hair. Head lice are the most common type of lice. Lice hatch out of eggs that are called nits. Nits are usually yellow or white and are about the size of a knot in thread. Adult lice have six legs and are a tan to grayish-white color. Adult lice are about the size of a sesame seed. Lice usually cause itching and rashes. You can get lice by touching someone who has lice, or sharing that person's clothing, towels, brushes, or other personal items.

What is scabies?

Scabies is the spread of mites (a type of insect) on the skin. The mites are so small they usually cannot be seen with the naked eye. The mites burrow into the skin and cause itching and rashes. You can get scabies by touching someone who has scabies, but usually you have to be touching for a long time (more than just a quick handshake). You can also get scabies by sharing clothes, towels, or bedding with someone who has scabies.

How can I tell if I have lice or scabies?

Lice will cause itching and rashes, usually on the scalp. You can sometimes see adult lice crawling through hair or on the scalp. You can also look for the nits (eggs) attached to the hair close to the scalp.

Scabies will cause itching all over the body. You may see a rash or raised S-shaped lines on the skin. A doctor can tell if you have scabies by taking a scraping of the skin and looking for the mites or their eggs under a microscope.

How can I protect myself from getting lice or scabies during my pregnancy?

If someone in your household or other close contact has lice or scabies, it is possible for you to get them too. To prevent this from happening, the person that has lice or scabies needs to be treated as soon as possible.

It is also important to treat the whole household. All clothing and bed linens that the person wore or came in contact with in the two days before treatment should be washed in HOT water and dried in high heat. The person's combs and brushes should be soaked in rubbing alcohol or a disinfectant for one hour. Finally, floors and furniture should be vacuumed.

I am pregnant and I have lice. What over-the-counter products can I use to get rid of the lice?

Over-the-counter lice medications are usually cream rinses for hair. They contain either permethrin (brand name Nix[®]) or pyrethrin and piperonyl butoxide (brand name Rid[®]). There are several different brands available at the drugstore. Permethrin, pyrethrin and piperonyl butoxide are insecticides that do not pass through the skin into the blood in high amounts. Most animal studies have not shown an increased risk for birth defects when these insecticides were used during pregnancy. One study of women who used permethrin during pregnancy did not show an increase in the risk for birth defects. The Centers for Disease Control and Prevention (CDC) recommends that women use permethrin or pyrethrin/piperonyl butoxide cream rinses to treat head lice during pregnancy.

It is recommended that you do one treatment with a cream rinse as soon as you notice the lice, and then do another treatment 7-10 days

later. This will kill any newly hatched lice. Always follow the instructions on the bottle carefully.

What if the lice do not go away after using over-the-counter products?

It is common for cream rinse treatments to fail to kill all the lice. If this happens, you should see a doctor about getting a different kind of lice medication. Common prescription medications for lice are malathion and lindane. There are no studies looking at women who have been treated with malathion during pregnancy, but most animal studies have not shown an increased risk for birth defects. Lindane can cause toxic side effects in children and adults and is generally avoided in pregnancy. Studies in pregnant animals have not shown lindane to cause birth defects. You should talk to your doctor about the benefits and risks of using a prescription medication to treat lice during pregnancy.

What do I do if I think I have scabies during my pregnancy?

If you think you have scabies, you should see a doctor. A doctor will look at your skin carefully and may take a scraping of your skin to see if you have scabies. Your doctor may prescribe a stronger kind of permethrin cream than what is available over-the-counter. Another treatment that is thought not to increase risk when used in pregnancy is sulfur in petrolatum. However, some doctors have questioned how well it works to treat scabies. Lindane, crotamiton and ivermectin are sometimes used to treat scabies. Crotamiton and ivermectin have not been well studied in pregnancy, and should only be used if other treatments do not work. As mentioned above, lindane is generally avoided during pregnancy.

What lice and scabies medications can I use while I'm breastfeeding?

The CDC recommends that breastfeeding women use pyrethrin or permethrin to treat lice and scabies. Ivermectin passes into breast milk in small amounts, and has been rated compatible with breastfeeding by the American Academy of Pediatrics. Lindane is usually avoided during breastfeeding because it is not recommended for use in young children. If you are breastfeeding, you should talk to a doctor before using a prescription medication to treat lice or scabies.

What if the father of the baby uses lice or scabies medication?

There have been no studies looking at paternal exposures to lice and scabies medications. However, most medications are not thought to increase the risk of birth defects when a father uses them before or around the time of conception. Lice and scabies may be spread through sexual intercourse. As mentioned above, any household member that has lice or scabies should be treated immediately to prevent spreading to other household members.

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If you have questions about the information on this fact sheet or other exposures during pregnancy, call OTIS at 1-866-626-6847.