Lice and Scabies

This sheet talks about exposure to lice and scabies in a pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare 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, mainly from head to head contact. It may also be possible to get lice from sharing an infected person’s clothing, towels, brushes, or other personal items. Lice crawl; they cannot jump or fly. Lice cannot live more than 2-4 days off the human body. Head lice are not known to spread disease.

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 and it is usually most severe at night. You may see a rash or raised S-shaped lines on the skin. Your healthcare provider 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. All clothing and bed linens that the person wore or came in contact with in the two days before treatment should be dry-cleaned or washed in HOT water and dried in high heat for at least 20 minutes, and/or removed from body contact for at least 72 hours. The person’s combs and brushes should be soaked in rubbing alcohol or a disinfectant for one hour. If they are heat resistant, they can be soaked in hot water (at least 130 degrees) for 5-10 minutes. Floors, furniture, car seats and other fabric covered items should be vacuumed.

I am pregnant and I have lice. Will the ingredients in over-the-counter products used to treat lice increase the chance of birth defects?
Over-the-counter lice medications are usually cream rinses for hair. Usually, they contain either permethrin (brand name Nix®) or pyrethrin and piperonyl butoxide (one brand name Rid®). There are different brands available at the drugstore, and new medicines are coming onto the market. MotherToBaby does not make specific recommendations for treatment; talk with your healthcare provider for specific recommendations. There are also treatments available by prescription.

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 chance for birth defects when these insecticides were used during pregnancy. Small studies of women who used permethrin during pregnancy did not show an increase in the chance for birth defects. The Centers for Disease Control and Prevention (CDC) recommends that women use permethrin or pyrethrins and piperonyl butoxide to treat lice during pregnancy. Always follow the instructions on the bottle carefully. If a 2nd treatment is recommended, be sure to follow the timeline instructions. Reapplying too soon or too late can lower treatment success.

**Will prescription strength lice treatment increase the chance for birth defects?**

If over-the-counter treatments fail to kill the lice, you should see a healthcare provider about getting a different kind of lice medication. Common prescription medications for lice are malathion and ivermectin. The animal and human data do not suggest an increased chance of pregnancy problems with the use of malathion.

The limited information regarding the use of ivermectin has not suggested an increased chance of problems during pregnancy. Since it is not well studied for use in pregnancy, other, better studied treatments may be recommended.

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

If you think you have scabies, you should see a healthcare provider. They will look at your skin carefully. To confirm a diagnosis of scabies, your healthcare provider may take a scraping of your skin. There are several medications that can be used to treat scabies, including benzyl benzonate, sulfur in petrolatum and lindane. One study has shown no increased chance of problems in pregnancy after using benzyl benzonate lotion. Sulfur in petrolatum is not thought to increase risks when used in pregnancy.

Lindane is sometimes used to treat scabies if other treatments fail. 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 healthcare provider about the benefits and risks of using your specific prescription medication to treat scabies during pregnancy, or contact MotherToBaby with the name of your medication so that we can discuss your specific exposure.

**Can I breastfeeding while using lice and scabies medications?**

The CDC suggests that breastfeeding women use pyrethrin or permethrin to treat lice and scabies, because the amount absorbed after topical use is limited. Ivermectin passes into breast milk in small amounts. Lindane is usually avoided during breastfeeding because it is not recommended for use in young children. Malathion is not well studied in breastfeeding mothers. If you are breastfeeding, talk to a healthcare provider before using a prescription medication to treat lice or scabies, and about all of your breastfeeding questions.

**If a man has lice or scabies, could it affect his fertility (ability to get partner pregnant) or increase the chance of birth defects?**

Lice and scabies may be spread through sexual intercourse. Any household member that has lice or scabies should be treated immediately to prevent spreading to other household members.

Most medications are not thought to increase the chance of birth defects when a father uses them before or around the time of conception. Lice and scabies may be spread through sexual intercourse. Any household member that has lice or scabies should be treated immediately to prevent spreading to other household members.

In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

**Please click here for references.**

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If you have questions about the information on this fact sheet or other exposures during pregnancy and breastfeeding, call MotherToBaby at (866) 626-6847. Copyright by OTIS.