Truth Be Told: Facts and Myths about Head Lice.

1. **TRUE OR FALSE:**
   Head lice are so small you can’t see them with the naked eye.

   **FALSE:** Head Lice are the size of sesame seeds. They may be difficult to see with the naked eye, but not impossible. They are best viewed in natural light with a magnifying glass.

2. **TRUE OR FALSE:**
   You’re more likely to get head lice if you have poor personal hygiene.

   **FALSE:** Head lice are equal-opportunity parasites; they live exclusively on human blood. It doesn’t matter how often you wash your hair. It doesn’t matter if you have dandruff. They are attracted to blood, not poor hygiene.

3. **TRUE OR FALSE:**
   Your child is more likely to get head lice than you are.

   **TRUE:** Children are more inclined to get lice because they engage in frequent head-to-head contact -- over secrets, games, sports -- and close contact is the primary way lice move from person to person. And though lots of parents are alarmed when their child comes home with lice, there's simply no way to prevent kids from getting lice and, as disgusting as they may be, they're not a medical problem -- just a nasty nuisance!
4. **True or False:**
Head lice can jump from person to person.

**False:** Head lice can’t jump or fly, they can only crawl. And because head lice thrive solely on human blood, they move only from person to person, never from another animal such as a dog or cat. The most common way for head lice to get from one person to another is via head-to-head contact. They can also move around via shared hats, combs, and bedding, but because they die within a day or two without human contact, this path of transmission is much less likely.

5. **True or False:**
It's important that you treat head lice quickly, as they spread disease.

**False:** Head lice don’t transmit infections, lead to scabies, or make children sick. In fact, they rarely, if ever, cause any harm -- just a lot of annoyance. Experts suggest that the greatest harm associated with head lice comes in the well-meaning but misguided use (and overuse) of toxic treatments to eradicate them.

6. **True or False:**
To successfully treat head lice, you need to see a doctor.

**False:** Head lice can be successfully treated at home with over-the-counter lice-killing shampoo and diligent combing. If you are unsure whether your child has head lice, confirm it with your child’s pediatrician or with a school nurse. Once you’re sure you’re dealing with live head lice, over-the-counter (OTC) remedies like anti-lice shampoos generally work, but nothing is 100% effective. You must apply two applications of medicated shampoo, the second one seven to 10 days after the first. In between, comb hair daily with a special nit comb. **Combing is the most important weapon you have to get rid of head lice.**

7. **True or False:**
You can use vinegar or mayonnaise as home remedies for treating head lice.

*This may be a True or False -- depending on whom you talk to.*
There’s no scientific proof that home remedies such as mayonnaise, white vinegar, or tea tree oil work in getting rid of lice, but many parents say it worked for them. Advocates say that mayonnaise -- applied thickly and then kept on overnight under a shower cap -- smothers the lice, while vinegar destroys the glue that attaches nits to the hair. Pediatrician Steven Parker, MD, a WebMD consultant, says that as long as there's no risk involved in the assorted home remedies touted as head lice cures, there's no harm in giving them a try.
8. **True or False:**
You must get rid of every last head louse, or another infestation will occur.

**False:** Head lice and eggs in bedding, on towels, and around the house, usually die within days without a human host. So while you don’t have to worry about getting all the nits and adult lice from every crevice in the house, you do want to launder everything you can that has come in close contact with someone with lice: Bedding, hats, and towels. You’ll also want to vacuum spots where an infested person usually sits or lays. Don’t forget the carseats.