

Voyageur Elementary **Health & Wellness Update**

Dear Parents/Guardians,

HEAD LICE

As we move into our first month of school, so does head lice! Any child can become infected with head lice as they are easily transmitted from one person to another by close contact, or by sharing combs, hairbrushes, and hats. Head lice do not carry disease, nor does their presence mean that the child is dirty. The only harmful effect from head lice is the way children and adults react. Negative reactions to head lice can harm children's self-esteem and result in their isolation from others. We recommend parents/guardians are diligent in checking their child regularly. If you require a treatment kit, please come to the school office and pick one up for free. Please see included attachment from Northern Health.

HAND, FOOT and MOUTH DISEASE

We have a few cases of Hand, Foot and Mouth Disease currently at the school. Once a person is infected and sick, they can be contagious and spread the virus for about 7 to 10 days. We recommend parents/guardians remind their children of the importance of hand washing and good hygiene. Voyageur staff will ensure our common surfaces and shared toys are properly disinfected. Please see included attachment from HealthLinkBC.

OFFICE CHECK IN

Please remind your child to check in at the office in the morning if they are late. If you are taking your child early, please let the office know.

CELL PHONES

Reminder cell phones are NOT allowed in use from bell to bell at Voyageur. Cell phones are a huge distraction to students and teachers. Please do not text or call your child on their cell phones during school hours. If you need to get a hold of your child, please call the office, they would be happy to help you. (250) 992-2613

HEALTH CHECK

Reminder to parents/guardians to please do a health check of your student before sending them to school if they are feeling unwell. Please stay home to rest and get better before returning!

BEAR AWARE

Quesnel's influx of bears this year is unlike anything in recent memory. School is starting next week and we know that many students walk or bike to school. This is a good time to have regular conversations with your children about bear and wildlife awareness. Some tips are for kids to walk directly home after-school to check in with you, to walk in groups, make noise and to not eat snacks while walking or riding. Children should not approach any wildlife.

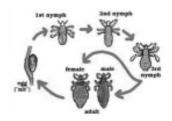
Many thanks, Voyageur Elementary School

The facts about head lice

Life Cycle of Lice

- · Only adult lice can crawl off the head
- Adult female glues the nits (eggs) to the hair strands.
- It then takes the nits 7-10 days to hatch.
- The nits hatch into mini adult lice called nymphs. Nymphs can't lay nits (eggs). They also stay on the head until they mature.
- It takes the nymphs 10-14 days to 'grow-up' before they are able to lay eggs.
- Once the nymph changes to an adult lice it can live on the head for about 20 days, laying 4 or more eggs a day.

The Life-Cycle of the Head Louse



Checking for Nits:

- Nits are eggs of the adult lice and are much easier to find than the lice.
- They are very small about 1/3rd the size of a sesame seed.
- These silvery oval specks are "glued" very tightly to the hair strand and need to be pulled off with fingers or a fine tooth comb.
- They are found close to the scalp usually behind the ears and at the back of the neck.
- If found more than 1/4 inch away from the scalp it is probably an empty shell.
- Sometimes nits are mistaken for dandruff flakes. Nits don't flick off like dandruff.
- It takes 7-10 days for a nit to hatch. If you are combing out lice every 3-4 days for 2 weeks, only empty egg shells remain. Nit picking is not mandatory but highly recommended.

Checking for Lice:

- Check for lice when the hair is wet with conditioner, because they are easily missed in dry hair.
- Lice are not able to move off the head until they are nearly full grown, which takes at least 7 days. Children do not need to be excluded from school or daycare while wet combing is in process.

Treatment Options

Treat only those household members who are infested - treat all infested household members at the same time.

Treatment options B and C are more effective if done in combination with Option A Wet combing.



OPTION A: HAIR CONDITIONER/WET COMBING

Wet combing is based on the following principles: Wet combing every 3-4 days breaks the life cycle of the louse by systematically removing the lice before they are full grown and able to reproduce or move to another head.

Step 1: Wash hair with ordinary shampoo. Rinse hair and apply 1/2 cup of crème rinse/conditioner.
Untangle hair with a wide tooth comb. Do this in the tub, over the sink or sitting up with a towel around the shoulders.

Step 2: Leave crème rinse in hair.

Step 3: Divide the hair into sections. Comb the hair with a metal nit comb. Place the teeth of the comb next to the scalp and firmly draw it through to the end of the hair. If the comb tugs the hair, either you have the comb upside down or too little conditioner on the hair. Check the comb for lice after each stroke and rinse the comb. This procedure will take approximately ½ hour.

<u>Step 4:</u> Rinse the hair. Leave it dripping wet. Untangle with a wide tooth comb. Repeat the entire procedure again.
<u>Step 5:</u> Repeat steps 1-4 every 3-4 days for two weeks.
i.e.: Day 1, 5, 9 &13 This will remove the lice as they hatch and break the cycle.

Days to Wet Comb

1		3		5	6	7
8	9	10	11	12	13	14

OPTION B: HEAD LICE SPRAY

Head lice spray, e.g. Nyda, is used because it has been tested and deemed safe and effective - it works by suffocating and killing the head lice and nits. This spray is available without a prescription at any pharmacy. This option involves using two treatments, 8 - 10 days apart. Use the recommended amount, and apply product exactly as directed.

<u>Step 1:</u> Use a clean towel to protect the eyes and clothes of the person being treated.

Step 2: Apply on dry hair. Thoroughly massage into the hair



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and scalp, especially the sides of the head and the nape of the neck, and make sure that all the hair is thoroughly saturated with the product. Leave on for 30 min.

Step 3: Use a lice comb to remove the suffocated lice and larvae.

After treatment is applied, allow hair to dry for at least 8 hours before rinsing and shampooing.

Repeat the treatment 8 - 10 days after the first treatment, following the steps above.

OPTION C: HEAD LICE SHAMPOO or RINSE

Medicated Shampoos, eg. Kwellada, Nix, R&C

This option involves using 2 (or 3) treaments with a special head lice shampoo, 7 to 10 days apart. The shampoo is available without a prescription at any pharmacy. It kills the head lice but not the nits. There could be resistance or a heavy infestation if live, active lice are seen 24 to 48 hours after the first treatment. If this is the case, immediate treatment using a different product is recommended.

<u>Step 1:</u> Apply product exactly as directed. DO NOT rewash hair for 1-2 days following treatment, or use conditioner for 1 week.

<u>Step 2:</u> Remove nits with a metal nit comb. Check hair daily and remove any nits found.

<u>Step 3:</u> Re-treat hair with head lice shampoo 7-10 days after the first treatment and continue to check hair, removing any nits found.

Medicated Rinse, e.g. Resultz

The rinse works by dissolving the natural wax that covers the exoskeleton of head lice, dehydrating lice and causing them to die. This rinse is available without a prescription at any pharmacy. Use the recommended amount and apply exactly as directed.

<u>Step 1:</u> Use a clean towel to protect the eyes and clothes of the person being treated.

<u>Step 2:</u> Apply the recommended amount, on dry hair, based on the above mentioned quantities. Thoroughly massage into the hair and scalp, especially the side of the head and the nape of the neck, and make sure that all the hair is thoroughly saturated with the product.

<u>Step 3:</u> Leave on for 10 minutes, then rinse thoroughly with warm water. Wash hair with normal shampoo if desired. The feel of the product may stay in the hair after rinsing. Use a metal nit comb to remove the dead lice, and as many of the nits as you can. Repeat the treatment 7 - 10 days after the first treatment, following the steps above.



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Preventing the spread of head lice

Head lice can spread very quickly, especially in the school environment. It is important to inform friends, family and school mates of any one who has head lice.

Check your children's hair <u>routinely</u>. If someone comes in contact with lice check the entire family.

- Each person in the family should use their own towel and brush.
- If your child has long hair tie it back or braid it.
- Articles that are more likely to spread lice are hats and other headgear, furry coat collars, pillows, scarves, combs, brushes and hair accessories.
- The above items should be washed in hot water and dried on the hot cycle or sealed in a plastic bag for 10-14 days or placed in the freezer (or freezing temperature) for 48 hours.
- Soak brushes and other hair accessories in hot water for 10 minutes.
- There is no evidence that a major clean-up of the house is necessary or effective in getting rid of head lice.
- Have children store their hats inside coat sleeves when not being worn.

Re-infestations

Re-infestation almost always results from head to head contact with a person who has lice (re-infestation from the environment is very rare). If hair is clear after treatment, then head lice are found later, re-infestation has probably occurred.

Lice:

- Are tiny wingless insects that live on the human scalp.
 They do not transmit disease and are not a health hazard.
- They are small, about 3-4 mm (1/8th of an inch) in length.
- · Vary in color from white to gray to brown.
- Move very quickly and are rarely seen.
- Feed on human blood in order to survive, head lice off the human host will starve
- They do not jump or fly.
- Lice spread quickly by crawling from head to head through close personal contact or through sharing of personal articles such as hats, other head gear, hair brushes, scarves and other hair accessories.

Resources

BC Health Guide 24 hour health guide Nurse Line: 811 • healthlinkbc.ca

NH Recommended Head Lice Management guidelines: available at your local health unit

www.headlice.org www.caringforkids.cps.ca/whensick/headlice.htm www.hsph.harvard.edu/headlice.html

BC Health Files

http://www.gov.bc.ca/health/ http://www.healthlinkbc.ca/healthfiles/index.stm





Hand, Foot and Mouth Disease

What is hand, foot and mouth disease?

Hand, foot and mouth disease is caused by certain types of viruses. It is most common in children under 10 years of age, but older children and adults may also get the disease. Most cases occur in the summer and early fall.

What are the symptoms?

Symptoms start 3 to 5 days after contact with an infected person. The first sign of infection may be a mild fever, sometimes with a runny nose or sore throat, tiredness and loss of appetite. The fever usually lasts 1 to 2 days.

About 2 days after the fever starts, small painful blisters may develop on the inside of the mouth, on the tongue or on the gums. A day or 2 later, small red spots may appear on the palms of the hands, soles of the feet and sometimes on the buttocks. These red spots may turn into blisters. The spots and blisters usually go away after about 7 to 10 days.

Peeling skin and loss of fingernails or toenails have also been reported, mostly in children, within weeks of having hand, foot and mouth disease. However, it is not known if these are the result of the disease. The skin and nail loss is temporary.

Not everyone who has hand, foot and mouth disease will get all of these symptoms. It also is possible to have the infection and have no symptoms.

How is it spread?

Once a person is infected and sick, they can be contagious and spread the virus for about 7 to 10 days. The virus can be spread through close personal contact such as kissing, or sharing drinking cups, forks, or spoons. It can also spread through droplets in the air when an

infected person coughs or sneezes. You can be infected by inhaling these droplets or touching objects contaminated with them. You can also be infected by touching surfaces contaminated with fluid from the blisters or fecal matter. The virus can stay for up to several weeks in the bowels of an infected person and can be spread during that time.

Pregnant women who become infected with the virus shortly before they give birth may pass the virus to their baby. Newborn babies infected with the virus usually have a mild illness, but in rare cases the disease can be more severe. There is no clear evidence that infection during pregnancy will cause harm to an unborn baby.

Hand, foot and mouth disease can spread easily in child care settings and other places where children are close together if proper hygiene practices are not used.

How can you prevent the disease?

Good hygiene during and after infection is very important in preventing the spread of hand, foot and mouth disease. It is possible you or your child may be contagious for several weeks after the blisters and sores have healed because the virus may remain in the feces.

To help reduce the spread of hand, foot and mouth disease, wash hands often with soap and warm water. Teach your child to sneeze or cough into a tissue or their inner arm where the elbow flexes. This prevents the spread of airborne droplets. Encourage your child to throw tissues directly in the garbage after use and to wash their hands again.

Your child may continue to attend daycare if they feel well enough to take part in activities. The risk to other children is not great if proper hygiene practices are followed. Take extra care to wash hands and clean surfaces thoroughly after changing diapers and before serving or eating food around children and child care settings.

Common surfaces and shared toys should be cleaned with soap and water and disinfected with a bleach solution. You can make a sanitizing solution for use on surfaces by mixing the following together:

 Mix 15 mL (1 tablespoon) of household bleach into 1 litre (4 cups) of water.

A weaker solution of bleach should be used to disinfect toys:

 Mix 5 mL (1 teaspoon) of household bleach into 1 litre (4 cups) of water.

Continue to carefully practice proper hygiene for several weeks or months after your child feels better.

For more information on hand washing, see <u>HealthLinkBC File #85 Hand Washing for</u> Parents and Children.

How is it treated?

When necessary, the fever from hand, foot and mouth disease can be reduced with acetaminophen (such as Tylenol®). Ask your health care provider the dose to use, or read the instructions on the package or bottle carefully. Antibiotics will not help treat or cure this disease.

Acetaminophen or Tylenol® can be given for fever or soreness. ASA or Aspirin® should NOT be given to anyone under 20 years of age due to the risk of Reye Syndrome. For more information on Reye Syndrome, see HealthLinkBC File #84 Reye Syndrome.

Blisters will heal better if they are left alone, so do not pop them. Because the mouth sores can be painful, your child may not want to eat or drink.

Give your child cold, bland liquids such as milk or water. Do not give fizzy or tart drinks such as pop or fruit juice. Avoid acidic and spicy foods, as these may sting. Give your child cool and soft foods such as bread, noodles, or a peanut butter and jelly sandwich.

Remember, if you think your child has hand, foot and mouth disease, make sure to follow proper hygiene practices such as frequent hand washing, to prevent it from spreading to others.

