Define situation/condition | *First line management of uncomplicated pediculosis pubis*
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Criteria for inclusion

- Direct clinical visualization of adult lice and/or eggs
- Known intimate contact with person with pediculosis pubis
- Patients under 16 who are Gillick/Fraser competent

Criteria for exclusion

- Complicated presentations, e.g. complicated by accompanying inflammatory skin conditions

Action if excluded

Refer to Medical Practitioner

Contraindications

- Known allergies to Malathion 0.5%
- Co-existing inflammatory skin conditions

Action if contraindications

Refer to Medical Practitioner

Action if patient declines

Document in patient’s notes and refer to medical practitioner
## 2. Characteristics of staff

<table>
<thead>
<tr>
<th>Qualifications required</th>
<th>RGN or RN (adult) and currently employed to work in GU Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional requirements</td>
<td>ENB 8103, 932, 276/5 or commensurate experience</td>
</tr>
<tr>
<td></td>
<td>• Clinical competence in the history taking, clinical examination/assessment and screening; required to enable the accurate diagnosis and treatment of pediculosis pubis</td>
</tr>
<tr>
<td></td>
<td>• Ability to recognize need to offer screening to contacts of pediculosis pubis infection</td>
</tr>
<tr>
<td></td>
<td>• Evidence of continuing professional development in GU Medicine and/or the GUM nurse role</td>
</tr>
<tr>
<td></td>
<td>• Minimum of 1 year experience of working within the speciality in the preceeding 3 years</td>
</tr>
<tr>
<td></td>
<td>• Knowledge base of the interactions of Malathion 0.5% with other drugs, and other contra-indications for issuing Malathion 0.5%</td>
</tr>
<tr>
<td></td>
<td>• Receiving Clinical Supervision and/or review of casenotes by a senior Medical Practitioner or Nurse, on an ongoing basis</td>
</tr>
<tr>
<td>Continued education &amp; training requirements</td>
<td>• Commitment to continuing professional development identified through Clinical Supervision and appraisal</td>
</tr>
<tr>
<td></td>
<td>• 5 study days or the equivalent in hours, of study related to the field of GU Medicine; every 3 years.</td>
</tr>
<tr>
<td></td>
<td>• Recommended attendance and participation in the monthly educational/audit half day at Portsmouth GU Medicine department</td>
</tr>
</tbody>
</table>
### 3. Description of Treatment

<table>
<thead>
<tr>
<th>Name of Medicine</th>
<th>Malathion 0.5%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal status of medicine</td>
<td>P</td>
</tr>
<tr>
<td>Dose</td>
<td>One bottle</td>
</tr>
<tr>
<td>Route</td>
<td>Topical application to all hair covered areas in genital region, extending on to legs and abdominal area if infested also</td>
</tr>
<tr>
<td>Frequency</td>
<td>Up to two applications one week apart</td>
</tr>
<tr>
<td>Total dose/number of doses</td>
<td>Maximum of two applications over a period of eight days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Drug</th>
<th>Contraindications/ Cautions</th>
<th>Common Adverse Effects</th>
<th>Interactions</th>
<th>Notes</th>
</tr>
</thead>
</table>
| Malathion | # Known allergies  
# Broken/inflamed skin areas | # Skin irritation | Nil | The most suitable preparation of Malathion is available in an aqueous solution |
<table>
<thead>
<tr>
<th>Follow up treatment</th>
<th>• No follow-up required, return only if persists</th>
</tr>
</thead>
</table>
| Written/verbal advice for patient | • Information regarding aetiology and transmission of pediculosis pubis with leaflet  
• Advise to apply to genital area after a lukewarm bath or shower  
• Advise may be washed off after 12 hours  
• Advise to wash recently worn clothing and used bedding and towels, a 40 degree wash will suffice, clean bedding will be required once the lotion is applied  
• Advise regarding discussions with partner and offer screening and treatment for hem  
• Discussion regarding safer sex in general for future sexual health |


| Specify method of recording supply and/or administration | The following will be recorded in the patient’s clinical records:  
• The basis for the diagnosis and/or treatment  
• Malathion 0.5% dispensed  
• The route of administration  
• The frequency of administration  
• The date of issue  
• The signature of the person administering the Malathion 0.5%  
• The qualification of the person undertaking the administration/issuing |
<table>
<thead>
<tr>
<th>Procedure for reporting ADR's to Medical Practitioner</th>
<th>Document in the patient’s clinical records and refer to a Medical Practitioner</th>
</tr>
</thead>
</table>

- **Management of Group Directions:**

  Group direction developed by: Mandy Tyson – GU Clinical Lead/Nurse Specialist
  Dr. Elizabeth Foley – Consultant in GU Medicine
  Zoe Wells – Directorate Pharmacist

  Authorizing Doctor/s: Signature
  Dr Elizabeth Foley – Consultant in GU Medicine
  January 2003

  Review date: January 2005

  Senior Nurse Signature
  Gill Kennett – Operational Manager

  Clinical Directorate Pharmacist Signature
  Zoe Wells

  Approved by Nursing Policy Group Signature

  Approved by Clinical Standards Group Signature
The group direction is to be read, agreed to, and signed by all staff it applies to. One copy is to be given to the health professional, another kept in the department.

_____________________________________________________________________________

I have read the group direction and agreed to use it in accordance with the criteria described.

Name:  
Signature:  
Date:  
Review date:  

Name:  
Signature:  
Date:  
Review date:  

Name:  
Signature:  
Date:  
Review date: