



Pediculosis: An Unusual Cause of Iron Deficiency Anemia in Children

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To the Editor: Pediculosis of head is a major public health concern in school going children caused by the infestation of *Pediculus humanus capitis* (head lice) [1]. Head lice is an obligate ectoparasite surviving on human blood with 0.08–0.7 ml of blood loss/day [2]. Heavy infestations can cause large volume of blood losses leading to severe anemia. The common causes of anemia in school going children are iron deficiency anemia (IDA), vitamin B12- folic acid deficiency and anemia of chronic disease [3]. We report an 11-year-old girl who had weakness and easy fatigability for a month with no major illness in the past; she attained menarche at 10 y of age with normal menstrual cycles. Though she was picky eater but mainly had non-vegetarian diet. Upon examination her growth was appropriate for her age (weight-25th centile, height- 50th centile as per WHO growth chart). There were signs of anemia. On scalp examination heavy burden of head lice was noted. She had history of head lice since a year for which she received multiple modalities of treatment with not much improvement. Laboratory reports showed hemoglobin: 30 g/L, white blood cells: $4.1 \times 10^9/L$, platelets: $345 \times 10^9/L$, red blood cells: $3 \times 10^{12} /L$, blood film showed microcytic hypochromic anemia, ferritin: 0.9 ng/ml, total iron: 12 mcg/dl, total iron binding capacity: 655 mcg/dl, transferrin saturation: 1.9%, serum albumin: 4.8 g/dl and serum creatinine of 0.4 mg/dl. The stool was negative for occult blood and fecal calprotectin. Serum anti tissue transglutaminase antibody was negative. After complete workup, her iron deficiency anemia (IDA) was attributed to chronic pediculosis of head. Management of pediculosis

needed the removal of live lice and nits for which due to failed treatments in past, parents opted to shave her hair down in spite of its potency of psychosocial trauma [4]. She received parenteral ferric carboxy maltose 1000 mg for correction of IDA. Post treatment Hb was 11.8 g/dl, ferritin 29.3 ng/ml. This report underscores the importance of pediculosis when evaluating IDA in children.

Declarations

Conflict of Interest None.

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