

**Table 7: Summary of Recommendations in Included Guidelines**

| Recommendations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Strength of Evidence and Recommendations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
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| Salavastru, 2017 <sup>16</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <p>Evidence-based guideline regarding the management of patients with pediculosis pubis.</p> <p>Oral ivermectin was recommended as a second-line therapy for the treatment of patients with pediculosis pubis:</p> <ul style="list-style-type: none"> <li>• “Ivermectin was reported as efficient but different dosages are used. In a series of pediculus pubis cases, the dosage used was 250 µg/kg orally, repeated after 1 week [level of evidence IV; grade C]. A randomized clinical trial demonstrated that in difficult-to-treat head lice the effective dosage of Ivermectin was 400 µg/kg orally, repeated after 1 week. Ivermectin should not be used in children weighing &lt;15 kg.”<sup>16</sup> (p1427)</li> </ul> <p>Oral ivermectin was also recommended for the treatment of lice in the eyelashes:</p> | <p>The levels of evidence were categorized as follows:<sup>16</sup></p> <p>Ia Evidence obtained from meta-analysis of RCTs.</p> <p>Ib Evidence obtained from at least one RCT.</p> <p>IIa Evidence obtained from at least one well-designed study without randomization.</p> <p>IIb Evidence obtained from at least one other type of well-designed quasi-experimental study.</p> <p>III Evidence obtained from well-designed non-experimental descriptive studies such as comparative studies, correlation studies, and case control studies.</p> <p>IV Evidence obtained from expert committee reports or opinions and/or clinical experience of respected authorities.</p> <p>Recommendations were graded as follows:<sup>16</sup></p> <p>A Requires at least one RCT as part of the body of literature of overall good quality and consistency addressing the</p> |

| Recommendations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Strength of Evidence and Recommendations                                                                                                                                                                                                                                                                                                  |
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| <ul style="list-style-type: none"> <li>“Ivermectin oral 200 µg/kg as two doses 1 week apart [level of evidence IV; grade C recommendation].”<sup>16</sup> (p1427)</li> </ul> <p>Topical ivermectin was not mentioned as a first- or second-line therapy; however, it was mentioned under other therapies for the treatment of patients with pediculosis pubis:</p> <ul style="list-style-type: none"> <li>“Ivermectin topical was reported as effective and generally well-tolerated for pediculosis pubis [level of evidence IV; grade C recommendation].”<sup>16</sup> (p1427)</li> </ul> | <p>specific recommendation.</p> <p>B Requires availability of well conducted clinical studies but no RCTs on the topic of recommendation.</p> <p>C Requires evidence from expert committee reports or opinions and/or clinical experience of respected authorities. Indicates absence of directly applicable studies of good quality.</p> |

RCT = randomized controlled trial