

Lyme Disease

Lyme disease is *endemic* in Connecticut. Unlike *epidemic*, which implies that some new condition has just broken out in a community, or an old condition has jumped up to an unusually high frequency, *endemic* implies that a condition is always present, at more or less constant levels, within a population. While an epidemic often calls for aggressive control measures, endemic conditions tend to be threats we need to learn to live with. There are efforts underway to eliminate or minimize Lyme, along with other tick-borne disease such as ehrlichiosis and babesiosis, as threats to us. But until or unless such efforts prove successful, we had best defend ourselves against Lyme disease.

Lyme is a bacterial infection transmitted through the bite of the deer tick. Unlike dog ticks, deer ticks are very tiny, with distinctive markings on their backs. Distinguishing among ticks however is probably a less reliable means of avoiding infection than preventing dangerous tick bites. Not all tick bites can transmit Lyme disease. Ticks are most likely to be infected in the nymph stage in the spring, and the adult stage in the fall; even then, only about one third of the ticks are carriers. To transmit the infection, a tick needs to remain imbedded for nearly 48 hours. Therefore, any tick you may find on you needs to be engorged with blood to represent a Lyme disease risk. If you find a tick crawling on you or your clothes, or detect an unengorged (flat) tick just settling in for a meal, you need not worry about Lyme disease. Antibiotics are not recommended and are not needed

for a tick bite. Even if the tick does become engorged, antibiotics are generally not prescribed unless evidence of infection develops. The one exception to this is pregnancy; if you are pregnant and find an engorged tick on you, you should certainly inform your doctor right away so that antibiotics can be prescribed. The take home message: a tick bite without evidence of infection does not require medical attention unless you are pregnant.

Risk of exposure to ticks varies with residence and activity. Living near the woods increases risk. Ticks are most apt to be contacted in tall grass at the edge of the forest or lining a trail. Hiking places one at risk. Having dogs increases risk, as they often carry ticks into the house.

A variety of methods can reduce risk. If you have dogs, they should be treated against ticks and fleas with a product like ProTICall (we use that on our dogs, and it works very well). Protective clothing while hiking is a reasonable precaution, but may be unpleasantly hot in the summer. Use of insect repellent may also be helpful.

If you have children who play outside on a lawn, an evening tick check at bath time is prudent. Be sure to check in their hair as well. For both children and adults, vigorous washing after outdoor activities is likely to remove any ticks before they can become solidly embedded, or detect any that have already done so. Any embedded ticks may be withdrawn



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with tweezers with slow, steady pressure. An alternative, which eliminates the risk of leaving the mouth parts behind, is to cover the tick with mineral oil and wait for it to disengage; I have personally never had the patience for this method.

If Lyme is contracted, it is best treated early. A rash after a tick bite, an unexplained rash, an unexplained flu-like illness in summer, or unexplained joint pains are all characteristic of early infection. If any of these occur, contact your doctor; effective treatment is available.

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Preventive Medicine Column

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