

Lyme disease:

Lyme disease is on the increase. From the years 1995-2005 in the United States, the number of reported cases has rose from about 13,000 to 23,000. With the numbers almost doubling, this raises concern to people living in tick infested areas. In 2005 the national average was 7.9 cases per 100,000. In the same year the top ten Lyme disease affected states averaged 31.6 cases per 100,000. In 2005 Sudbury had 29 reported cases which make an average of 160 cases per 100,000 people. This number may be shocking. One must take into affect that some areas may report more cases than others. The fact still remains, there is a large amount of reported cases of Lyme disease in Sudbury and precautionary measures must be taken before and after going outdoors, especially in the spring and early summer months.

History in Sudbury?

Between 1987-1991 deer tick studies were conducted resulting in no ticks found. In 1992, an East Middlesex Mosquito Control Project worker conducting tick drags found a deer tick on him. In 1995 Deer Ticks started to slowly appear in the Sudbury area. In 1997

there were 41 deer ticks found in mouse houses set in Bedford, Framingham, Sudbury and Wayland.

From 2002-October of 2007 there has been a disproportionate amount of people between the ages of 36-65 affected by the disease that accounts for an average of 46.1% of Sudbury cases. Children between the ages of 0-10 yrs represent on average, 25% of cases between 2002-October 2007.

Where do Ticks Live?

- Ticks prefer environments that are moist, shaded, and are likely to have leaf litter and low-lying vegetation in wooded, brushy, or overgrown grassy areas. Particularly in the spring and summer, nymphal ticks feed.

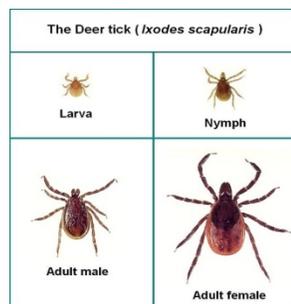


Image from the American Lyme Disease Foundation
www.aldf.com/images/lscapulari_sposter.JPG Note: Picture not exact size

How can you protect yourself?

-Contracting Lyme disease is most common during the late spring and early summer months. This

would generally be May through August. If you do enter areas where ticks live, wear light colored clothing so the dark coloring of the tick is noticeable against your clothes. Tucking your pants into your socks is a good idea to avoid the tick jumping and attaching onto your leg. Ticks are usually close to the ground and wearing high rubber boots will also allow for additional protection. If you want to reduce your risk of attachment, apply insect repellents containing DEET to clothes and exposed skin, and apply permethrin to the clothes. DEET can be used safely on children and adults.

How do I check for ticks after an afternoon outdoors?

-The transmission of the bacteria that causes Lyme Disease, Borrelia burgdorferi, from an infected tick is likely to happen before 36 hours from when the tick attached, usually around 24. Daily checks for ticks and immediate removal will prevent the infection of the bacteria. If a tick is embedded in the skin, they should be removed with fine tipped tweezers. THINGS NOT TO USE WHEN REMOVING A TICK: petroleum jelly, hot match, nail polish, and other products. Using nail polish or other

asphyxiates could cause the tick to regurgitate disease pathogens into the wound.

After cleaning the area with rubbing alcohol, grasp the tick firmly and as close to the skin as possible. Steadily pull the tick's head first and foremost along with the body away from the skin. The bacteria that cause LD is contained in the tick's midgut and salivary glands. After removal, clean the area with an antiseptic. Do not crush the tick between your fingers nor touch it with bare hands, flush it down the toilet.

What happens if I am bitten?

-If you are bitten, your physician may give you antibiotics- LD most often, but not always, shows up as a bull's eye like rash. Some non specific symptoms may be fever, malaise, fatigue, headache, muscle and joint aches.

Lyme disease is treated with antibiotic treatment for 3 to 4 weeks with doxycycline or amoxicillin and is generally effective against the disease in its early stages. Cefuroxime axetil or erythromycin can be used for persons allergic to penicillin who cannot take tetracyclines.