

# Prevention article & radio Interview

The Prevention article & radio interview with Pat Smith on Health in 30 with Barbara Ficarra, RN WRCR AM 1300 Radio Rockland. [Listen here!](#)

## Lyme Disease: A Tick Check in Time Might Save You From Lyme

*by Patricia V. Smith*

According to the Centers for Disease Control and Prevention (CDC), Lyme is the most prevalent vector-borne disease in the United States with numbers of reported cases averaging 22,000+ annually. Only 10% of cases that meet the CDC's surveillance criteria are reported, meaning about 220,000 new cases develop yearly.

The CDC says individuals who live or work in residential areas surrounded by tick-infested woods or overgrown brush, who work or play in their yard, who participate in recreational activities such as hiking, camping, fishing and hunting, or engage in outdoor occupations, such as landscaping, brush clearing, forestry, and wildlife and parks management are at risk to acquire Lyme disease.

In the eastern US, the deer tick is the primary carrier of the disease. The deer tick and several other types of ticks including the lone star and the dog tick can carry and transmit a number of other tick-borne diseases (TBD) including anaplasmosis, babesiosis, Ehrlichiosis, bartonellosis, Rocky Mountain spotted fever, tularemia, tick paralysis and Lyme-like STARI. One tick bite may infect you with several diseases simultaneously.

A single tick can lay thousands of eggs. Tiny almost

transparent deer tick larvae hatch, generally uninfected, from eggs in the spring to feed upon the white-footed mouse, chipmunk or other small mammals that carry Lyme and other TBDs. After feeding, they may be infected with Lyme. The larvae enter the next stage, nymphs about the size of poppy seeds. They again feed and again may acquire the disease. Less than 50% of people with Lyme remember a tick-bite, probably due to the small size of the nymphal tick.

Nymphs prefer to feed on smaller animals but will feed on larger animals, including domestic pets and humans. Nymphs emerge in the fall as adults. Adult female *Ixodes scapularis* (deer) ticks are reddish in color and the size of sesame seeds; males are smaller and brownish-black. Before mating, female adults will feed, frequently on deer. Fed ticks may swell to the size of a small grape. They fall off after several days of feeding. Ticks may become active above 35-40 degrees.

Some insects may carry the Lyme bacteria, but no proven transmission from them has been proven. Lyme bacteria can cross the placenta causing birth defects or fetal death. The DNA of Lyme bacteria has been found in breast milk, but transmission in humans has not been proven.

Lyme bacteria can survive blood banking conditions, but no blood-borne transmission has been documented. The Red Cross no longer accepts blood donations from those diagnosed with chronic Lyme disease.

Prevention strategies include avoiding edges of wooded paths where ticks on low lying vegetation may be awaiting a blood meal, clearing away underbrush, leaves, and other

debris under which ticks live; keeping lawns mowed and raked; putting clothes in the dryer for 30-40 minutes to kill ticks; wearing light colored clothing; and tucking pants into socks.

Be informed about repellents or other chemicals that kill

ticks if you choose to use them. Carefully follow the manufacturer's directions for DEET-based products for use on exposed skin and/or permethrin-based products for clothes which can be washed several times retaining product protection. Chemical free clothing such as Rynoskin,<sup>™</sup> tight-weave long underwear-type clothing, and BUZZ OFF,<sup>™</sup> treated clothes, may be options.

The longer a tick is attached, the greater the chance of disease transmission. A tick check in time might save you from Lyme and from other tick-borne diseases, too. Ticks attach anywhere, but particularly check creases—elbows, knees, groin, and also hairy areas of the body.

Improper tick removal increases infection risk by causing the tick to inject its contents into you. Do not squeeze, twist or burn a tick or put any substance on it. Grasp it with pointed tweezers at the "head" end as close to your skin as possible and pull straight out. Apply antiseptic to the site. Speak with your doctor. Ticks can be saved for testing for TBDs. Check with health departments or tick-testing laboratories for costs and instructions.

According to the CDC, a Lyme disease diagnosis should be a clinical one with testing used as an adjunct. Lyme literate physicians understand that the ELISA test is not accurate, and you can test negative and still have the disease. Early diagnosis and appropriate treatment may prevent the development of chronic disease.

Symptoms can develop days, months or longer after a tick bite and you can be reinfected through another bite. Maybe less than 50 % of those who develop the disease get a bull's-eye rash; some have other rashes or no rash; many develop a flu-like illness with muscle aches, joint pain and/or swelling, malaise, fever, and headaches. Babesiosis is usually milder at onset, whereas Ehrlichiosis often develops quickly with the victim spiking a high fever. It has a relatively high fatality

rate, so be sure to have the physician check for it.

Lyme can attack every system in the body e.g., cardiac, ophthalmologic, musculo-skeletal, gastrointestinal, and central nervous systems. It mimics many diseases and can be misdiagnosed as ALS, MS, lupus, fibromyalgia, chronic fatigue, Alzheimer's, even autism. Remember, prevention is the best strategy.

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For more information go to [lymediseaseassociation.org](http://lymediseaseassociation.org).