

## TICKS

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east coast, but is now seen, albeit far less frequently, in California and other parts of the west coast. The disease is named after the town of Lyme, Conn., where a 1975 outbreak of juvenile arthritis was eventually linked to the bacteria *Borrelia burgdorferi*. Transmitted by the deer tick *Ixodes scapularis* (dammini), this disease is now the most common tick-borne disease in the Northern Hemisphere.

Although the overall frequency is unknown it is estimated that approximately 10,000 cases of Lyme disease occur annually with 99% occurring in the northeast and Midwest and between the months of May to August.

Lyme disease is an affliction that affects multiple systems and occurs in three stages. Briefly, stage one involves a characteristic rash known as erythema migrans that very often resembles a target. This unusual rash occurs within one week of the initial tick bite and can last as long as a year if not treated. Stage two occurs when the bacteria starts invading the rest of the body causing a plethora of problems. Fever, fatigue, malaise, headache, and swollen, tender lymph nodes, are just a few of the symptoms that can be expected. This stage can also involve severe musculoskeletal, cardiovascular and nervous system manifestations and

is often confused with other terrible multi-system disorders. After a year or so the third stage is characterized by debilitating arthritis and nervous system involvement.

Diagnosis of Lyme disease is difficult as it is not always visible in the blood and no test exists to make a definitive diagnosis. The initial rash can help in making the diagnosis. Treatment with antibiotic therapy can be effective at shortening the duration of Lyme disease but even with treatment long term symptoms can occur.

## Relapsing Fever

As its name implies relapsing fever causes a recurring high fever, which can be confused with other flu-like illnesses. Caused by a relative of the bacteria responsible for Lyme disease, relapsing fever is not as severe but can cause significant problems. Severe headache, weakness, chills, nausea and vomiting are common and make the diagnosis difficult. In fact, the only way to make the diagnosis is visualizing the bacteria in the blood under a microscope. That's how the stellar folks at Mammoth hospital made the diagnosis in my wife's case!

The tick which carries *Borrelia hermsii* is a soft tick of the species

*Ornithodoros*. Unlike deer (hard) ticks, these buggers are virtually undetectable, feed briefly and at night and usually leave no signs of a bite. Incredibly, they can go many years without a blood meal — making them a formidable foe. This form of relapsing fever can have long-term musculoskeletal and cardiovascular sequelae, but is rarely fatal. Like Lyme disease, relapsing fever is treated with antibiotics but usually has less long term problems. The most fascinating aspect of relapsing fever is the bacteria's ability to change its structure making it difficult for antibodies to mount a response and accounting for the recurring and relapsing nature of this disease. In Borg terms, "Resistance is futile!"

Other tick-borne illnesses exist, but will be listed for the sake of brevity and

sanity. Rocky Mountain spotted fever, Eastern spotted fevers, Q fever, Colorado tick fever and Tularemia are just a few.

Some precautions you can take to avoid tick-borne illnesses: Wear protective clothing such as long pants (tucked into boots or socks), long sleeves and a hat in tick-prone areas. Insect repellants such as DEET and permethrin are effective deterrents, but permethrin is a better choice. Regularly inspect for ticks and remove them by grasping them closely to the skin with a tweezers, pulling with steady pressure without crushing or squeezing the body. Disinfect after removal. If bitten, keep the tick and seek the advice of your friendly neighborhood medical professional.

For more on ticks and the disease they carry visit [www.CDC.org](http://www.CDC.org).



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