



# VITALS

A Weekly Safety Newsletter For Medical Transport Professionals

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## Hold The Lyme



The CDC reminds us that May, June and July are the most active months for the ticks that transmit Lyme disease. Ticks prefer wooded areas, places with high grass and leaf piles. The re-population of white-tailed deer in some areas has been linked to the spread of Lyme disease. Lyme disease has been found in 47 states, Canada, Europe, the former Soviet Union, China and Japan.

Lyme disease is caused by a spirochete that was identified in 1982. The early stages of the disease may be unapparent or vague, so it's important to maintain a high index of suspicion when you work in potentially tick-infested places. Simply check your clothes for ticks before going back inside. The CDC also recommends that you wash your clothes in hot water and dry them for at least an hour using high heat if you've been in a potential tick hot spot. Of course, if you know you'll be going into tick-infested areas, cover yourself with long pants, shirts and socks. Tucking your pant legs into your boots can help keep the insect away from your skin. According to the CDC, Permethrin, which should never be applied directly to the skin, can be used to treat work clothes. If you elect to use an insect repellent on exposed skin, make sure it contains 20-30% DEET (diethyltoluamide).



You also need to check your skin. Look at all areas of your body, including axillae, scalp and groin. If you do see a tick, remove it right away with fine-tipped tweezers, using steady traction applied close to the skin. If you're removing a tick from somebody else, be sure to use appropriate personal protective equipment. It's postulated that if the tick has been attached to you for less than 24 hours, the risk of Lyme disease is minimal, but you should monitor yourself for symptoms.

The first sign in about 90% of cases is a red skin lesion (or lesions) called erythema migrans (EM). Other symptoms that may occur independently of the presence or absence of EM include: malaise, fatigue, fever, headache, stiff neck, myalgia and joint pain or swollen lymph nodes that "move around". The incubation period for EM is 3 to 32 days with a mean of 7 to 10 days. If left untreated, neurologic abnormalities such as aseptic meningitis and multiple types of cranial neuritis may develop. Symptoms may fluctuate and become chronic. Cardiac abnormalities and joint pain may begin weeks after the onset of EM.

The causal spirochete, *Borrelia burgdorferi*, is susceptible to antibiotics, and a vaccine is available. Although treatable, the insidious nature of Lyme disease mandates that we remain vigilant. Remember, WNL doesn't mean "within normal limits." It means "WE NEVER LOOKED."