

HALTON REGION HEALTH DEPARTMENT
OFFICE OF THE ASSOCIATE MEDICAL OFFICER OF HEALTH
TEL: 905-825-6000 FAX: 905-825-1444

TO: Halton Physicians
Medical Chiefs of Staff: Joseph Brant Hospital, Halton Healthcare (Oakville, Milton and Georgetown Hospitals)
Chairs of: Family Practice, Paediatrics, Internal Medicine, Emergency, Obstetrics and Gynaecology, Surgery
Chief of Laboratory Services and Infection Control Practitioners
Halton Midwives

POST IN: Emergency Department and Physicians Lounge

FROM: Dr. Joanna Oda, Associate Medical Officer of Health

DATE: May 8, 2019

RE: **Lyme Disease in Halton**

Why Clinicians Should Care?

Lyme disease is an emerging and ever-changing issue in the Halton community.

- As the range of the blacklegged tick expands across southern Ontario the risk of exposure and infection is increasing. The risk is still relatively low, but Halton is now considered a 'risk area'.
- The clinical and public health science, and logistics, of appropriate diagnosis, testing and treatment changes regularly. Clinicians should be aware of the most up-to-date information to avoid over - or under - diagnosis and over - or under-treatment.
- Patients are increasingly aware of Lyme disease and are presenting with symptoms or concerns about Lyme disease to ED's, primary care, and other health care practitioners.
- Lyme disease is a reportable disease (Disease of Public Health Significance) that must be reported by physicians by the next business day to the Halton Region Health Department.

About Lyme Disease

Lyme disease is caused by a bacteria transmitted to humans by the bite of an infected blacklegged tick. Active surveillance for blacklegged ticks has identified most of Halton region as an "estimated risk area" with evidence of established blacklegged tick populations. Areas adjacent to Halton are higher risk and patients should be asked about travel and recreational activities in those areas. [Estimated Risk areas for Lyme disease in Ontario map](#)

Diagnosis and Treatment

Diagnosis of Lyme disease, particularly in the early stages (3-30 days after tick bite), is primarily based on clinical symptoms (typical or atypical erythema migrans) and epidemiological risk factors (endemic area and tick bite >24hrs). Physicians can avoid over- or under- diagnosis and treatment by following the flow diagram in the Clinical Guidance Document from Health Quality Ontario. [Management of Tick Bites and Investigation of Early Localized Lyme Disease](#)

Clinical Testing

Serologic testing in early Lyme disease is not sensitive, and serology should not be used to monitor treatment response. Always refer to the HQO algorithm and document for guidance on appropriate testing.

Tick Testing

Tick test results take several months and is intended for surveillance purposes only. Tick submissions CANNOT be used to guide clinical management decisions. Patients should be managed based on tick exposure history and the risk of transmission of tick-borne pathogens. **NOTE:** Ticks removed within 24hrs of attachment will not transmit the bacteria that causes Lyme disease. For information on Halton Region's tick submission procedures, tick surveillance activities and Lyme disease surveillance in Halton Region please visit halton.ca.

Please report all suspected or confirmed cases of [Diseases of Public Health Significance](#) (formerly Reportable Diseases) to the Halton Region Health Department as soon as possible. Diseases marked * should be reported immediately by telephone (24 hours a day, 7 days a week) or fax (Mon-Fri, 8:30 am – 4:30 pm only). Other diseases can be reported the next working day. Call 311, 905-825-6000 or toll free at 1-866-442-5866. For general information, please visit halton.ca.

If any link provided in this memo does not work, please cut and paste it into your web browser.