

## Tickborne Disease (TBD) Update, 2022

### Key Updates and Recommendations:

- Since mid-March emergency department (ED) visits for tick bites in NH have been increasing (see CDC's [tick bite data tracker](#)), indicating increasing risk for TBDs.
- Counsel patients on how to prevent tick bites:
  - See "Prevention Messages for Patients" below
  - See CDC's website [Preventing Tick Bites](#)
  - Use CDC's fact sheet on [preventing tick bites and Lyme disease](#)
- Refer to CDC's tickborne diseases [Reference Manual for Healthcare Providers](#) for a helpful summary of geographic risk, clinical presentation, diagnosis, and treatment recommendations for various TBDs (note: this reference is expected to be updated to a 6<sup>th</sup> edition in the coming months).
  - An erythema migrans (EM) rash is diagnostic of Lyme disease but can present in different forms: [The Many Forms of Lyme Disease Rashes \(Erythema Migrans\)](#)
- CDC has developed 4 new online training modules that offer continuing education (CE):
  - [Module 1](#): Introduction to Tickborne Diseases and Disease Prevention
  - [Module 2](#): Lyme Disease Clinical Overview
  - [Module 3](#): Lyme Disease Testing and Diagnosis
  - [Module 4](#): Lyme Disease Treatment and Management
- The national [Lyme disease surveillance case definition](#) has been updated and implemented in NH starting January 2022:
  - Lyme disease surveillance in high-incidence states (like NH) will be based on laboratory-only reporting
  - Providers should no longer report patients suspected or confirmed to have Lyme disease, including patients presenting with erythema migrans
  - Hospital laboratories and other in-house testing facilities should continue to report positive Lyme test results
- A NH legislative commission convened in 2020-2021 to discuss diagnosis of Lyme and other tickborne diseases. The commission's [Final Report](#) can be viewed online.

### Background:

Tickborne diseases (TBDs) have been increasing nationally, and Lyme disease accounts for a majority of reports ([Rosenberg et al. MMWR, May 2018](#)). A 2021 analysis based on commercial insurance claims data estimated more than 475,000 people in the United States are diagnosed with Lyme disease annually ([Kugeler et al. Emerg Infect Dis, Feb 2021](#)). New Hampshire has identified local transmission of five TBDs: Lyme disease (*Borrelia burgdorferi*), anaplasmosis (*Anaplasma phagocytophilum*), babesiosis (*Babesia spp.*), *Borrelia miyamotoi*, and Powassan virus, all of which are transmitted by the bite of the blacklegged tick (*Ixodes scapularis*).

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## Disease Specific Resources and Clinical Information:

### Lyme disease

- CDC [Lyme disease website](#) and infographic on [Lyme Disease Prophylaxis After Tick Bite](#)
- IDSA [2020 Guidelines for the Prevention, Diagnosis and Treatment of Lyme Disease](#)

### Anaplasmosis

- CDC [Anaplasmosis website](#)
- CDC guidance for health care providers on the [Diagnosis and Management of Tickborne Rickettsial Diseases](#) (including Anaplasmosis)

### Babesiosis

- CDC [Babesiosis website](#)
- IDSA [2020 Guideline on Diagnosis and Management of Babesiosis](#)

### *Borrelia miyamotoi*

- CDC [Borrelia miyamotoi website](#)

### Powassan virus

- CDC [Powassan virus website](#)

## Reporting Tickborne Diseases:

Clinicians should continue to report suspected and confirmed cases of all non-Lyme tickborne diseases to the Bureau of Infectious Disease Control by submitting a case report form or calling 603-271-4496 (after hours 603-271-5300). Please use the new digital fax line to send TBD reports: 603-696-3017.

Use the following case report forms:

- Rickettsial Diseases: [https://www.cdc.gov/ticks/forms/Tick\\_TBRD\\_FILL\\_508.pdf](https://www.cdc.gov/ticks/forms/Tick_TBRD_FILL_508.pdf)
- Babesia: <https://www.cdc.gov/parasites/babesiosis/resources/50.153.pdf>
- Other TBDs: <https://www.dhhs.nh.gov/dphs/cdcs/documents/diseasereport.pdf>

## Prevention Messages for Patients:

- Avoid tick-infested areas when possible and stay on the path when hiking to avoid brush.
- Wear light-colored clothing that covers arms and legs so ticks can be more easily seen.
- Tuck pants into socks before going into wooded or grassy areas.
- Apply insect repellent (20-30% DEET) to exposed skin. Other repellent options may be found here: <https://www.epa.gov/insect-repellents/find-repellent-right-you>
- Permethrin is highly effective at repelling ticks on clothing; it is not meant for use on skin.
- Perform daily tick checks to look for ticks on the body, especially warm places like behind the knees, ears, groin, belly button, and the back and neck.
- Pets returning inside may also bring ticks with them. Performing tick checks and using tick preventatives on pets will minimize this occurrence.
- Encourage landscape or environmental management to reduce tick habitat and encounters.
- Shower soon after returning indoors to wash off any unattached ticks and check clothes for any ticks that might have been carried inside. Placing dry clothes in the dryer on high heat for ten minutes (one hour for wet or damp clothes) effectively kills ticks.
- Remove ticks promptly using tweezers. Tick removal within 36 hours of attachment can prevent Lyme disease, but transmission of other tick-borne diseases can occur with shorter periods of attachment time.
- Monitor for signs and symptoms of tickborne diseases for 30 days after a tick bite. Patients should contact their healthcare provider if symptoms develop.

Additional educational resources can be found on the NH DPHS [Lyme and Other Tickborne Diseases website](#).

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, please send an email to [DHHS.Health.Alert@dhhs.nh.gov](mailto:DHHS.Health.Alert@dhhs.nh.gov).

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**Attachments:** None