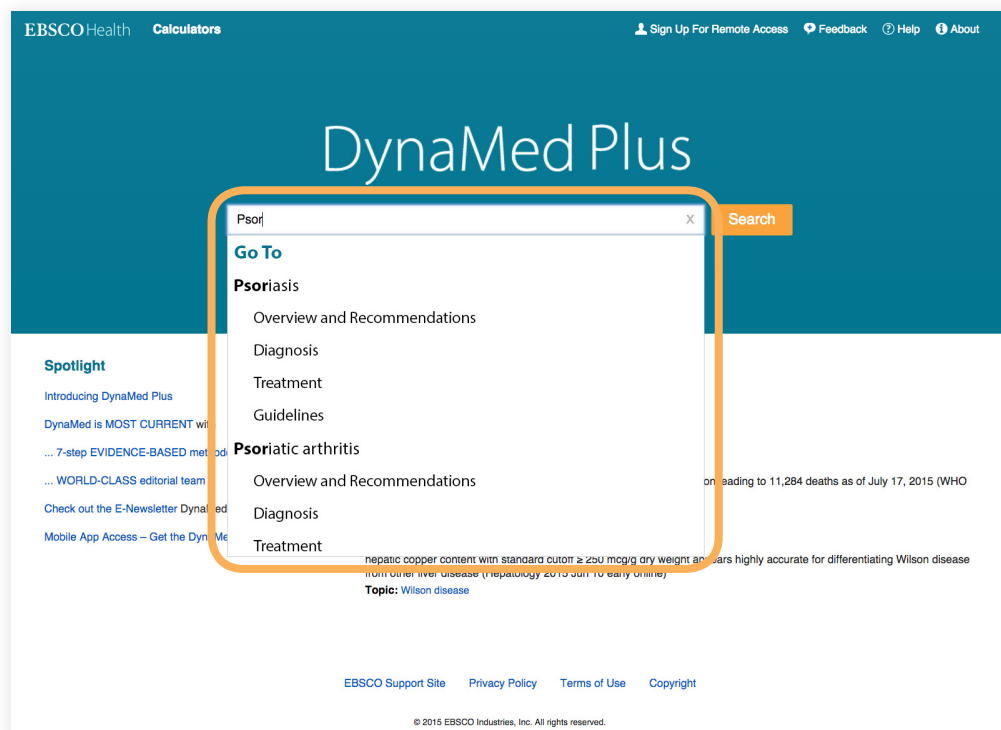
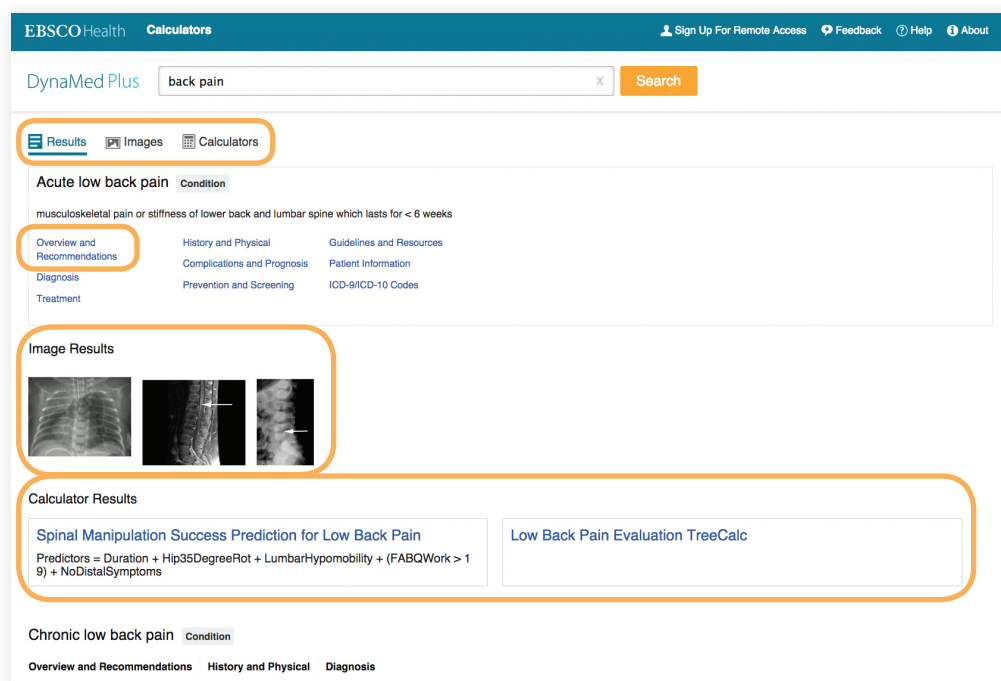




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Lyme disease

Overview & Recommendations

Background

- Lyme disease is a tick-borne illness caused by spirochetes of the *Borrelia burgdorferi* sensu lato species complex.
 - Hard-bodied ticks of the *Ixodes* genus are the main vectors.
 - Infecting bacterial species vary with the specific tick vector and geography.
 - B. burgdorferi* is endemic in the United States.
 - Most disease is acquired in the Northeast and upper Midwest.
 - Disease also occurs along the Pacific coast.
 - Borrelia garinii* and *Borrelia afzelii* are endemic in Europe and Asia.
 - Erythema migrans (EM), a localized skin infection, is the most common manifestation of Lyme disease.
 - Other manifestations may arise from hematogenous spread, such as:
 - early disseminated disease, which may manifest as
 - multiple EM skin lesions
 - carditis, typically atrioventricular conduction disturbances
 - neuritis, such as seventh cranial nerve palsy (often called Bell's palsy) or meningitis
 - late Lyme disease, which may manifest as
 - arthritis, often involving the large joints, especially the knee
 - acrodermatitis chronica atrophicans (fibrosing skin lesions)
 - chronic neurologic disease, such as encephalomyelitis

Evaluation

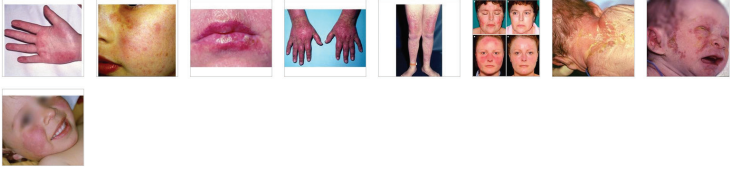
- EM occurs at the site of the tick bite and is characterized as an area of expanding erythema arising approximately 7 to 14 days after tick detach.
- EM lesions are often > 5 cm, may be flat or raised, and may be homogenous or have an area of central clearing (classic target lesion).
- Serologic testing is insensitive at this stage and is typically not needed in patients with compatible exposure histories.

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Systemic lupus erythematosus (SLE)

PEMSoft/Dr. Maureen Rogers

Rash on face in systemic lupus erythematosus.

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