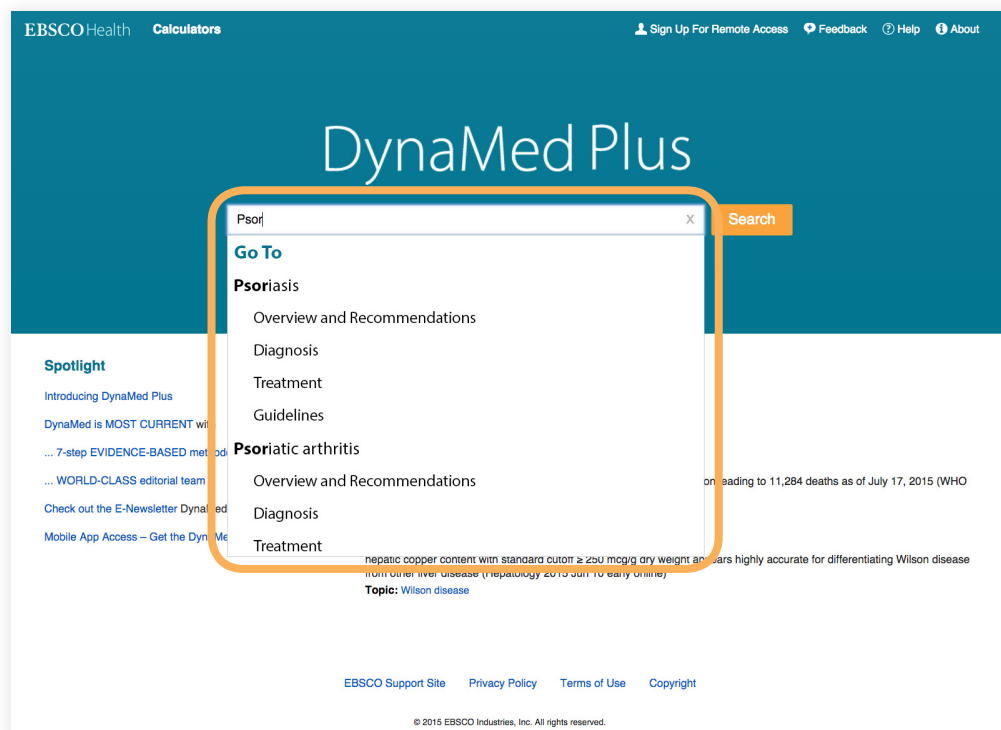
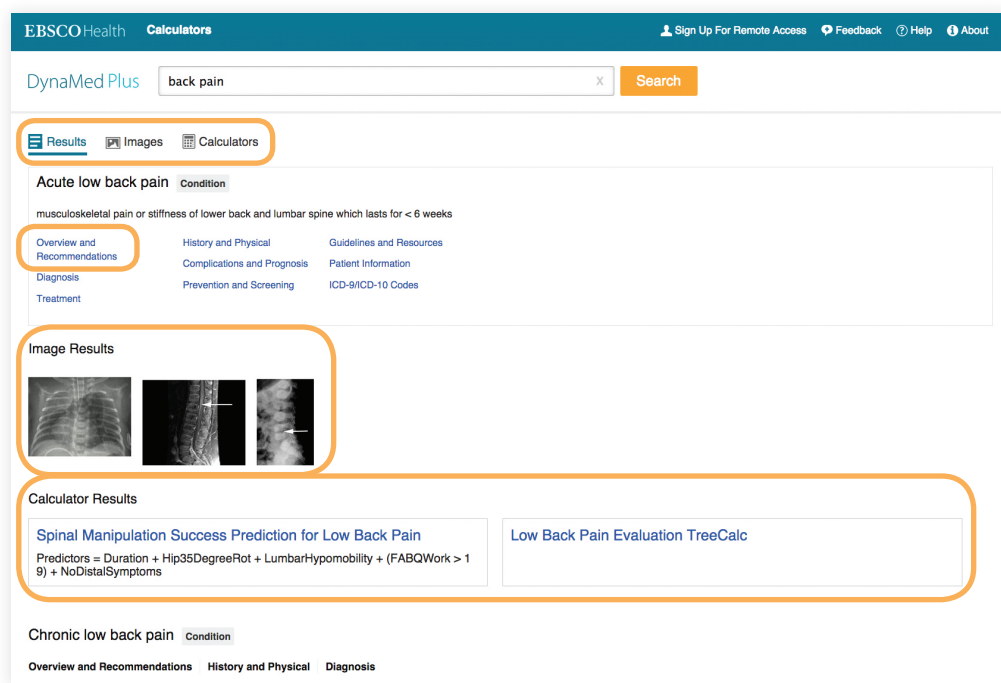




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## Lyme disease

### 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

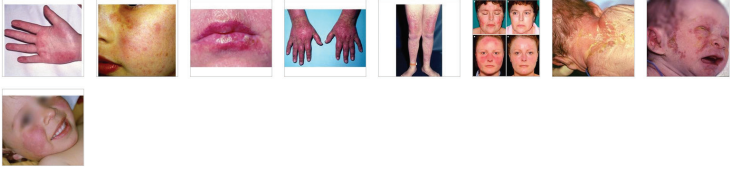
- EM occurs at the site of the tick bite and is characterized as an area of expanding erythema arising approximately 7 to 14 days after tick detach.
- EM lesions are often > 5 cm, may be flat or raised, and may be homogenous or have an area of central clearing (classic target lesion).
- Serologic testing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

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### Systemic lupus erythematosus (SLE)

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Rash on face in systemic lupus erythematosus.

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