Alert: Lyme disease Risk Update

Summary statement:
Interim 2017 tick surveillance results for Kenora and the surrounding area show higher rates of ticks infected with Lyme disease. The increase in rates are likely due to surveillance in new areas that were chosen because of previous research and because of the type of vegetation. The overall infection rates for Lyme disease of ticks collected by tick dragging in Kenora and the surrounding region is 66.7% (42 of 62 ticks). The results are being confirmed by further tick dragging in the fall. Health care providers should consider this information when doing risk assessments for Lyme disease and considering prophylaxis.

2017 Surveillance Interim results:
Northwestern Health Unit monitors the risk of Lyme disease according to provincial standards by (1) tick dragging or active surveillance, (2) accepting ticks submitted by the public (passive surveillance) and (3) collecting data on human cases of Lyme disease. The surveillance results are reported annually to health care providers. This is an interim report because of the changing results compared to previous years. Results require confirmation by tick dragging in the fall 2017.

In 2017, new areas were tick dragged in the area surrounding Kenora based on vegetation maps and published research on Kenora.

Results:
- Tick dragging/Active surveillance
  - Elevated infection rates were found with an overall infection rate of 66.7% (42 of 62 black-legged ticks captured tested positive for Lyme disease).
  - The increase compared to last year would be partially due to changes in sampling locations. Data limitations do not allow conclusions to be made on infected tick rates for specific locations.
This year’s passive surveillance program is still ongoing and final numbers will be analyzed in early 2018. To date, there have been 42 deer ticks submitted, with an infection rate of 7.0% (0% of positive black-legged ticks were from Kenora).

Records indicate that there has been one positive human case of Lyme disease reported within the Northwestern Health Unit to date in 2017.

Relevance for clinical practice

- Assessing the risk for Lyme disease should consider surveillance information as well as the activities of the patient and prevention measures taken.
- The overall rate of infection is greater than 20% and therefore health care providers can consider using prophylaxis for those who may have been exposed to ticks in Kenora and surrounding area. Please see ISDA guidelines.
- Additional information on Lyme disease can be found on the Northwestern Health Unit’s webpage for health care providers.

Action plan for Northwestern Health Unit

- Update the general public through a media release.
- Continue passive tick surveillance program as it yields valuable information for tick activity and areas of concern throughout the region.
- Tick dragging the same locations in October to determine whether or not there is an established population of black-legged ticks. Once an established population has been determined, it will be considered an “at risk” area.
- Continue with public education campaigns focusing on awareness and personal safety practices.
- Continue to update health care providers annually or as appropriate.

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