



Department of Health
and Human Services

Maine People Living
Safe, Healthy and Productive Lives

Paul R. LePage, Governor

Ricker Hamilton, Acting Commissioner

Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention
11 State House Station
Augusta, Maine 04333-0011
Phone: 1 (800) 821-5821 / Fax: (207) 287-7443

Maine Health Alert Network (HAN) System

PUBLIC HEALTH ADVISORY

To: Healthcare Providers
From: Dr. Siiri Bennett, State Epidemiologist
Subject: **Tick Bite Recommendations**
Date / Time: Thursday, June 15, 2017 at 2:00pm
Pages: 3
Priority: Normal
Message ID: 2017PHADV009

Abstract:

As the summer approaches, Maine CDC is answering many questions about what to do after a tick bite. Through Maine CDC's syndromic surveillance system it is apparent that emergency rooms are seeing a dramatic increase in visits for suspected tick exposures as well. The purpose of this HAN is to serve as a reference for providers to use when making recommendations to their patients after a known tick exposure.

Tick Bite Recommendations

As the summer approaches, Maine CDC is answering many questions about what to do after a tick bite. Through Maine CDC's syndromic surveillance system it is apparent that emergency rooms are seeing a dramatic increase in visits for suspected tick exposures as well. The purpose of this HAN is to serve as a reference for providers to use when making recommendations to their patients after a known tick exposure.

What to do after a tick bite:

1. Remove the tick as promptly as possible. Tweezers or tick spoons are the preferred method to remove ticks quickly and safely. If there are mouthparts still left in the skin after removal, it is not necessary to dig them out. If the tick is no longer attached there is not a risk of transmission of a vectorborne disease. The area around the bite should be cleaned with antiseptic.
2. Identify the tick if possible. Dog ticks in Maine are not known to carry disease and are therefore a nuisance but not a public health risk. The University of Maine Cooperative Extension offers a free tick identification service.
3. Encourage the patient to monitor for symptoms for 30 days after a deer tick bite.

When to consider prophylaxis:

Maine CDC does not generally recommend antimicrobial prophylaxis for the prevention of Lyme disease after a recognized tick bite, as:

- Prophylaxis is not 100% effective and may give people a false sense of security
- There is some concern that prophylaxis may simply delay the onset of symptoms
- Prophylaxis is not effective against all tickborne diseases

However, in areas that are highly endemic for Lyme disease, a single dose of doxycycline may be offered to adult patients (200 mg) who are not pregnant and to children older than 8 years of age (4 mg/kg up to a maximum dose of 200 mg) when all of the following circumstances exist:

- The tick is identified as an engorged deer tick and was attached for at least 24 hours
- The patient resides in an area where the prevalence of Lyme disease in ticks is greater than 20%
 - All areas south of Bangor are considered to have prevalence greater than 20%. There is little data for areas north of Bangor.
- Prophylaxis can be started within 72 hours of tick removal
- There are no contraindications to doxycycline

There is no evidence that shows a single prophylactic dose of doxycycline is effective in preventing anaplasmosis. Doxycycline will not prevent babesiosis or Powassan as they are not bacterial illnesses.

Even if prophylaxis is given, the patient should be advised to watch for symptoms for 30 days as it may not be 100% effective in preventing Lyme and will not prevent other tickborne diseases.

Treatment:

Symptomatic individuals may be offered treatment. Current treatment guidelines for Anaplasmosis, Babesiosis, and Lyme are available at <https://academic.oup.com/cid/article/43/9/1089/422463/The-Clinical-Assessment-Treatment-and-Prevention#74156407>.

Anaplasmosis can be a serious illness and even fatal if not treated correctly. Diagnosis of anaplasmosis should be made based on clinical signs and symptoms and can later be confirmed using laboratory tests. Treatment should never be delayed pending the receipt of lab test results.

There is no treatment for Powassan, only supportive care.

Reporting:

Tickborne diseases are reportable in Maine. All positive laboratory reports and erythema rashes should be reported by phone to the 24/7 disease reporting and consultation line at 1-800-821-5821 or by fax to 1-800-293-7534.

Additional information:

- Tick and tickborne disease information is available on Maine CDC's website <http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/vector-borne/index.shtml>
- Tick identification is available free of charge through the University of Maine Cooperative Extension <https://extension.umaine.edu/ipm/tickid/>
- Disease consultation and reporting available through Maine CDC at 1-800-821-5821