

## DEPARTMENT OF THE ARMY ARMED FORCES EPIDEMIOLOGICAL BOARD 5109 LEESBURG PIKE FALLS CHURCH, VA 22041-3258



AFEB (15-1a) 92-3

26 June 1992

MEMORANDUM FOR THE ASSISTANT SECRETARY OF DEFENSE (HEALTH AFFAIRS)

SUBJECT: Lyme Disease

- 1. The Board considered the issue of Lyme disease reporting at the Winter Meeting on 20-21 February 1992. Several excellently researched presentations on prevalence and incidence of Lyme disease, both in military personnel (including dependents) and nationally, have been provided at various meetings. The Board notes and agrees that Lyme disease is a threat to military personnel in certain training environments and to dependent and civilian personnel at specified installations.
- 2. The Board recognizes the value of centralized reporting, and although additional funding support from Congress may not be forthcoming, reporting of cases to the Surgeon General of each respective service is feasible at this time. However, it is essential that the clinical manifestation of Lyme disease be carefully defined with the diagnosis reliably correlated through the use of the best available technology. Accordingly, the Board recommends:
  - a. THAT REPORTING OF LYME DISEASE BE A REQUIREMENT WITH SUCH REPORTING MADE TO THE SURGEON GENERAL OF THE RESPECTIVE SERVICE.
  - b. THAT THE DIAGNOSTIC CRITERIA FOR THE IDENTIFICATION OF LYME DISEASE, AS PUBLISHED BY CDC, BE ADOPTED AND IMPLEMENTED BY THE MILITARY MEDICAL DEPARTMENTS. ASSOCIATED WITH THIS, THE AFEB RECOMMENDS THAT LESIONS BE PHOTOGRAPHED FOR THE RECORD WHEN THE LESION IS THE BASIS FOR THE DIAGNOSIS. THE SEROLOGICAL TEST (INCLUDING THE NAME OF THE MANUFACTURER AND LOT NUMBER) SHOULD BE RECORDED IF SEROLOGICAL RESULTS ARE THE BASIS FOR THE DIAGNOSIS.
  - THAT FIELD STUDIES BE CONDUCTED TO CHARACTERIZE
    THE NATURAL HISTORY OF THE DISEASE, WITH SPECIAL
    EMPHASIS ON THE CORRELATION OF CLINICAL AND
    SEROLOGICAL FINDINGS. THESE STUDIES SHOULD BE
    CONDUCTED TO ASSESS THE RISK TO MILITARY PERSONNEL
    IN OPERATIONS AND TO ADDRESS THE RELATIONSHIP BETWEEN
    SEROLOGIC RESULTS AND CLINICAL FINDINGS IN A
    PROSPECTIVE FASHION.

AFEB (15-1a) 92-3 Subject: Lyme Disease

> d. THAT THE TREATMENT AND MANAGEMENT OF PATIENTS WITH LYME DISEASE SHOULD BE CONSISTENT WITH NATIONALLY ACCEPTED PRACTICES. INDIVIDUAL PROPHYLAXIS BY APPROPRIATE REPELLENT USE, SUCH AS PERMETHRIN, AND DETICKING THE BODY AFTER EXPOSURE IS AN EFFECTIVE METHOD FOR PREVENTING EXPOSURE.

FOR THE ARMED FORCES EPIDEMIOLOGICAL BOARD:

WALTER R. DOWDLE, Ph.D.

President, AFEB

W. M. PARSONS, Ph.D. Captain, Medical Service Corps U. S. Navy Executive Secretary

Copies Furnished:

Board Members

Ch, HQ, USAF, SGP

Ch, Prev Med Div, OTSG-DA

Ch, Prev Med Div, OTSG-DAF

Dir. Occup Hlth & Prev Med Div, BUMED-DN

DASD(HA) (PA&QA) Cmdr, U. S. Army Med R&D Cmd

CO NAVMEDRSCHDEVCOM

Dir, Prof Svcs, OTSG-DA

Dir, PA&QA, OTSG-DAF

Dir, Med Plans, Policy and Ops, OP-932, DN

Dir, Env & Life Sci, OUSDA, ATTN: Dr. J. Osterman

Cmdr, HSHA-Z, Brooks AFB

Deputy Cdr, Fleet Readiness & Supt, BUMED-DN