What You Should Do:

- Complete the Horowitz MSIDS differential diagnosis questionnaire, available at the Lyme Action Network website, if you think you have Lyme/Tick-borne disease. Approach your primary care physician with the results and ask to be tested for Lyme disease, specifically requesting a Western Blot. Also request tests for all co-infections (Anaplasma, Ehrlichia, Bartonella, Mycoplasma, and Babesia). Depending on the tests and the lab, you may have to pay for some of them and request reimbursement from your insurance company.
- If you are diagnosed with Lyme disease and/or coinfections, refer to the ILADS Guidelines for Treatment of Lyme disease on the ILADS website:

http://www.ilads.org/lyme_disease/treatment_guidelines_summary.html and request treatment under these guidelines.

- Make sure your physician understands that ILADS Guidelines are evidence-based, published quidelines currently under revision as required by the National Guidelines Clearinghouse (Dept of Health and Human Services). You, the patient, have the right to choose which set of guidelines are applied to your treatment.
- Short courses of antibiotics can be problematic. See the ILADS
 Treatment Guidelines for appropriate courses and dosages. If you have persisting, recurring, or worsening symptoms, consult an ILADS trained physician.
- If you are diagnosed with Lyme disease and/or any of the coinfections, request that the doctor report your case to your county public health department.
- Adopt an immune system boosting, anti-inflammatory diet and lifestyle to help manage your symptoms. (See "Recipes for Repair" by Laura and Gail Piazza.)

Learn more about tick-borne diseases at:

www.ilads.org www.lymedisease.org www.lymeactionnetwork.org www.igenex.com www.columbia-lyme.org www.lymediseaseassociation.org

www.empirestatelymediseaseassociation.org

About Tick Bites and Antibiotics...

If you are bitten by a tick, you have several choices. You can: 1) be proactive and ask your doctor to treat you with an ILADS recommended course of antibiotics to kill the bacteria in case you did contract it; 2) do nothing and wait to see if you develop symptoms. Symptoms of Lyme disease are not predictable. They can appear immediately or weeks or months after a bite. Lyme disease gets more difficult to treat the longer you have it. If you do exhibit symptoms, seek a full ILADS-recommended course of antibiotic treatment 3) do nothing and wait several weeks to have a blood test done. Blood tests are not reliable, especially early or late in the course of the infection. Blood tests for Lyme disease are frequently not accurate, often generating negative results even if the patient HAS been infected with the bacteria.

Many Lyme specialists recommend a long course of antibiotics even if infection is not absolutely confirmed. There is great controversy on this point. Many doctors will not prescribe antibiotics if the blood tests for Lyme disease are negative. Some doctors prescribe two pills or other "short courses" of antibiotics as a treatment for tick bites. There is little scientific evidence to support the assertion that this 2 pill or 2 day treatment regimen prevents infection. It may, in fact, do more harm than good. A full course of antibiotics MIGHT prevent serious illness later. It is also possible that a three-week course of antibiotics may not be sufficient. Published studies have demonstrated the improvement of symptoms with longer treatment courses.

it Might

Be Lyme

or Babesia...

or Bartonella...

or Ehrlichia...

or MSIDS...

or...



www.lymeactionnetwork.org



It MIGHT be Lyme* if your symptoms include:

- Headache
- Burning or stabbing sensations; shooting pains
- Joint pain, swelling; stiffness of Ears: hearing loss; buzzing, ringing, ioints or back
- Muscle pain or cramps
- Neck stiffness, pain; neck creaks or •
- Chest pain; rib soreness
- Sore throat; swollen glands
- Upset stomach or abdominal pain
- Shortness of breath; cough
- Change in bowel function
- Bladder dysfunction; irritable bladder
- Testicular pain; pelvic pain
- Unexplained breast pain
- Unexplained milk production
- Numbness; tingling; tremor
- Facial paralysis (Bell's Palsy)
- Twitching of the face or other mus-
- Skin hypersensitivity
- Fatigue, tiredness, poor stamina
- Unavoidable need to sit or lie down
- Unexplained fevers, sweats, chills or flushing
- Unexplained menstrual irregularity
- Unexplained weight loss or gain

- Unexplained hair loss
- Eyes: double, blurry, or vision loss, floaters light sensitivity
- pain, sound sensitivity
- Pulse skips; cardiac impairment
- Heart block; heart murmur
- Heart palpitations; heart valve prolapse
- Sleep: disturbed; too much; too little; frequent or early waking
- Sexual dysfunction or loss of libido
- Mood swings; depression; irritability
- Forgetfulness; poor short-term memory
- Difficulty thinking; confusion; poor attention
- Problem absorbing new information
- Difficulty with speech, writing
- Difficulty with concentration and readina
- Difficulty finding words; name block-
- Disorientation; getting lost, going to wrong places
- Lightheadedness; poor balance
- Vertigo, wooziness
- Increased motion sickness
- Exaggerated symptoms or worse hangover from alcohol

* If you have all or many of the following symptoms, you may have late-stage Lyme disease: extreme fatigue; brain fog; joint pain/swelling; tin-gling, numbness, stabbing or burning sensations; and disturbed sleep.

Lyme disease, caused by the bacteria Borrelia burgdorferi, is only one of many tick-borne pathogens. Known as "stealth" pathogens, these organisms can evade detection and destruction, survive inside of cells, and persist even AFTER antibiotic treatment by hiding out in tissues and organs. When Lyme is complicated by co-infection, symptoms may be more variable or more severe. If you are being tested for Lyme, ask your doctor to include tests for Anaplasma; Ehrlichia; Bartonella; Mycoplasma; and Babesia (a malaria-like protozoa) Tick-borne viruses: At least two viruses (Tick-borne Encephalitis virus (TBE) and Powassen virus) capable of causing encephalitis in humans are rapidly transmitted by the same ticks that cause Lyme disease. In 20% to 30% of victims of these diseases, infection progresses from a flu-like illness to a potentially fatal disease of the central nervous system with symptoms of meningitis (fever, headache, and a stiff neck) or encephalitis (drowsiness, confusion, sensory disturbances, and/or motor abnormalities such as paralysis).

Symptoms of ...

Babesia (protozoal infection like

Babesia often starts with a high fever and chills. As it progresses, patients may develop anemia, fatique, headache, drenching sweats, muscle aches, nausea, and vomiting. Often difficult to distinguish from Lyme disease. it can be lifethreatening to people with no spleen, the elderly, and people with weak immune systems. Complications include very low blood pressure, liver problems, anemia (a breakdown of red blood cells), and kidney failure. Treatment of Babedrugs in addition to antibiotics.

Bartonella

Frequently referred to as "catscratch fever," early signs of this bacterial infection are fever, fatigue, headache, poor appetite, and an unusual, "stretch mark-like" rash. A sore throat and swollen glands are typical, especially around the head, neck and arms. Bartonellosis should be suspected when neurologic symptoms are out of proportion to the other systemic symptoms of Lyme disease. Other symptoms include: gastritis, lower abdominal pain, soreness and pain on the foot bottom, and tender sia infection requires anti-malarial subcutaneous nodules along the shin bones.

What you and your doctor need to know*:

*The following information sourced from scientific and medical journals

- Ticks carry pathogens in addition to Lyme (Borrelia) which can significantly complicate recovery from Lyme disease. If not addressed, they can lead to persistent or recurring symptoms. Bartonella and Babesia, in particular, do not respond to routine antibiotics and require additional medications.
- Recent research shows that ticks attached for even a short time can transmit serious diseases to humans. Lyme has been transmitted in less than 4 hours. Other diseases can be immediately transmitted.
- Currently, the clinical "signs" most doctors look for when diagnosing Lyme disease are a history of a tick bite with the appearance of a tell-tale "bulls-eye" rash around it, and a positive test for Borrelia antibodies. However, two studies (one by the CDC) have shown that the majority of people with Lyme disease either don't recall a tick bite, didn't see a rash, or the rash did not look like a "bulls-eye." Even worse is the overreliance on the results of blood tests that are wrong more than half the time, especially early or late in the disease process. The same is true of blood tests for Bartonella. Therefore, you MIGHT have Lyme even if you were told your blood test was negative. Three states have enacted legislation that requires physicians to tell patients that getting a negative blood test result does not mean they don't have Lyme disease.
- Cardiac manifestations of Lyme disease ("heart block", endocarditis, pericarditis) have resulted in fatalities in otherwise healthy individuals, particularly young adults.
- Like its spirochete cousin syphilis, sexual transmission of Borrelia burgdorferi (the Lyme disease spirochete) has now been proven. Sexual transmission of Bartonella has also been demonstrated. Another concern is the detection of Babesia and Anaplasma in donated blood and the very real possibility of infection by blood transfusion.
- Lyme disease may be MISDIAGNOSED as: MS. ALS. Chronic Fatique, Fibromyalgia, Autism, Alzheimer's, Parkinson's, ADHD, Diabetes, menopause, mental illness, depression, and many other illnesses.

MSIDS -Multiple Systemic Infectious Disease Syndrome

"MSIDS is a symptom complex of Lyme disease and multiple associated tick borne co-infections that encompasses bacteria, viral, parasitic, and fungal infections."

(Richard Horowitz, MD "Why Can't I Get Better?" St. Martin's Press) Please visit our website for the new cell count, low platelet count, anebrochure describing MSIDS www.lvmeactionnetwork.ora Horowitz's site www.cangetbetter.com

Ehrlichia/Anaplasma

Ehrlichia, and the related Anaplasma, are tick-borne bacteria that infect white blood cells. Symptoms can include sudden high fever, fatigue, muscle aches, headache. The disease can be mild or life-threatening. Severely ill patients can have low white blood at mia, elevated liver enzymes, kidney or failure and respiratory insuffiat ciency.

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