

Tick Bites: Dos and Don'ts

- A. The bite
1. Calm down
 2. Grasp the tick with a tweezers as close to your skin as possible. Ideally, this will be on the tick's head but if it can't be, that's ok.
 3. Pull straight up with steady pressure until tick is out.
 4. Save tick in a plastic bag for identification
 5. Wash the bite area with soap and water.
- B. Calling your doctor
1. Call as soon as tick is out (unless it's after all the pharmacies have closed)
 2. Report you've been bitten by a deer tick from a high-risk area.
 3. Report how long the tick was on you ONLY if you are 100% certain of this. If you don't know, say that. If it looks like the tick has blood in it, you can say that, too. Some physicians use attachment times to decide whether or not to give you an antibiotic to prevent Lyme but there are problems with doing that; that's why guessing is a bad idea.
 4. Request an antibiotic to prevent Lyme. Ticks in high-risk areas of MN carry Lyme at a high rate, at least 1/3 and maybe as high as 2/3.
 5. Remember that ticks carry co-infections and some are transmitted very soon after a bite. Preventative use of doxycycline for Lyme kills Anaplasma and Ehrlichia; it may also kill Bartonella but it won't touch Babesia (you need to wait and see before treating this infection).
 6. The issue is: what is appropriate treatment for prevention.
Based on my review of the medical literature, I suggest treatment at standard doses for 20 days. Treatment trials in humans didn't prove significant effectiveness with treatment because few patients got sick, even in the placebo groups. Studies in mice found that long-acting doxycycline, present at low levels for 19 days, was 100% effective. This was true even when the mouse had Lyme and anaplasmosis. A single dose of doxycycline at 200mg is only 50% effective; you should want better odds than that. 20 days of doxycycline is unlikely to harm you (make sure you use a probiotic) and it will not have any impact on causing antibiotic resistant "super-bugs" in you or the general community.
- C. Don'ts
1. Don't irritate the tick and try to avoid squeezing its body. The Lyme bacterium lives in the tick's mid-gut. The theory is that anything which increases the risk of the tick "vomiting", increases your risk of getting Lyme.
 2. Don't worry if the head stays behind; your body will eventually expel it.
 3. Do not guess as to how long the tick was attached, even if the doctor asks you to. Studies show that patients under-estimate attachment times.
 4. Don't take a wait and see approach; by the time you figure out you have Lyme it may be very difficult to treat the infection.