The recommendations provided in this review are intended to support both the clinical diagnosis and initiatives for a more rational use of laboratory testing in patients with clinically suspected Lyme borreliosis” Dessau et al (2017).

Abstract:

Background: Lyme borreliosis (LB) is a tick-borne infection caused by Borrelia burgdorferi sensu lato. The most frequent clinical manifestations are erythema migrans and Lyme neuroborreliosis. Currently, a large volume of diagnostic testing for Lyme borreliosis is reported, whereas the incidence of clinically relevant disease manifestations is low. This indicates overuse of diagnostic testing for LB with implications for patient care and cost effective health management.

Aim: The recommendations provided in this review are intended to support both the clinical diagnosis and initiatives for a more rational use of laboratory testing in patients with clinically suspected Lyme borreliosis.

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Sources: This is a narrative review combining various aspects of the clinical and laboratory
diagnosis with an educational purpose. The literature search was based on existing systematic reviews, national and international guidelines and supplemented with specific citations.

Implications: The main recommendations according to current European case definitions for Lyme borreliosis are as follows: Typical erythema migrans should be diagnosed clinically and does not require laboratory testing, the diagnosis of Lyme neuroborreliosis requires laboratory investigation of the spinal fluid including intrathecal antibody production for, and the remaining disease manifestations require testing for antibodies to Borrelia burgdorferi. Testing individuals with non-specific subjective symptoms is not recommended, because of a low positive predictive value.

Reference:


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