

In the early 1990s, the U.S. government's Centers for Disease Control and Prevention (CDC) issued criteria for determining the spread of Lyme disease. One of the CDC's primary responsibilities is to track diseases, and to do that they must have great assurance that the patients who are counted actually have the disease. Therefore a very strict standard was adopted that required first a positive result from a screening test called ELISA (sometimes doctors call this a "Lyme titer"). If positive, then a more specific test called a Western blot is to be performed to further confirm the presence of Lyme disease.

Unfortunately, the ELISA test is positive in fewer than half of the patients who actually have Lyme

The CDC is aware of the limitations of the ELISA/Western Blot testing procedure. They state that,

There is no test that can reliably diagnose Lyme disease.

"This surveillance case definition was developed for national reporting of Lyme disease; it is NOT appropriate for clinical diagnosis." (Emphasis is theirs.)

The Food and Drug Administration (FDA) says this about Lyme disease lab tests: "[blood tests] should be used only to support a clinical diagnosis of Lyme disease."

Don't take our word for it . . .

Read what these government agencies have to say on their Web sites:

CDC: Case Definitions for Public Health Surveillance; Wharton, et al (<http://www.cdc.gov/mmwr/PDF/RR/RR4610.pdf> page 26)

FDA: Public Health Advisory: Assays for Antibodies to *Borrelia burgdorferi*; Limitations, Use, and Interpretation for Supporting a Clinical Diagnosis of Lyme Disease; issued July 7, 1997 (<http://www.fda.gov/cdrh/lyme.html>)

Learn more from our free booklet, Lyme Disease: The Basics, and from our Web site



Lyme Disease Association of Southeastern Pennsylvania, Inc.

The LDASEPA is an all-volunteer, 501(c)(3) non-profit corporation dedicated to education and support

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