

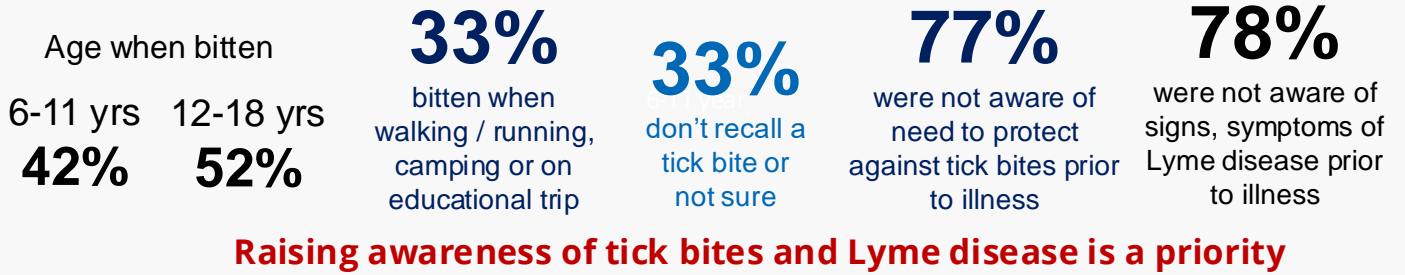
# Lyme Disease Experience Survey – Infected 18 & Under

Little is formally documented on the lived experience of Lyme disease - the state of diagnosis, treatment & care and the impact on the lives of those infected. Lyme Resource Centre (LRC) conducted an online survey to gather information on the impact of Lyme disease in the United Kingdom & Republic of Ireland.

**90** of 475 respondents aged 18 yrs or under when Lyme disease symptoms began and who also reported being diagnosed with Lyme disease by qualified health professional; these responses used for this analysis

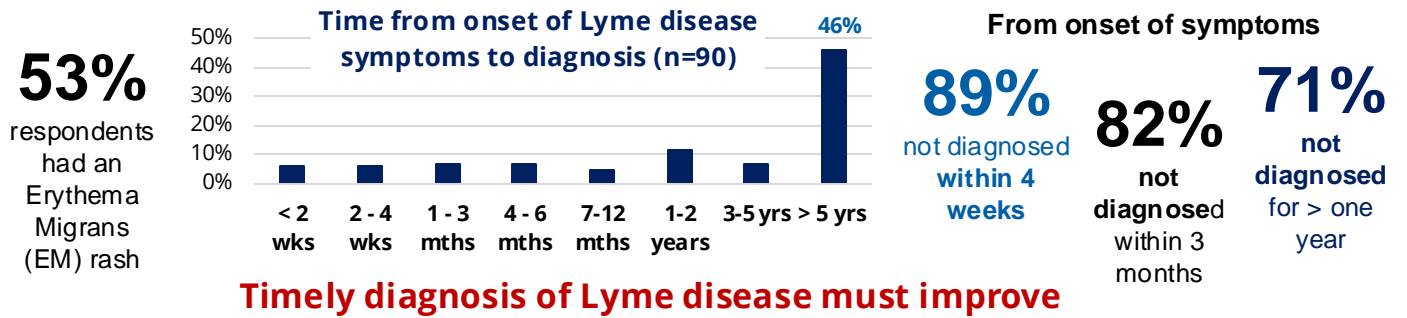
NICE evidence review highlights 'Raising awareness of Lyme disease reduces the possibility that people with Lyme disease are overlooked or not adequately assessed and diagnosed for Lyme disease.'

**AWARENESS**



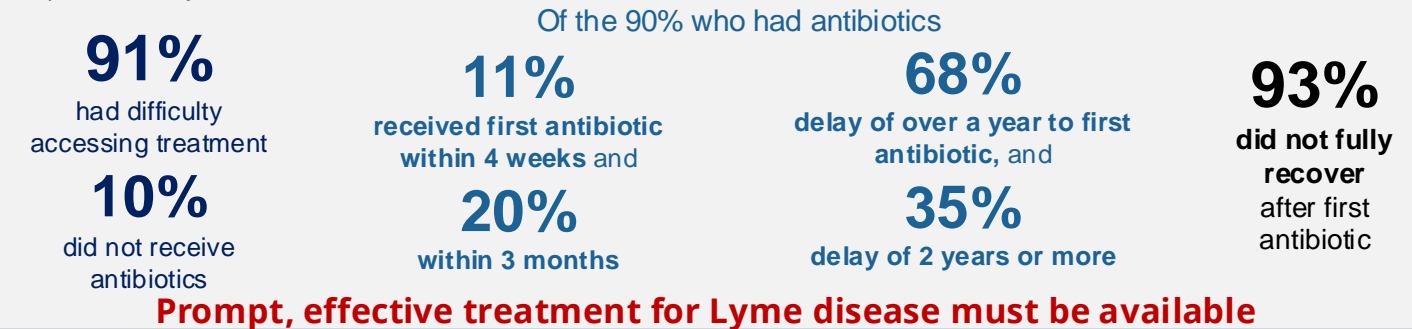
NICE guideline "aims to raise awareness of when Lyme disease should be suspected and ensure that people have prompt and consistent diagnosis and treatment".

**DIAGNOSIS**



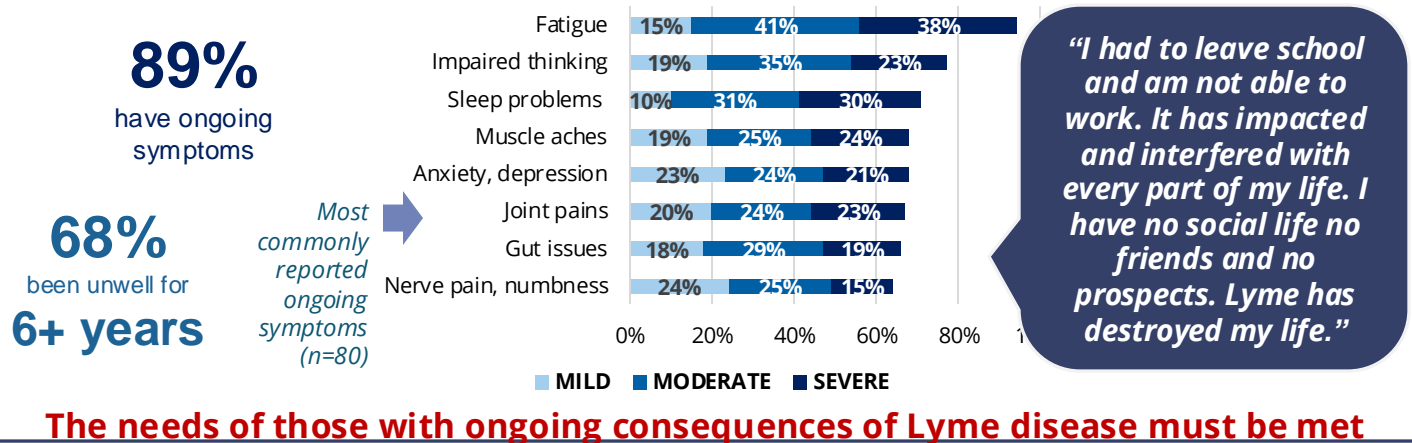
NICE guideline states 'Prompt antibiotic treatment reduces the risk of further symptoms developing and increases the chance of complete recovery'.

**TREATMENT**



NICE guideline states 'Symptoms can be more severe and long-lasting if treatment is delayed'.

**ONGOING NEEDS**



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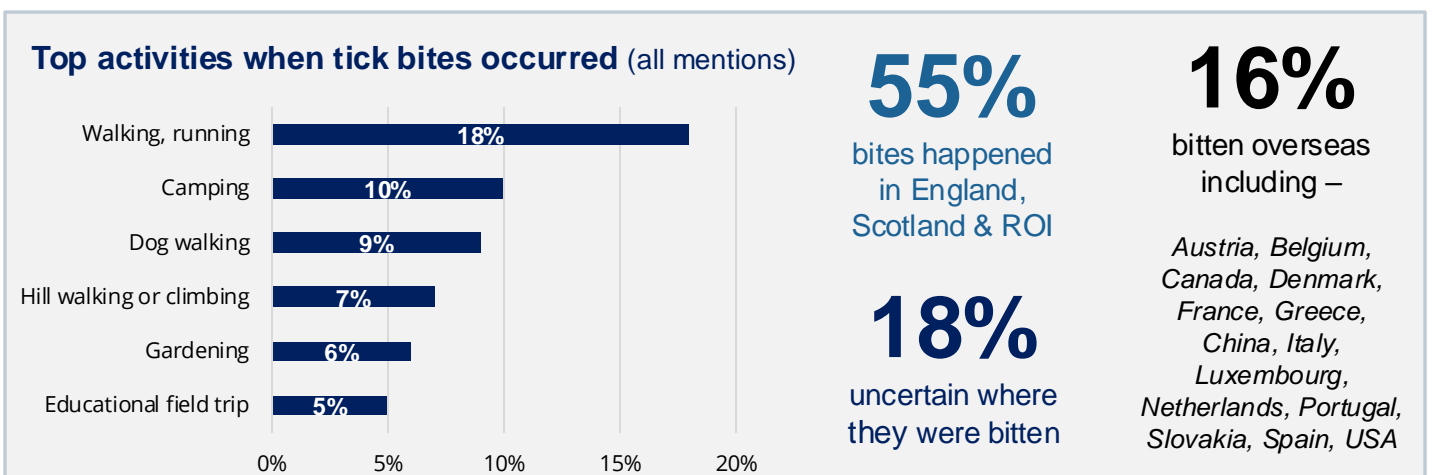
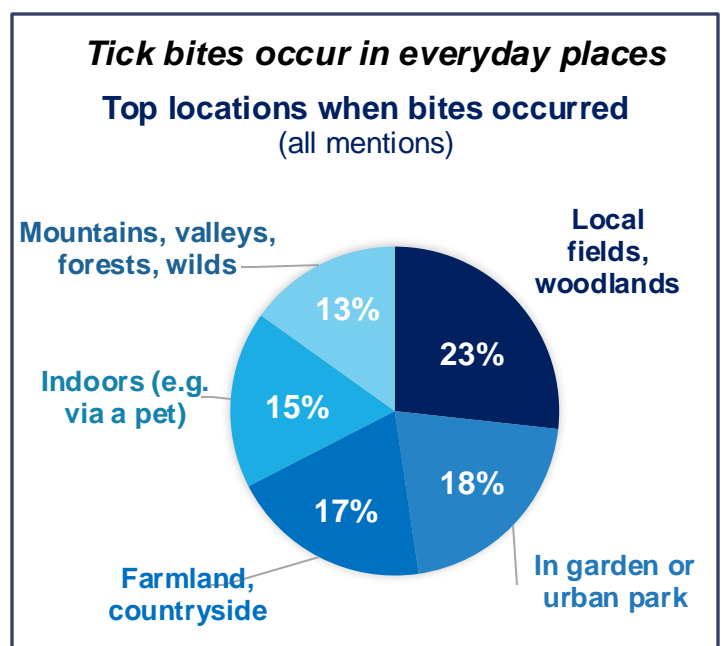
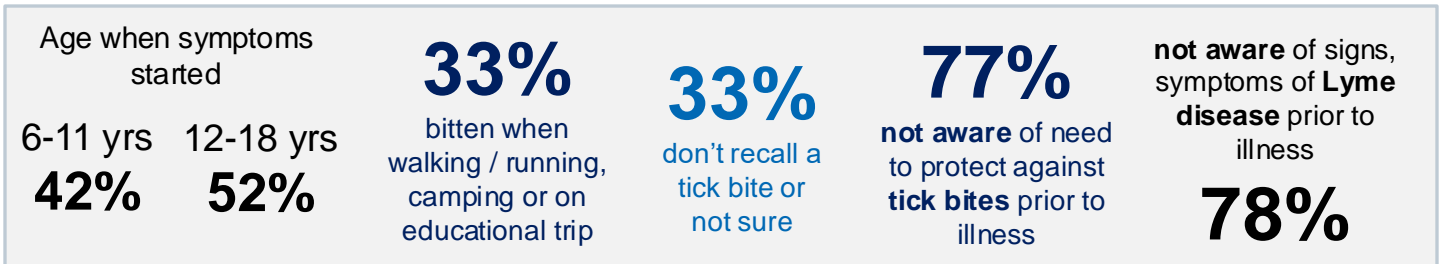
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## AWARENESS - Raising awareness of tick bites and Lyme disease is a priority

NICE evidence review highlights *'Raising awareness of Lyme disease reduces the possibility that people with Lyme disease are overlooked or not adequately assessed and diagnosed for Lyme disease.'*

### SURVEY HIGHLIGHTS A SIGNIFICANT AWARENESS GAP

**90** of 475 respondents aged 18 yrs or under when Lyme disease symptoms began *and* who also reported being diagnosed with Lyme disease by qualified health professional; these responses used for this analysis



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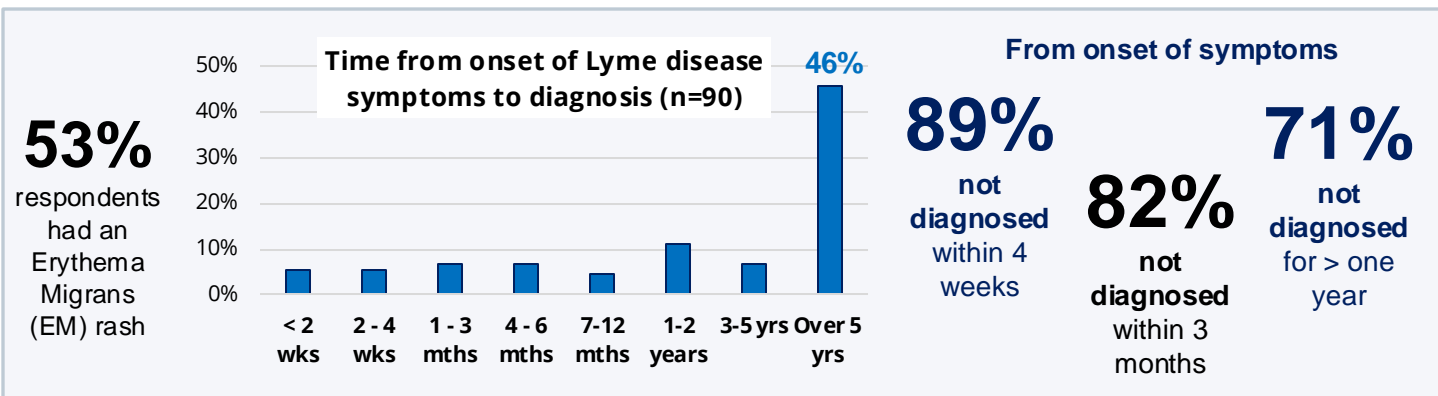
## DIAGNOSIS - Timely diagnosis of Lyme disease must improve

NICE guideline “aims to raise awareness of when Lyme disease should be suspected and ensure that people have prompt and consistent diagnosis and treatment”.

### SURVEY HIGHLIGHTS MISSED OPPORTUNITIES FOR DIAGNOSIS

**90** of 475

respondents aged 18 yrs or under when Lyme disease symptoms began *and* who also reported being diagnosed with Lyme disease by qualified health professional; these responses used for this analysis



for **60%** respondents, diagnosis of Lyme disease was first suspected by self, family, friends or colleagues

Diagnosis of Lyme disease made by **GP**

**25%** respondents -

**73%** diagnosed by secondary care

*“(my) diagnosis took 23 years .”*

**11** different recognised secondary care medical specialties made **diagnosis of Lyme disease**

Average **43** estimated visits to GP with Lyme related symptoms (n=88)

**19** different medical specialties involved with respondents’ Lyme related symptoms

**52%** attended A&E with Lyme related symptoms (n=89)

Just **2%** respondents diagnosed by an allied health professional

*“...didn’t initially take my diagnosis seriously ....despite bullseye rash and symptoms.”*

**80+** different medical conditions suggested or diagnosed before Lyme disease diagnosis (n=78, all mentions)

*“....took months for referral to paediatrics, and then still said it isn’t Lyme, even with a positive (test) result.”*

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## TREATMENT - Prompt, effective treatment for Lyme disease must be available

NICE guideline states ‘Prompt antibiotic treatment reduces the risk of further symptoms developing and increases the chance of complete recovery’.

### SURVEY HIGHLIGHTS MISSED OPPORTUNITIES FOR TREATMENT

**90** of 475 respondents aged 18 yrs or under when Lyme disease symptoms began *and* who also reported being diagnosed with Lyme disease by qualified health professional; these responses used for this analysis

<b>90%</b> had antibiotics	<b>11%</b> received first antibiotic within 4 weeks and	<b>46%</b> had delay of over a year to first antibiotic, and	<b>93%</b> did not fully recover after first antibiotic
<b>91%</b> had difficulty accessing treatment	<b>20%</b> within 3 months	<b>54%</b> had delay of 2 years or more	

**Time from symptoms to first antibiotic (n=81)**

Time Interval	Percentage
< 48 hours	2%
< 1 wk	1%
1-2 wks	4%
2-3 wks	2%
3-4 wks	1%
1-3 mths	9%
4-6 mths	6%
7-12 mths	6%
1-2 yrs	14%
> 2 yrs	54%

Of 54% who had delay of > 2 years from symptoms to first antibiotic, average length of delay was

**19 yrs**

**93%** have been unwell with Lyme disease for a year or more

**31%** did not get second antibiotic

*“Misdiagnosis and ineffective treatment have had a pervasive impact on every aspect of my life.”*

**Just 13%** have recovered from Lyme disease

**79%** have not fully recovered from Lyme disease

Have you now recovered from Lyme disease?

Response	Percentage
Yes	13%
No	39%
Partial recovery	40%
Not sure	8%

Of 91% who had difficulty accessing treatment

**98%** say lack of disease awareness & expertise amongst health professionals is top barrier to treatment followed by misdiagnosis

Reason	Percentage
Lack of disease awareness / expertise of health professionals	98%
Misdiagnosis resulting in delayed diagnosis & treatment	83%
Diagnosis excluded due to negative / inconclusive blood test* <small>(*despite Lyme symptoms)</small>	61%
Cost of private treatment	59%
Stigma associated with Lyme disease	57%
Restrictive treatment guidelines	54%

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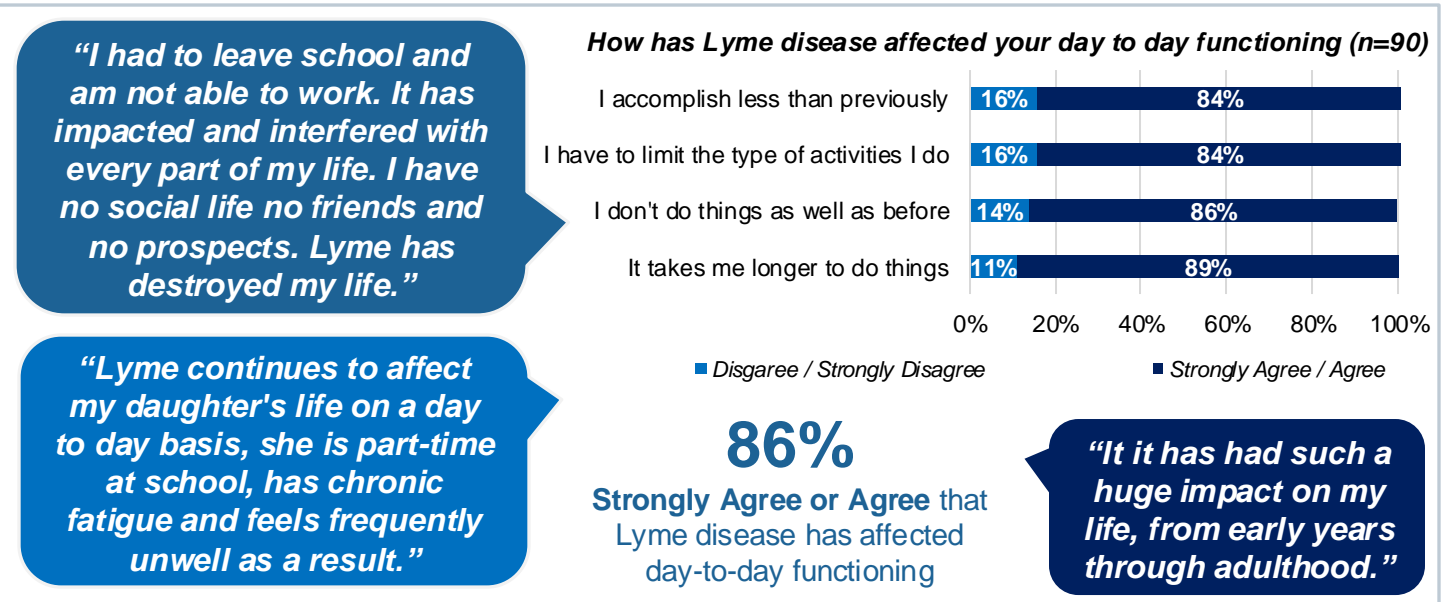
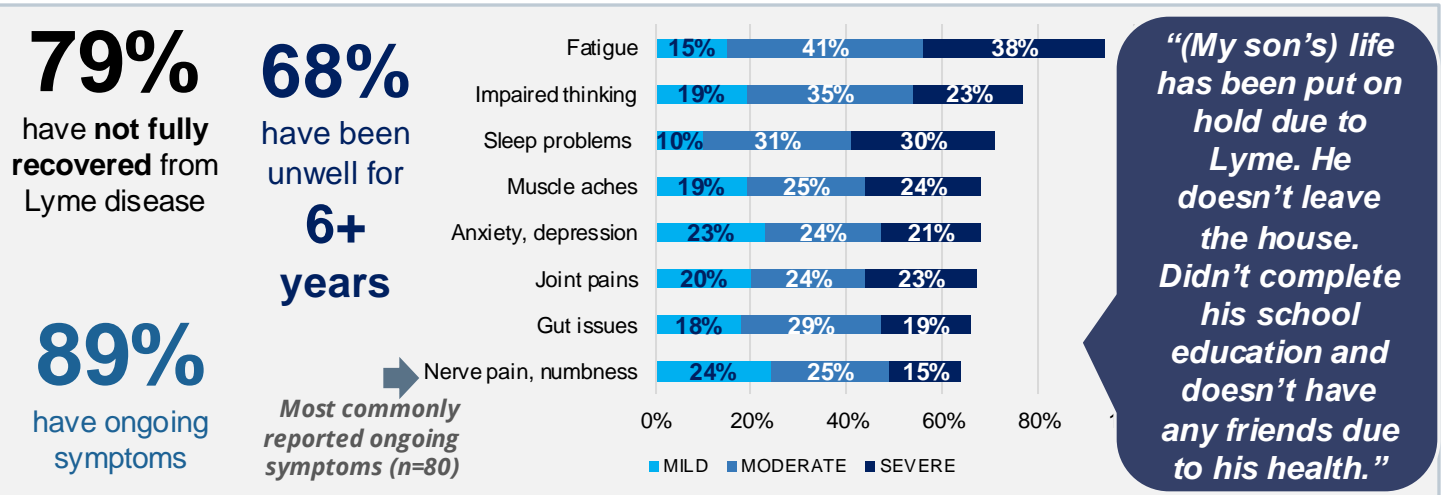
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## ONGOING NEEDS - of those with consequences of Lyme disease must be met

NICE guideline states ‘Symptoms can be more severe and long-lasting if treatment is delayed’.

### SURVEY SUGGESTS SIGNIFICANT ONGOING NEEDS FOR MANY WITH LYME DISEASE

**90** of 475 respondents aged 18 yrs or under when Lyme disease symptoms began *and* who also reported being diagnosed with Lyme disease by qualified health professional; these responses used for this analysis



Has Lyme disease affected you in other ways? (n=90)	
[all mentions]	
Affected social life and hobbies	92%
Affected relationships with family, friends	81%
Financial loss	74%
Stigma associated with Lyme disease	68%
Educational consequences	67%
Career consequences	64%
Loss of independence	60%

*“...I wake each day feeling just as exhausted as when I fell into bed..... I can plan nothing, I lost a glittering career, all of my social circle, my self respect, the respect of others, and all joy. It has been devastating, like a stolen life.”*

## About Lyme Resource Centre (LRC)



[Lyme Resource Centre](#) is a Scottish registered charity (SCIO: SC049151) focused on educating the public and health professionals about Lyme disease & other tick-borne illnesses.

## About the Survey

From 1<sup>st</sup> February to 30<sup>th</sup> April 2024, LRC ran a **Lyme Disease Experience Survey** in UK and Republic of Ireland, to explore awareness of ticks and Lyme disease and *capture the lived experiences of people affected by Lyme disease*, including diagnosis, treatment and health outcomes.

The survey sought to capture responses from people who had fully recovered from Lyme disease as well as those with ongoing symptoms and aimed to drive meaningful change for people who contract and live with Lyme disease and its consequences.

In researching the approach to the survey LRC consulted with the CEO of [MyLymeData](#), a USA based, patient-powered research project with significant experience in surveys and patient data collection for Lyme disease.

Survey Monkey was chosen as the platform for the survey due to ease of use, functionality and cost effectiveness.

## Survey Method

To avoid concerns over data privacy and to encourage open, honest responses, the survey was conducted anonymously and participation was voluntary.

Participants were recruited via

- open invitation on the LRC website
- social media channels (Facebook, Instagram, LinkedIn, X [Twitter])
- other organisations including Lyme Disease UK, TickTalk Ireland, Lyme Disease Alba, and others who shared and promoted the survey
- organisations whose members or followers use the outdoors professionally, educationally or socially (e.g. National Farmers Union, Forest Schools Association, Ramblers Association)
- individuals, who raised awareness of the survey with their own personal networks.

## Survey Respondents

Out of 491 completed responses between 1st February 2024 and 30<sup>th</sup> April 2024, *475 reported a diagnosis of Lyme disease confirmed by a qualified health professional. **Ninety (90) of these respondents were 18 years or under when symptoms of Lyme disease began and form the basis of this analysis.*** Respondents who could **not** report a diagnosis of Lyme disease by a qualified health professional (including self-diagnosis) were excluded.

Respondents were asked to confirm their answers were accurate to the best of their knowledge prior to submitting their survey response. The large number of completed responses (almost 500) should minimise the impact of any response inaccuracies.

There was no direct access to patients themselves or to any medical records.

We are mindful that some people who fully recovered from Lyme disease may have been unaware of the survey - we aimed to address this by promoting the survey via outdoor organisations.

People with undiagnosed Lyme disease are not represented in this survey.

## References

- NICE Guideline [NG95] Lyme Disease <https://www.nice.org.uk/guideline/ng95>
- *HSE Expert Advisory Committee - Antibiotic Prescribing - Lyme disease* <https://www.hse.ie/eng/services/list/2/gp/antibiotic-prescribing/conditions-and-treatments/skin-soft-tissue/lyme-disease/>
- HSE HPSC advises - Be tick aware, keep you and your family safe from Lyme disease, May 2024 <https://about.hse.ie/news/hse-hpsc-advises-be-tick-aware-keep-you-and-your-family-safe-from-lyme-disease/>