Navigating Lyme Disease: Awareness, Diagnosis And Impacts Transcript

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Lyme Disease Awareness and Rising Concern

Welcome back to ADHD, Autism and Chronic Disease Parenting Summit. I am here with the amazing Doctor Sugden, who is an expert at the Gordon Medical Center and, loves talking about Lyme and pregnancy.

So thank you for joining us here. Thanks for having me. I appreciate, appreciate the set up. I think it's a really great topic because Lyme disease is in the news.

I feel like more than ever, people are more concerned about it. And then certainly when we're talking about parents and in pregnancy, there's just been a lot more alarm about it.

So maybe we can just start with kind of what's going on with Lyme disease, what's the situation and why? Why are we hearing about it more? Well, I think that, interestingly enough, I think Covid changed some of the culture in regards to speaking about neurological deficits and chronic illness in general, that, you know, that there are diseases, that there is more, more being said and, and, acceptance of I'll say it that way in regards to, these chronic neurological issues.

And, you know, I think that it hasn't been a surprise for any of us in regards to the Lyme literate community, but it's now clear that there are probably a little over 400,000 cases a year now being discovered.

And I think that number may be low even, even because people aren't getting tested and or they're, there isn't great testing options.

Testing Challenges and Better Screening Options

And so, yeah, I think for both reasons, I think just the actual numbers coming up and discovery, you know, with the with those numbers, you know, I think that there, you know, I think we're in and and again, this correlation I think with Covid making it more acceptable to talk about these, these, you know, chronic neurological issues.

And you know, these from my perspective, it seems like the numbers are going up from what we're we're seeing statistically. And I would venture to say and I'm curious what you think.

That's probably both like we're just more aware of it. Some more people are testing and we're looking into it, but probably it's also going up a little bit more as well.

What are you thinking? What are you seeing. Yeah, I think both I think the awareness that there are for testing methods in just standard medicine, you know, looking at an Eliza test for a case that's been, you know, had chronic illness for five plus years is not ever going to be a great screening tool.

And, you know, that's our that's our typical screening mechanism in Western medicine. And so how do we you know, just the awareness of other testing methods that are out there?

Not even necessarily, you know, I mean, MDL, you know, but I don't know how much I can talk about, other labs, but you know, I genic certainly is, you know, one of the leading experts in tick-borne testing, but just knowing that there are other options that have, better, better accuracy in their testing methods.

I think, people are becoming more aware of that as well. So I guess just just going back a little bit because not everyone would necessarily be familiar.

But let's say, you know, I'm a parent and, you know, whatever. And I'm worried that maybe I have it, maybe I have some symptoms. I looked into it. I'm concerned.

So what what is it that you would suggest that somebody do and what would be the normal? So I feel like normal. Be like you go to your doctor. They would send in, like, antibody testing or something like that.

And look for that. So do you suggest they do that and do something else or what do you, what do you think is going to be the most likely to find the answer for them, if it is in fact, Lyme disease, tick borne disease?

Are you talking about just in general population, or are you talking about specifically women that are trying to or I think. Let's just do both. So in the general population, or if there's something different for pregnancy that you would suggest.

Yeah. So I think in, in general, you know, I think that depending upon obviously where you grew up, you know, higher incidences of, tick borne illness, I think matter.

You know, although I think that the vast majority of the country does have cases of, tick borne illness, I think just even knowing that, a basic Elisa test is not a great screening tool, especially if we've had symptoms for a significant amount of time, you know, months to years.

And, and so just, just even asking for a Western blot, you know, instead of just analyze the test for the first screening tool might give us even a greater number of just the general population, being able to, to know if, if tick borne illness is, is a direction that they need to go.

Lyme disease in particular for the Western blot.

Lyme in Pregnancy and Transmission Risks

If that all is negative, you know, a consideration, especially if you've ever had known tick bites and or an actual bullseye, rash. You know, don't just leave it at that.

If we've got symptoms that, you know, lead you to believe that there, when you look at the laundry list of, of potential symptoms, picture of Lyme disease, you know, then consider finding a Lyme literate doc in your area or a consultation with somebody that is Lyme literate.

That can give you other screening options, so that you really can shut the door to this or, or be able to, you know, explore options in regards to treatment.

Yeah. Which is a great tip in general, because, you know, it's really important for families to be aware that, well, medicine, modern medicine has a lot of great tools.

A lot of times you're going to get very basic stuff done and then it's like, oh no, you don't have it. And especially if it's something where it's chronic and it might not show up or probably won't show up on some of the basic testing.

And you might need somebody who's dug into this a little bit more and know some of those other tests or the more, you know, newer tests, things like that.

And this is true for, for Lyme or, or many other conditions that, that, you know, we talk about. Check. Yeah. And for someone who is diagnosed. So if somebody, if a mom knows that she has Lyme, what what are your thoughts on transmission to baby.

I know this is still, you know, somewhat controversial. It could have gone back and forth over the years. But what what's the latest on that? I think that it's fairly, acceptable to to say that there, that there is, known potential transmission rates.

You know, doctor Ray Jones probably did the most research in regards to this. And he would say, a mom that was active going into pregnancy knowing active Lyme, I am positive, for instance, has about a 5050 shot that they will transmit, Lyme to the fetus and the the way to know that really is then, delivery, taking cord blood, the possibility of,

other tissue samples you can do certainly placental, tissue samples.

If it was a boy and you did a circumcision, we often recommend doing sampling of the the foreskin as well, just to get as much data points as we can in regards to whether there was transmission at the time.

You know, of, pregnancy. If a mom comes in and she's already pregnant, has a past history of treating Lyme, but had no symptoms for a number of years.

In the middle of pregnancy, it's very hard to actually test because you have a known, you know, immune suppression, to be able to carry the fetus. And so doing antibody testing at that time isn't going to be accurate.

You can try doing a PCR testing. And PCR testing is very accurate if we actually get a positive. But it's not it's not my best way of, testing method because it's, it's a little bit like a needle in a haystack just because you take a sample of blood and don't see, PCR positive, you know, bug, present doesn't necessarily mean the needle is in there.

It just means that sample didn't have any of the bug present in the blood. And so a conversation, then, you know, in regards to past history, what were what were the, the severity of the symptoms that, that they may have had in the past?

How long has it been since last treatment? You know, is all going to be a part of that conversation, that early conversation and then a consideration of, you know, do we consider a single antibiotic or a double antibiotic throughout the time of pregnancy?

Certainly there's pros and cons to that, but it would reduce transmission rates, you know, from 5050 chance to 5% approximately if we did a single antibiotic during pregnancy, down to less than 1% if we did a double, antibiotic during pregnancy.

So and we see those statistics shine through in regards to post testing, you know, at the time of delivery with again, the PCR testing for blood testing. So, you know, I would say those statistics do hold up if you're doing that type of testing in a clinical setting.

Preconception Planning and Treatment Timing

And then what about other. So there's other tick borne illnesses to be aware of or other concurrent conditions. I feel like we're hearing a lot more about like for PCOS and some other things.

So what what are some of the other, you know, if you're worried about tick borne illness, then then, you know, maybe we can dive into that for a little bit.

I mean, optimally, I would have a woman come in 6 to 9 months prior to wanting to get pregnant right there where you where you've got. And that's probably true for anything, right?

That's true for you had heavy metals if you needed to detox, if you you know you anything, you know you want the optimal womb, if you can to to be able to, to, to have a healthy, good pregnancy and, not always the case, but in an ideal scenario, you know, 6 to 9 months ahead of time, I would do testing so that I would know if I needed to treat prior to actual, actually getting pregnant.

So if they had a long history in the past, or even a history that then has been in remission for a number of years, I still think getting a current accurate testing makes the most sense, so that we know kind of where we're headed in this pregnancy if we have again, asymptomatic coming in was treated in the past still showing IDM positive antibodies, then, you know, it's a discussion of statistics in regards to being on an antibiotic throughout that pregnancy or not.

And and if they are, symptomatic, do we want to consider a treatment course of treatment, you know, for maybe up

to a three month time frame and then be able to have three months off of, antibiotic or, or treatment therapy, whether it be herbal or otherwise.

And then recheck antibodies prior to actually getting pregnant. That would be an ideal scenario in my mind. Right? You have a course of treatment based on what it is that's presenting to you at the time, and then we've got some time to be able to actually treat that patient before we have the risk of transmission.

Yeah. That's that's great. I mean it's all interesting because I feel like we you know even in medical school didn't learn anything about this. I mean maybe they'll know a little bit more about it now.

But I feel like you don't really hear much about it. And I think a lot of people, if they did have Lyme or do have Lyme, don't do anything or don't even really think about it.

And I think that's really helpful for somebody who, you know, maybe there are other options and it would be worth before getting pregnant if they have the option to discuss.

You know what what the latest research shows. I think that that's that's super. Well, I, I didn't ask you before, but I probably should have. We kind of glanced over it.

But for those who, you know, maybe are concerned about Lyme disease for themselves, what are the symptoms that they should be worried about? Because I think that's also, you know, pretty relevant for this too, in terms of like, not just for getting pregnant, but also just considering if you might have one disease.

Yeah. I mean, I think in general, there's lots of resources online in regards to the laundry list.

Symptoms, Co-Infections, and When to Suspect Lyme

There's a lot of symptoms that can overlap with you and even other diseases. So I don't I don't ever even as a Lyme literate doc, I don't ever just assume that everybody that comes in with X, y, z, symptomology, is Lyme disease.

There's a lot of things that can look a lot like it. But, I would say in general, if somebody has been, you know, diagnosed with a rheumatoid condition, you know, at a young age in particular where it seems a little, out of the norm, it's not in their family history.

You know, joint joint pain, joint swelling, migrating pain. So this week, I really have pain in my shoulders. And then two weeks from now, I really have pain in my knees, and then my ankles are hurting, and, you know, bottoms of the feet, you know, can be co-infections.

That can cause it, you know, coagulation issues, interestingly enough, you know, Lyme can cause a fair amount of, you know, vascular disruption, which, again, ties back into a lot of these post Covid cases.

You know, that can look very similar in regards to that. But, you know, history of even, you know, it's a lot of sinus head stuff. This is more of a kid, kid related.

So when kids have a lot of nosebleeds, early on and in life and then and then, you know, for women in particular, they have hemorrhaging issues or heavy, heavy, you know, periods, even as you see your, you know, young 12, 13 year old that that has a lot of issues that way, bleeding disorders in general, interestingly enough, can be linked back to, Lyme and co-infections.

So, you know, just being aware and not I think my biggest thing always is to educate patients on their bodies and what is, you know, quote unquote, normal.

And, and when it's abnormal or doesn't feel right, don't ignore those symptoms. Let's, you know, figure out where that's coming from. Let's discover whether it be disease or whether it be, you know, and disorder, whether it be, you

know, heavy metal toxicity, mold, you know, whatever.

I know you've you've dived into that, quite a bit in your practice. So, you know, I think I think looking at all of those pieces, and just not looking at the totality of symptoms and not just saying, oh, well, I'm 40 now.

And so that means I should feel this way. No, you know, expect that you're going to feel good. And why is it that you're not feeling good, in any particular direction of, of your health quality of health.

Perfect. Well, I think that's very helpful. I think it's a really good summary and kind of starting point for people to think about Lyme, which is a very, very important topic.

And I think getting more, more important and relevant today, especially just like you mentioned, there's a lot of overlap. So I think that, you know, we don't want to be too narrow minded in assuming everything is is Lyme, but I think it should be on the differential for a lot of the things that, you know, people have concerns, you might have other diagnoses and maybe you never considered this before.

It's something where, especially with those chronic conditions with multiple symptoms, that it would be a good thing to get checked, you know, sooner than later.

And if not, then then working with somebody like you or Lyme expert is is really very helpful. And there are different ones around the country. So maybe we can just finish off by telling people where they can find you a little bit more about you, and then maybe some resources in terms of if they want to look for Lyme practitioners.

Yeah. So, if, if anybody in particular wants to and wants to find me, go to Gordon medical.com and book a discovery call is our is our best way to to find me.

Finding a Lyme-Literate Practitioner and Resources

And one of my staff will go through kind of what our clinic is about and what we can offer. And I would say in general, islands is probably my, is probably our best resource in regards to finding other Lyme literate docs around the country, that have done specialized training in regards to, up to date latest options in regards to treatment, which is ever evolving too.

Right? As you mentioned, you know, a lot of, cases of the ecosystem and, you know, even stubborn Bartonella cases have been, which are considered co-infections to a tick bite.

But we know there's other vectors, you know, for those things as well. Bartonella in particular, you know, can, you know, smaller vectors such as mites and fleas and things like that can be can be a vector for.

So, you know, just being, you know, being aware of what your history is being aware of when symptoms began, you know, I think is is key. But I think that, you know, those looking at a practitioner that's looking at what are the latest research is out there and options for treatment, that's all.

So, well, thank you for sharing your wisdom and and going through this. I think it's very helpful for parents. And, thank you for everybody for, tuning in.

We'll see you in the next session. All right. Great. Thank you so much. Appreciate it. Thank you for having me.