

Division of Vector-Borne
Infectious Diseases
National Center for Infectious Diseases
Centers for Disease Control
and Prevention

Volume 4 --: No. 5 Date: November 1993

CDC LYME DISEASE EXTRAMURAL RESEARCH AND EDUCATION PROGRAM

Funding of Previous Work

The Division of Vector-Borne Infectious Diseases recently responded to a request for information on the funding of the CDC Lyme Disease Extramural Research and Education Program. This response included an outline of support to Cooperative Agreements. This information is in the public domain, and we consider that it may be useful to the readership of the Lyme Disease Surveillance Summary. CDC is gratified by the success of the Lyme disease Cooperative Agreement projects, and has benefitted greatly from the collaboration. Table 1 lists the recipients of CDC funding and gives a narrative description of the projects conducted. Table 2 lists the amount of funds expended for each project.

New Cooperative Agreement Funding Cycle Anticipated

The DVBID is pleased to announce the availability of \$2,700,000 to be used in funding the first year of a new 3-year cycle of competitive Cooperative Agreements to conduct research on Lyme disease. Public and private non-profit organizations, universities, state and local health departments and research institutes are eligible to apply. It is anticipated that Program Announcement #400 will be published in the Federal Register by early to mid-December 1993. Applications will be due in the Procurement and Grants Office at the Centers for Disease Control and Prevention in Atlanta, GA on or about January 31, 1994. Specific instructions for application format, structure, contents, mailing instructions, etc., will be detailed in the announcement. Individual application packets may be obtained by writing to Mr. Locke Thompson (RE: Program Announcement #400), Centers for Disease Control and Prevention, Procurement & Grants Office, Mailstop E18, Atlanta, GA 30333.

Postdoctoral Position Available

The Lyme disease research group at the Centers for Disease Control and Prevention in Fort Collins, CO has a posteoctoral research position available for the study of the immune response to B. burgdorferi in a model using natural tick transmission of infection to mice. Experience in basic immunology and molecular biology techniques is required and knowledge of vector biology and/or microbial pathogenesis is desirable. The position is funded by a Collaborative Research and Development Agreement between CDC and SmithKline Beecham Animal Health. Salary is commensurate with experience. Please send curriculum vitae and three letters of reference to Dr. William T. Golde, Division of Vector-Borne Infectious Diseases, CDC, P.O. Box 2087, Fort Collins, CO 80522.

Serology of Borrelia burgdorferi in White-Tailed Deer--An Update

The Vertebrate Ecology Section, Medical Entomology and Ecology Branch, DVBID, has been cooperating with Dr. James Gill of the Microbiology Department, University of Minnesota (UM), to perfect the ELISA test for serology of B. burgdorferi in white-tailed deer. In our first study, we demonstrated that white-tailed deer generated an antibody response against B. burgdorferi that is detectable by the ELISA test and confirmed by Western immunoblotting conducted at UM and concluded that deer are potential sentinel animals for serologic surveillance (Gill et al. 1993. J Clin Microbiol 31:318-322). In the second study, we found that deer are excellent sentinels for B. burgdorferi in Minnesota and could be used to assess the risk of acquiring Lyme disease. The deer seropositivity rates closely coincided with I. scapularis population boundaries. We found that fawns should be excluded from surveillance because both yearling and adult deer had higher seropositivity rates. The primary advantages of using deer are (1) the ease of obtaining samples through hunter cooperation; (2) the limited range of movement of deer; (3) the attraction of deer for the *Ixodes* tick species; (4) the vigorous immune response against B. burgdorferi in deer; (5) relatively long-lived animal for multiple exposure to B. burgdorferi; and (6) the cost effectiveness of this method over more labor intensive methods of tick collection, rodent sampling, and isolation and identification of spirochetes. However, the labor intensive methods may be necessary in areas or states in which the presence of I. scapularis (or other Ixodes tick vector species) or B. burgdorferi has not been established. A similar cooperative study on ELISA serology of white-tailed deer populations in Pennsylvania has been in progress with Drs. Jan Humphreys and Rex Lord at Indiana University of Pennsylvania for the past three years. The seropositivity rates in Pennsylvania deer also generally coincided with the distribution of I. scapularis and endemic Lyme disease within the state.

Erratum

LDSS (1993;V4(N4):2) contained a mistake in the note describing the newly discovered enzootic cycle of *Borrelia burgdorferi* in Colorado. The last sentence of the last paragraph of this note should read: "In Colorado, *Dermacentor andersoni* readily feeds on humans and is known to parasitize rodents involved in this newly described transmission cycle; the closely related species, *D. variabilis* and *D. occidentalis*, are considered incompetent transmitters of *B. burgdorferi*."

AUKCEMENTS	Grant #	RESEARCH TOPICS
American Lyme Disease Found. California Health Dept. Connecticut Arthritis Foundation Connecticut Health Dept. Cornell University Council of State & Territorial Epidem. Lyme Disease Foundation Marshfield Clinic Medical College of Georgia Michigan Health Dept. New England Medical Center New Jersey Health Dept. New Jersey Medical School New York Medical College (Bucher) New York Medical College (Fish) New York State Dept. of Health New York State Dept. of Health New York State Dept. of Health New York State University Rhode Island Health Dept. Seatuck Foundation Tulane University University of California, Berkeley University of New York-Stony Brook Virginia Health Dept. Yale School of Medicine	U50/CCU206603 U50/CCU106598 U50/CCU106598 U50/CCU106598 U50/CCU106595 U50/CCU106595 U50/CCU106595 U50/CCU506616 U50/CCU506636 U50/CCU206567 U50/CCU206582 U50/CCU206605 U50/CCU206605 U50/CCU206605 U50/CCU206626 U50/CCU206626 U50/CCU206626 U50/CCU206626 U50/CCU206626 U50/CCU206626 U50/CCU206626 U50/CCU206626	Development & distribution of educational materials (videos, PSAs & brochures) Surveillance & epidemiologic studies of Lyme disease in California Development & distribution of educational materials (videos, PSAs & brochures) Surveillance & epidemiologic studies of Lyme disease in Connecticut; development & distribution of educational materials (videos & teaching modules) Studies on the ecology and control of Lyme disease vectors Evaluation of national Lyme disease surveillance Development & distribution of educational materials (videos, PSAs & brochures) Development of improved diagnostics; devel. & distribution of ed. materials (videos, PSAs & brochures) Development of improved diagnostics; devel. & distribution of ed. materials (videos, PSAs & brochures) Burgdorferi in southern US Surveillance & ecologic studies of Lyme disease; determine vectors of B. burgdorferi in southern US Surveillance & ecologic studies of Lyme disease in Michigan Development of diagnostic tests and studies of pathogenesis Studies on the control of Lyme disease in NJ; education Evaluation of immune complexes in laboratory diagnosis of Lyme disease Diagnostic laboratory test development (antigen detection methods) Studies on the ecology, prevention & control of Lyme disease Development & distribution of educational materials (videos, PSAs & brochures) Surveillance & epidemiological studies of Lyme disease in NY State Studies on the distribution of educational materials (videos, PSAs, & teaching modules) Lyme disease surveillance and education in Rhode Island Development of strategies for control of Lyme disease Primate model of Lyme disease; studies of pathogensis & immunology Ecologic studies of Lyme disease; studies of pathogensis & immunology Ecologic studies of Lyme disease; studies of Lyme disease Surveillance, epidemiologic & ecologic studies of Lyme disease in VA and NC

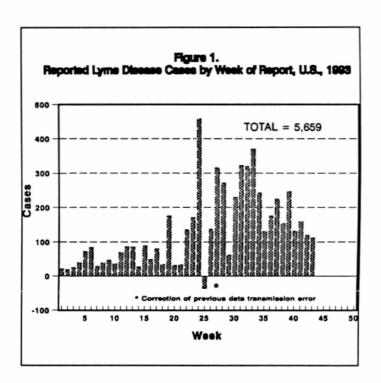
COOPERAT	IVE	AGREEMENTS

Grant

American Lyme Disease Found.	U50/CCU206603
California Health Dept.	U50/CCU906612
Connecticut Arthritis Found.	U50/CCU106623
Connecticut Health Dept.	U50/CCU106598
Cornell University	U50/CCU206642
Council of State & Territorial Epidem.	U50/CCU106562
Lyme Disease Foundation	U50/CCU106595
Marshfield Clinic	U50/CCU506616
Medical College of Georgia	U50/CCU406614
Michigan Health Dept.	U50/CCU506636
New England Medical Center	U50/CCU106615
New Jersey Health Dept.	U50/CCU206567
New Jersey Medical School	U50/CCU206582
New York Medical College (Bucher)	U50/CCU206605
New York Medical College (Fish)	U50/CCU206626
New York State Dept. of Health	U50/CCU206575
New York State Dept. of Health (1)	U50/CCU204900
Penn State University	U50/CCU306618
Rhode Island Health Dept.	U50/CCU106585
Seatuck Foundation	U50/CCU206621
Tulane University	U50/CCU606604
University of California, Berkeley	U50/CCU906594
University of New York-Stony Brook	U50/CCU206608
Virginia Health Dept.	U50/CCU306589
Yale School of Medicine	U50/CCU106581
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FY 90	FY91	FY92	FY93	TOTAL
	\$100,000	\$119,999	\$106,067	\$326,066
	\$136,884	\$137,001	\$107,693	\$381,578
	\$17,594	\$18,578	\$10,450	\$46,622
	\$142,101	\$161,343	\$167,426	\$470,870
	\$30,107	\$51,575	\$53,796	\$135,478
	\$74,994	\$0	\$0	\$74,994
	\$198,948	\$211,837	\$179,386	\$590,171
	\$50,302	\$58,919	\$41,293	\$150,514
	\$65,807	\$83,275	\$98,863	\$247,945
\$250,000	\$41,801	\$60,576	\$65,384	\$167,761
	\$94,185	\$96,358	\$96,358	\$286,901
	\$81,023	\$81,120	\$93,405	\$255,548
	\$90,553	\$36,450	\$36,450	\$163,453
	\$78,266	\$98,266	\$115,615	\$292,147
	\$155,884	\$143,783	\$139,002	\$438,669
	\$99,214	\$223,111	\$209,999	\$532,324
	\$117,552	\$0	\$0	\$367,552
	\$136,740	\$160,751	\$144,329	\$441,820
	\$73,213	\$73,007	\$76,647	\$222,867
	\$143,031	\$145,148	\$145,112	\$433,291
	\$146,026	\$217,880	\$238,514	\$602,420
	\$72,849	\$76,336	\$75,606	\$224,791
	\$159,725	\$164,285	\$166,902	\$490,912
	\$164,896	\$165,728	\$173,395	\$504,019
	\$170,755	\$131,786	\$ 156,737	\$459,278
\$250,000	\$2,642,450	\$2,717,112	\$2,698,429	\$8,307,991

The numbers of Lyme disease cases reported through NETSS in the period January through October 30, 1993 are shown in Figure 1. Of the total 5,659 cases reported through Week 43, 4,425 (78%) were reported from the mid-Atlantic and New England regions. Upstate New York and Pennsylvania have reported 2,202 (39%) of cases during this 1993 period.



Lyme Disease Surveillance Summary (LDSS) is edited by Drs. Roy Campbell and David Dennis. If you have information to contribute or wish to receive a LDSS, please contact them at:

CDC/DVBID Lyme Disease Surveillance Summary P.O. Box 2087 Fort Collins CO 80522