Ann Agric Environ Med 2005, 12, 335

LYME DISEASE (BORRELIOSIS) IN EUROPE

IV Lyme Disease Action Conference, Sheffield University, United Kingdom, 17-18 June 2005

The Lyme Disease Action (LDA) is a leading English non-profit organization for combat borreliosis in Europe. LDA is well known for bringing together medical staff, academic researchers, and patients with vector-borne diseases, especially tick-borne diseases. LDA additionally collects and shares information about Lyme disease and organizes conferences in this field. Lyme Disease Action's first three UK Conferences on Tick-Borne Diseases, held in 2001, 2003 and 2004, have resulted in a considerable improvement in the understanding and treatment of many tick-connected conditions. IV Lyme Disease Action Conference was held on 17-18 June 2005 in Halifax Hall, University of Sheffield, UK. I had the pleasure to give a lecture on Borreliosis and Nervous System. In addition to myself, 10 lecturers and several medical professionals, patients and caregivers had an opportunity to speak and learn about Lyme borreliosis. The 2005 Lyme Disease Action Conference was chaired by Dr David C. Owen. In his introductory lecture he concentrated on seminal papers on Lyme borreliosis. The keynote speaker during the meeting was Dr Joseph Jemsek, the leading physician in the field of Lyme disease in the USA. He gave two very informative talks: Lyme Borreliosis Complex, a comprehensive approach to a multisystemic illness and co-existing conditions coinfections and co-morbidities during which he commented on co-morbidities and associated difficulties in the diagnosis of Lyme borreliosis. Thanks to Dr Marie Kroun practical demonstrations were presented. As a pediatrician she has gained broad clinical experience working with children with borreliosis. Dr Kroun designed the borreliosis website - Lyme RICK. During the conference, Dr Kroun presented under the microscope abnormal findings in the sera of patients and commented on different forms of Borrelia. The next speaker, Dr Wain Wright, is a senior lecturer in the Department of Molecular Biology and Biotechnology at the University of Sheffield, UK, and specializes in novel aspects of microbial growth and metabolism. The subject of his study is microbial oligotrophy in relation to the occurrence of pleomorphism among bacterial species, which may be of particular relevance to the biology of species linked to clinical Lyme disease. Dr Wright investigates which roles Borrelia may play in the Chronic

Fatigue Syndrome (CFS) pathology. The next speaker, Dr Vance Spence (University of Dundee, Scotland) talked about Chronic Fatigue Syndrome and possible infectious pathogenesis of this condition. He investigates the CFS as a pro-inflammatory condition in the context to borreliosis. A very interesting lecture was given by Dr Bela Bozsik, a physician with experience in microscopy and serological investigations in the field of borreliosis. He has developed a particular reagent and method concerned with the diagnosis of Lyme disease. Dr Bozsik started the Lyme Borreliosis Foundation in Hungary. Amongst his other achievements are proposals for diagnostic and therapeutic scheme for those with seronegative borreliosis. His informative lectures focused on the complicated treatment of Lyme disease. After the clinical lectures, attention was focused on microbiology. Dr Beata Wodecka (Szczecin Medical Academy, Poland) concentrated her lecture on the topic of the Borrelia biology. Her publications on this subject include papers on the First isolation of Borrelia lusitaniae DNA from Ixodes ricinus ticks in Poland, Detection of DNA of Borrelia burgdorferi sensu lato in Ixodes ricinus ticks in north-western Poland, and others showing evidence of co-infections of ticks with different genospecies of Borrelia burgdorferi sensu lato. Dr Wodecka spoke about the flagellin gene (flaB) as a RFLP marker for the identification of Borrelia burgdorferi sensu lato genospecies isolated from the blood of patients suspected of having borreliosis. My participation in the conference concentrated on neuroborreliosis and presented studies: Neurological and psychological symptoms after severe, acute neuroborreliosis; Dysarthria as the isolated clinical symptom of borreliosis and Neurological, neuropsychological and immunological aspects of neuroborreliosis and tick- borne encephalitis. In addition, I commented on CFS, a following tick-borne disease, based on our observational study. In the lecture, Neurological aspects of borreliosis, I described the epidemiology and clinical manifestation of neuroborreliosis among the population of the Lublin district.

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