

April 15, 2022

Office of the Assistant Secretary for Health
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
Room 715-G
Washington, D.C. 20201

Submitted by email at tickbornedisease@hhs.gov

RE: IDSA Comments to Tick-Borne Disease Working Group

The Infectious Diseases Society of America (IDSA) is writing to provide input to the Tick-Borne Disease Working Group (TBDWG) ahead of its April 27, 2022, meeting to review and finalize the work of the Working Group's subcommittees and develop recommendations for its 2022 report to Congress.

IDSA represents more than 12,000 infectious disease physicians, scientists, public health practitioners and other health care professionals specializing in infectious diseases. IDSA members focus on the investigation, diagnosis, epidemiology, prevention and treatment of infectious diseases. Our members care for patients of all ages with serious infections, including tick-borne diseases. We would be happy to serve as a resource for the Working Group.

IDSA appreciates the work of the Working Group and its subcommittees as presented during its last meeting. The inclusion of improving diagnostic and therapeutic approaches to tick-borne diseases in the findings of the subcommittees was welcome. Involving industry partners and incentivizing the development of therapeutics for tick-borne diseases with smaller patient populations is a critical component of tick-borne diseases treatment. Additionally, the focus on improving tick surveillance was also welcome and is crucial to include as an essential facet of tick-borne disease prevention. IDSA continues to strongly urge the Working Group to ground all its recommendations in the best available scientific evidence. Below, we highlight additional issues that we encourage the Working Group to address and include in its final report.

Evidence-Based Education and Research

IDSA was pleased to see a focus on utilizing the best available, peer-reviewed data at the Feb. 29 meeting of the TBDWG. If the working group opts to create or review existing tick-borne disease educational materials, IDSA continues to emphasize the importance of relying upon peer-reviewed evidence. Any educational materials and curricula for clinicians-in-training and continuing medical education should be based on well-designed experimental and clinical studies on Lyme disease and other tick-borne diseases reported in peer-reviewed journals. This focus on peer-reviewed research and data should be at the forefront of any potential review or development of educational materials.

Health Equity and Patient Access

Additionally, IDSA continues to urge the Working Group to prioritize health equity in the prevention, diagnosis, and treatment of tick-borne diseases in underrepresented racial and ethnic groups. Underrepresented groups are highly susceptible to worse outcomes from tick-borne diseases, often due to lack of clinician education in diagnosing dermatologic symptoms of tick-borne diseases on darker skin tones. We reiterate the need to direct support to initiatives that educate health care providers on comprehensive diagnosis of tick-borne diseases in a diverse variety of patient groups. We also reiterate that language supporting the expansion of access to medical professionals and infectious diseases physicians should be included to ensure underserved groups and rural populations have access to comprehensive, evidence-based treatment for tick-borne diseases.

IDSA thanks the Working Group and its subcommittees for their work and attention to tick-borne diseases. We look forward to helping the Working Group advance evidence-based policy that best serves patients and public health. For further collaboration or questions, please contact Amanda Jezek, IDSA senior vice president for public policy and government relations, at ajezek@idsociety.org.