



## Overview/description

### **ACVIM consensus statement on Lyme disease and its relevance to Canada**

Current information on the risk of ticks and tick-borne diseases in companion animals across Canada will be reviewed. Recommendations from the 2018 ACVIM consensus statement on Lyme disease in dogs and cats will be discussed, including the utility of routine screening, management of seropositive animals and prevention strategies.

## Speaker's bio and credentials



### **Andrew S. Peregrine, BVMS, PhD, DVM, Dipl. EVPC, Dipl. ACVM**

Andrew Peregrine obtained his DVM and PhD from the University of Glasgow, Scotland. He then worked for 9 years as a research scientist at the International Laboratory for Research on Animal Diseases, Nairobi, Kenya, where he carried out research to improve control of tropical parasites of cattle. Since 1997 he has been an Associate Professor in clinical parasitology at the Ontario Veterinary College where he teaches DVM students in all years of the program. In addition, his research interests currently include emerging zoonotic parasite infections of companion animals, and drug resistance in parasites of sheep. He is a diplomate of the European Veterinary Parasitology College and the American College of Veterinary Microbiologists.



## Questionnaire

1. An Ontario dog has tested seropositive for "*Ehrlichia*" and has never travelled outside the province. It therefore is most likely infected with:
  - ☐ *Anaplasma platys*
  - ☐ *Ehrlichia canis*
  - ☐ *Ehrlichia chaffeensis*
  - ☒ *Ehrlichia ewingii*
2. The clinical incubation period for Lyme disease in dogs is typically:
  - ☐ 1-2 weeks.
  - ☐ 3-7 weeks.
  - ☒ 2-5 months.
  - ☐ 6-12 months.
3. According to the ACVIM consensus statement, the magnitude of the Quant C6 titre is predictive of illness.
  - ☐ True
  - ☒ False
4. In order for *Ixodes scapularis* to transmit *Borrelia burgdorferi* the tick needs to feed on a dog for at least:
  - ☐ 1 hour.
  - ☐ 6 hours.
  - ☐ 24 hours.
  - ☒ 36 hours.
5. For dogs that live in or near an area endemic for *Ixodes scapularis*, a *Borrelia burgdorferi* antibody test should be carried out:
  - ☐ every 6 months.
  - ☒ every year.
  - ☐ every 2 years.
  - ☐ only if the dogs has clinical signs consistent with Lyme disease.



6. Dogs with clinical Lyme disease that are intolerant of tetracyclines should be treated with cefovecin.
  - ☒ True
  - ☐ False
7. Vaccination of dogs for *Borrelia burgdorferi* is more important than tick prevention for minimising the risk of Lyme disease.
  - ☐ True
  - ☒ False
8. Lyme vaccines should not be administered to dogs that are proteinuric.
  - ☒ True
  - ☐ False
9. A healthy (non-clinical, non-proteinuric) dog has tested seropositive for *Borrelia burgdorferi*. According to the ACVIM consensus statement, the recommended next step for managing the dog is:
  - ☐ treatment with doxycycline.
  - ☒ monitor for proteinuria 2-3 times over the next 12 months.
  - ☐ carry out a CBC 3 times over the next 6 months.
10. A dog in southern Ontario has tested positive for antibody to "*Anaplasma*". The dog should be treated with doxycycline if it:
  - ☐ has a cardiac arrhythmia.
  - ☒ has a CBC abnormality.
  - ☐ is polyuric.
  - ☐ is proteinuric.





**PERSONAL INFORMATION:**

**First name:**

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**Last name:**

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**Type:**

*(Veterinarian, Technician)*

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**Licence number:**

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**Province where you practise:**

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**Telephone:**

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**Email:**

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## CERTIFICATE OF COMPLETION

Educational webcast

**ACVIM consensus statement on Lyme disease  
and its relevance to Canada**

Presented by

**Andrew S. Peregrine, BVMS, PhD, DVM, Dipl. EVPC, Dipl. ACVM**

This document confirms that

***Dr. Lorem Ipsum***

has viewed the above-mentioned webcast and has answered and submitted the  
questionnaire meant to evaluate the understanding of the content.

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