Reply: On the radar: Lyme neuroborreliosis, an infectious cause of cerebral vasculitis

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Sir,
We are grateful to receive Dr Pearson’s comments on this unusual yet clearly important aetiology of cerebral vasculitis. Borrelia serology was not performed prior to commencement of immunosuppressive therapy, nor is this local protocol unless there is history or clinical evidence of tick bite. A physical examination of the skin for cutaneous manifestations of vasculitis found no evidence of tick bite, nor was there a suggestive history. However, due the patient’s extensive articular disease, she was unable to lead an active outdoors lifestyle. At the time of writing, she has suffered no symptoms of disease progression with regard to her cerebral vasculitis.

However, we accept with interest the incidence and distribution of Lyme neuroborreliosis in relation to syphilis in the patient’s demographic. It serves as a valuable reminder of the need for thorough exclusion of infective aetiology prior to immunosuppressive therapy.

Conflict of interest: None declared.

Reference