LIST OF RECOMMENDATIONS

Recommendation 1

2.90 The committee recommends that the Australian Government Department of Health engage with stakeholders following the publication of the National Serology Reference Laboratory review to discuss the findings of the review and any bearing those may have on testing for Lyme disease in Australia.

Recommendation 2

- 2.91 The committee recommends that the Australian Government increase funding for research into tick-borne pathogens as a matter of urgency. This funding should include:
 - funding for research on pathogens which may cause infection;
 - funding for research on whether newly-identified pathogens can cause illness in humans; and
 - funding for the development of diagnostic tests which can detect infection by any newly-identified pathogens endemic to Australia.

Recommendation 3

3.54 The committee recommends that government medical authorities, in consultation with stakeholders including the Australian Chronic Infectious and Inflammatory Diseases Society (ACHDS) and the Karl McManus Foundation, establish a clinical trial of treatment guidelines developed by ACHDS with the aim of determining a safe treatment protocol for patients with tick-borne illness.

Recommendation 4

3.55 The committee recommends that the Australian Government allocate funding for research into medically-appropriate treatment of tick-borne disease, and that medical authorities measure the value of treatment in terms of patient recovery and return to health. The best treatment options must then be developed into clinical treatment guidelines.

Recommendation 5

3.56 The committee recommends that the Australian Government Department of Health facilitate, as a matter of urgency, a summit to develop a cooperative framework which can accommodate patient and medical needs with the objective of establishing a multidisciplinary approach to addressing tick-borne illness across all jurisdictions.

Recommendation 6

3.57 The committee recommends that federal, state and territory health agencies, through the Council of Australian Governments Health Council, develop a consistent, national approach to addressing tick-borne illness.

Recommendation 7

3.58 The committee recommends that the Australian Government Department of Health urgently undertake an epidemiological assessment of the prevalence of suspected tick-borne illness in Australia, the process and findings of which are to be made publicly available.

Recommendation 8

3.59 The committee recommends that the Australian Government Department of Health establish the prevalence and geographical distribution of overseas-acquired Lyme disease in Australia.

Recommendation 9

- 3.60 The committee recommends that Australian medical authorities and practitioners addressing suspected tick-borne illness:
 - consistently adopt a patient-centric approach that focusses on individual patient symptoms, rather than a disease label; and
 - remove 'chronic Lyme disease', 'Lyme-like illness' and similar 'Lyme' phrases from diagnostic discussions.

Recommendation 10

3.61 The committee recommends that, to help the referral of patients for guided and comprehensive pathology testing, medical practitioners work with pathologists, especially microbiologists, immunologists, chemical pathologists and hæmatologists to optimise diagnostic testing for each patient.

Recommendation 11

3.62 The committee recommends that the Australian Government Department of Health work closely with the Australian Medical Association and Royal Australian College of General Practitioners to ensure that general practitioners have a better understanding of how to treat patients who present with complex symptoms.

Recommendation 12

3.63 The committee recommends that treatment guidelines developed by Australian medical authorities emphasise the importance of a multidisciplinary, case conference approach to patient care, involving consultation between general practitioners and specialists with expertise in neurology, psychiatry, rheumatology, immunology, infectious diseases and microbiology.