



St John's Green Primary School

Learn to Live, Live to Learn

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We  Maths



we are all
writers ...

We are growing
our learning 

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Information for Participants – Ticks, Lyme Disease and Weil's Disease

Dear Parents,

Your child will very shortly be taking part in Forest School, which gives them an amazing hands-on opportunity to learn outdoor skills and explore the natural environment.

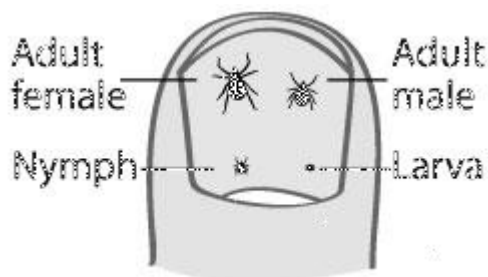
There is **minimal** risk of Lyme's Disease and of Weil's Disease from being in woodland. Below you will find some information about these diseases. **Both diseases are very rare.**

Ticks (Lyme Disease)

Ticks live in long grass and can attach themselves to bare skin and sometimes transmit Lyme Disease. You can be protected from Ticks by wearing appropriate clothing. Covering up properly is an obvious way of easily protecting ourselves from them. It is also important to check for ticks after every Forest School session.

What is a Tick & What Does it Look Like?

Ticks are small, blood-sucking creatures related to mites. They have eight legs and look like tiny spiders. Ticks can survive in many places but prefer woodland conditions. This is also where the animals they feed on (deer and foxes) are most likely to visit.



Once an adult tick has started to feed, its body will become filled with blood. As it fills it generally becomes lighter in colour and can reach the size of a small pea, generally grey in colour. The tick bite itself is totally painless and most people will only know they have been bitten if they become aware of a feeding adult tick attached to them.

Why Do I Need to Be Aware?

Apart from being an unpleasant thing to find, ticks can transmit up to three different diseases, the most common being Lyme Disease. Being bitten will not automatically result in contracting an illness, as not all ticks are infectious.

I've Found a Tick, What Do I Do?

- Don't Panic!
- With **pointed tweezers** grasp the tick as close to the skin as possible without squeezing the tick's body, pull the tick out without



twisting – there may be considerable resistance. If no tools are available, rather than delay, use a **cotton thread**: Tie a single loop of cotton around the tick's mouthparts, as close to the skin as possible, then pull gently upwards and outwards.

- Cleanse the bite site and tweezers, with antiseptic before and after removal.
- Wash hands thoroughly afterwards.
- Save the tick in a container in case you develop symptoms later (label with date and location).

Further information can be found at www.lymediseaseaction.org.uk

- **DO NOT** squeeze or twist the body of the tick, as this may cause the head and body to separate, leaving the head embedded in your skin.
- **DO NOT** use your fingernails to remove a tick. Infection can enter via any breaks in your skin, e.g. Close to the fingernail.
- **DO NOT** crush the tick's body, as this may cause it to regurgitate its infected stomach contents into the bite wound.
- **DO NOT** try to burn the tick off, apply petroleum jelly, nail polish or any other chemical. Any of these methods can cause discomfort to the tick, resulting in regurgitation, or saliva release.

In all cases of tick bites, please inform the school.

Weil's Disease

Leptospirosis and Weil's disease (that it can lead to) are both rare. They can be caught by anyone engaged in a water sport. The information in this leaflet is published on the basis that 'forewarned is forearmed'. The best prevention is by wearing wellies and waterproofs, covering cuts with waterproof dressings and by thorough hand washing before eating.

What is it?

Leptospirosis is an animal infection. Leptospirosis is spread in the urine of infected animals – most commonly rats, mice, cows, pigs and dogs. The bacteria survive for days or even weeks in moist conditions but only for a few hours in salt water. The infection is caught by direct contact with urine or a polluted environment. Bacteria enter through skin abrasions or via the eyes, nose or mouth.

The usual incubation period is 2 to 12 days. Usually a 'flu' like illness occurs which resolves itself in 2 to 3 weeks. There may be fever, severe headache, pains in the back and calf and prostration. Antibiotics during the first few days help in limiting the infection. Many people recover without specific treatment.

If you think that you may have the infection go to your doctor and say that you have been to Forest School that you think that there may be risk of Leptospirosis. The doctor's diagnosis is by clinical suspicion. Blood tests can rarely confirm the illness in time to effect treatment. They may, however, subsequently confirm it.