



## Georgia Lyme Disease Association

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*Working to fight Lyme & tick-borne diseases*

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Letters to the Editor

Newsweek

[letters@newsweek.com](mailto:letters@newsweek.com)

395 Hudson St.

New York, NY 10014

Dear Sir:

Sadly, like so many reporters, Russ Juskalian failed to investigate the Lyme disease debate in his August 24 report, *My Father's Mystery Illness*.

(First, I hope your father's doctor is right, Mr. Juskalian, and can magically tell that he doesn't have active infection, despite his vague complaints. Many are now permanently disabled because they believed such statements. Take heed: This "disconnect" - what some in the medical field report vs. the conflicting scientific evidence and what's actually occurring in patients - is the main reason your father is finding the Internet outcry among thousands of people.)

IDSA guidelines say chronic LD doesn't exist, despite numerous peer-reviewed research studies published for years documenting the bacteria's persistence in animals and man. It's not only the advocates and patients: numerous scientists, medical providers, and professional organizations disagree with the IDSA's "take" on Lyme.

The consequences of Lyme borreliosis can be brutal...losing the ability to walk, drive, work, play, attend school, take care of family. Patients often report getting better after long-term antibiotic therapy. Some, who were in wheelchairs, can now walk and have resumed their lives after such treatment. It's accepted that latent syphilis, also caused by a spirochete, may need months to years of antibiotics. Where's the big surprise regarding Lyme treatment?

We continue to hear that treatment is dangerous - a Lyme patient taking extended antibiotics even died from the resulting side effects. While that's truly sad and unfortunate, people being treated for all sorts of conditions die every day from medical intervention. Like treating any disease, it's a given that extended antibiotics may be dangerous, but so is allowing a serious, ongoing bacterial infection to progress, untreated.

Lyme disease is a huge epidemic. Two analyses presented at the 2009 IDSA conference showed the majority of medical treatment guidelines are based on opinion. "Evidence-based medicine" may be cost-saving upfront, but what occurs later when taxpayers must support millions of patients permanently disabled because guidelines, based on one side of the controversial science, restrict treatment?

Ultimately, patients are the ones who suffer the consequences. Treatment should be their choice. Acne patients are prescribed antibiotics for years and nobody bats an eye. To deny Lyme patients treatment is cruel and inhumane.

Liz Schmitz  
President