

## SUMMER-FALL NEWSLETTER 2009

Tick-borne Infections



Council of North Carolina, Inc

### Highlights...

Scroll down to see these features and more!

*Quote of the month...* As a practicing physician for more than 25 years, I can assure the reader that virtually all doctors fear being ridiculed by their colleagues more than anything else. This fear, more than any other factor that I can identify, appears to almost completely stifle independent medical thought. As Goethe once said: "We would rather admit our moral errors, mistakes and crimes than our scientific errors." Certainly, a small handful of dishonorable physicians may realize that some unwelcome but legitimate medical breakthroughs could reduce their income, and they may oppose those breakthroughs for that reason. However, most physicians really care about and want to help their patients. The problem that remains is how to get physicians and the complete medical truth together. Forman (1981) analyzed this resistance to innovation by some scientists, especially those who are physicians and clinicians. Dr. Thomas E. Levy

### October 1, 2009

[http://www.newsobserver.com/news/health\\_science/story/120289.html](http://www.newsobserver.com/news/health_science/story/120289.html)

After years of cautioning that people were unlikely to get Lyme disease in North Carolina, state health leaders are now advising that the tick-borne illness can, in fact, be acquired here.

In at least four cases this year, Lyme was confirmed among patients who never left their home counties, ruling out the prospect that they picked up the bacterial infection while traveling.

Based on the new evidence, Dr. Megan Davies, state epidemiologist, said the state is now working to get the word to doctors, who for years were reluctant to even test patients for Lyme because it wasn't considered much of a possibility.

Full story and comments:

[http://www.newsobserver.com/news/health\\_science/story/120289.html](http://www.newsobserver.com/news/health_science/story/120289.html)

### ***Detection of an Infectious Retrovirus, XMRV, in Blood Cells of Patients with Chronic Fatigue Syndrome***

Vincent C. Lombardi, Francis W. Ruscetti, Jaydip Das Gupta, Max A. Pfof, Kathryn S. Hagen, Daniel L. Peterson, Sandra K. Ruscetti, Rachel K. Bagni, Cari Petrow-Sadowski, Bert Gold, Michael Dean, Robert H. Silverman, Judy A. Mikovits

Available Online October 8, 2009 in Science Magazine, published by the American Association for the Advancement of Science.

<http://dx.doi.org/10.1126/science.1179052>

#### Reports

Chronic fatigue syndrome (CFS) is a debilitating disease of unknown etiology that is estimated to affect 17 million people worldwide. Studying peripheral blood mononuclear cells (PBMCs) from CFS patients, we identified DNA from a human gammaretrovirus, xenotropic murine leukemia virus-related virus (XMRV), in 68 of 101 patients (67%) compared to 8 of 218 (3.7%) healthy controls.

Cell culture experiments revealed that patient-derived XMRV is infectious and that both cell-associated and cell-free transmission of the virus are possible. Secondary viral infections were established in uninfected primary lymphocytes and indicator cell lines following exposure to activated PBMCs, B cells, T cells, or plasma derived from CFS patients.

These findings raise the possibility that XMRV may be a contributing factor in the pathogenesis of CFS.

#### **TV CLIP ON LYME DISEASE IN CANADA**

Canadian TV investigates Lyme disease and how many people in Canada are being misdiagnosed. There are two 10 minute segments, highly worth your time to watch it.

The 2 part series is called **Out of the Wild**. View it here:

[http://www.ctv.ca/servlet/ArticleNews/story/CTVNews/20091113/w5\\_lyme\\_091114/20091114?s\\_name=W5](http://www.ctv.ca/servlet/ArticleNews/story/CTVNews/20091113/w5_lyme_091114/20091114?s_name=W5)



## **Senate Committee adopts provision of Dodd's Lyme disease legislation**

### ***Will Develop Ways to Identify and Treat Long-Term Effects of Lyme Disease***

A key Senate panel approved legislation proposed by Senator Chris Dodd to help identify and treat Lyme disease. The Dodd measure was included in the annual funding bill for the Department of Health and Human Services.

This provision encourages the Centers for Disease Control (CDC) to develop sensitive and more accurate diagnostic tools and tests for Lyme disease; to improve surveillance and reporting of Lyme and other tick-borne diseases; and to expand prevention of Lyme disease through increased community-based public education and the creation of a physician education program.

Read more at <http://www.connecticutplus.com/cplus/information/news/health/Senate-Committee-adopts-provision-of-Dodd-s-Lyme-disease-legislation56685668.shtml>

## **IDSA PUBLIC HEARING ON THEIR GUIDELINES, July 2009**

This link: <http://www.idsociety.org/Content.aspx?id=15026> to the IDSA website has the presenters and their presentations.

A summary of the IDSA Lyme evidence hearing  
Blog: Under Our Skin, published by Open Eye Pictures.  
Written by: Kris Newby

August 5, 2009

<http://underourskin.com/blog/?p=250>

On July 30, 2009, a newly formed panel from the Infectious Diseases Society of America (IDSA) heard 8 hours of testimony from 18 presenters representing various viewpoints on Lyme disease diagnosis and treatment. This was the first time the two sides of the Lyme controversy have been given equal time in front of a conflict-free evidence-review panel. And it's the first time that a medical guidelines hearing has been broadcast over the Internet for all the stakeholders to hear, from patients to researchers to treating physicians.

The script of the talk at the IDSA hearing by Dr. David Volkman: <http://webcast.you-niversity.com/SLVideoPlayer/Player.aspx?ID=d5384431-2215-4b38-aa9f-0bd78f93a713>

Prof. Kenny De Meirleir:

Hi Friends, here is the long awaited paper!  
Lombardi, V.C. et al. 2009. Detection of an infectious retrovirus, XMRV, in blood cells of patients with chronic fatigue syndrome. Science, online October 8. - doi:10.1126/science.1179052  
<http://bit.ly/BXUnc>

Retrovirus might be culprit  
in chronic fatigue syndrome

People with the condition are much more likely than others to harbor a little-known pathogen

By Nathan Seppa

The long, fruitless search for the cause of chronic fatigue syndrome has taken a curious turn. Scientists report online October 8 in Science that an obscure retrovirus shows up in two-thirds of people diagnosed with the condition. The researchers also show the retrovirus can infect human immune cells. These findings don't establish that the pathogen, called gammaretrovirus XMRV, causes chronic fatigue, cautions study coauthor Robert Silverman, a molecular biologist at the Lerner Research Institute of the Cleveland Clinic.

## **GRANT FOR RESEARCH LOOKING FOR PERSISTANT DISEASE IN LYME DISEASE INFECTIONS**

**"Searching for Persistence of Infection in Lyme Disease"** is a highly innovative Bench-to-Bedside research project that could have an extraordinarily significant impact on the field of Lyme disease. Although antibiotic therapy is clinically effective in treating the symptoms of Lyme disease for most patients early in the course of disease, a significant number of patients who receive therapy report persistent symptoms. A range of theories have been proposed for why this occurs. Moreover, commonly available tests for human Lyme disease are not able to determine persistent infection after antibiotic therapy. Program Director, Linden Hu, MD (Associate Professor of Medicine, Tufts University School of Medicine and Associate Professor of Microbiology, Sackler School of Biomedical Graduate Sciences) has begun an unconventional study examining whether xenodiagnosis (the feeding of uninfected Ixodes ticks on infected animals) can be used to determine when persistent infection occurs in humans. Xenodiagnosis has been used for other difficult to diagnose diseases such as Chagas disease and can sometimes definitively identify the presence of an organism in animals where other techniques cannot. Whether xenodiagnosis is effective in humans is unknown. This two-year project seeks to test the utility of xenodiagnosis for identifying persistence of *B. burgdorferi*, the spirochetal bacteria that cause Lyme disease, after antibiotic treatment of the disease. Dr. Linden's team will test subjects with elevated C6 antibody levels or persistent symptoms after antibiotic therapy and patients with Lyme arthritis. Evidence that *B. burgdorferi* can be identified by xenodiagnosis after antibiotic therapy in subjects with continued symptoms would significantly change the current paradigm for potential mechanisms of disease and provide researchers and clinicians with a novel tool for identifying patients with persistent infection.

**From:** Public release date: 27-Oct-2009 Contact: Randi Triant 617-636-9845

[Tufts University, Health Sciences](#)

**Tufts CTSI and Tufts University receive 4 NIH supplemental grant awards**

*Tick-Borne Infections Council of North Carolina is a non-profit organization formed to improve the recognition, treatment, control, and understanding of tick-borne diseases in North Carolina.*

*We are all-volunteer and appreciate donations.*

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