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Infectious Diseases Society of America

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January 17, 2007

The Honorable Edward M. Kennedy

ATTENTION HEALTH AIDE

United States Senate

Russell Senate Office Building, Room: 317

1st and C Streets, N.E.

Washington, DC 20510

(Letter also sent to: all Senators and House Representatives)

Dear Senator Kennedy:

It has come to our attention that some Members of Congress have received constituent letters related to the recently revised Lyme disease guidelines of the Infectious Diseases Society of America (IDS A). I write to provide additional information on the development of IDS A's guidelines and their application in the practice of medicine. Our primary concern is for patients and the quality of their care.

IDS A represents more than 8000 physicians and scientists and is widely recognized as the pre-eminent authority on infectious diseases in the United States. IDS A authors clinical guidelines for more than 50 diseases, conditions and treatments, including Lyme disease. We recognize that medicine, and the application of practice guidelines, must take into account individual patient needs and circumstances. As such, we make clear that guidelines are not mandates. They are recommendations and are not intended to supersede individual physician judgment. The IDS A guidelines make no recommendations regarding insurance coverage or reimbursement for treatment.

The development of guidelines requires the review of scientific and medical literature. IDS A's guidelines were developed by a 14-member panel of infectious diseases clinicians and researchers, including physicians with many years of clinical experience treating patients with Lyme disease. Nearly 400 references of papers and studies are cited in the IDS A guidelines and many, many more were reviewed that did not meet rigorous scientific standards.

As you may know, Lyme disease is a tick-transmitted infection. IDS A's revised guidelines have been criticized by some because the scientific data reviewed do not support a separate diagnosis of "chronic" Lyme disease, nor do they support long-term (months or even years) antibiotic treatment for patients. Those critical of IDS A's guidelines cite medical treatment

advocated by the International Lyme and Associated Disease Society (ILADS), an association with fewer than 300 members, most of whom are not trained infectious diseases experts and who are primarily defined by their support for a particular point of view, not by a commitment to evidenced-based medicine. IDSA is very concerned certain treatments recommended by ILADS go against generally accepted standards of medical practice and have been shown in the medical literature to be risky, potentially dangerous to patients, and of no proven benefit according to the vast majority of scientific studies.

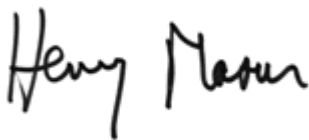
Medicine is continually evolving, and IDSA members do not claim to have all the answers. We support continued research of Lyme disease and will continue to periodically review our Lyme disease guidelines and update them as needed to reflect the scientific literature.

IDSA has profound empathy for patients who are ill and have been told their illness is due to “chronic” Lyme disease. We do not doubt that individuals are suffering, but many report non-specific symptoms that also are associated with a number of other medical conditions. Therefore, IDSA strongly encourages patients diagnosed with “chronic” Lyme disease to seek an expert second opinion to enhance their opportunity for a correct diagnosis and corresponding treatment.

For more information on Lyme disease and the recommendations for its treatment by the vast majority of experts in the field, please visit websites for IDSA (www.idsociety.org), the Centers for Disease Control and Prevention (www.cdc.gov), the National Institute of Allergy and Infectious Diseases (www.niaid.gov), or the American College of Physicians (www.acponline.org).

I hope you will contact Robert Guidos at IDSA if you have questions or would like additional information. Mr. Guidos may be reached at (703) 299-0202 or via e-mail at rguidos@idsociety.org.

Sincerely,

A handwritten signature in black ink that reads "Henry Masur". The signature is written in a cursive, slightly slanted style.

Henry Masur, MD, FIDSA
President, Infectious Diseases Society of America