March 13, 2013

The Honorable Bob McDonnell
Governor of Virginia
P.O. Box 1475
Richmond, VA 23218

Dear Gov. McDonnell,

I write on behalf of the Infectious Diseases Society of America (IDSA) to respectfully request that you veto HB 1933, which will mandate that physicians provide patients tested for Lyme disease a specific written notice.

IDSA is the largest infectious diseases medical society in the United States, representing more than 10,000 physicians and scientists. The Society’s members focus on the epidemiology, diagnosis, investigation, prevention and treatment of infectious diseases in the U.S. and abroad. Our members care for patients of all ages with serious infections, including Lyme disease. IDSA’s 2006 practice guidelines for the clinical assessment, treatment, and prevention of Lyme disease are widely recognized and referenced by physicians across the country. A special Review Panel in 2010 unanimously supported all of the recommendations in the IDSA guidelines, including the conclusion that long-term antibiotic treatment is unwarranted for Lyme disease and potentially dangerous. Our Society supports increasing clinicians’ and patients’ understanding of Lyme disease and how it is diagnosed; we offer resources to clinicians and the public on our website to that end.

Infectious disease specialists understand fully the complexities of arriving at a diagnosis of Lyme diseases. IDSA believes that specific and more sensitive diagnostic tests for Lyme disease are needed. Because of enormous advances in bioinformatics and molecular genetics, significant progress has been made in the development of new diagnostic procedures. However, it must be noted that whenever any new diagnostic test is developed, it must be compared to existing diagnostic methods to ensure that it is indeed superior with respect to specificity and sensitivity before it can be widely used and applied. Since tests for detecting Lyme disease are advancing, we think that handing a mandatory notice to a patient about the efficacy of a particular lab test is of little value. Moreover, using Virginia statute to mandate specific communications between physicians and their patients is bad public policy.

IDSA recognizes that Lyme disease can be painful and that the disease is not always properly identified or treated. We sympathize with patients who suffer from the wide array of symptoms that have been attributed by some to be due to so-called

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“chronic” Lyme disease, but we are concerned that most of these patients have been improperly diagnosed and may be receiving a treatment, i.e., long-term antibiotic therapy, that will do them more harm than good.

IDSA supports the development of improved diagnostic tests for Lyme disease as well as increased education about appropriate treatments for this disease. We cannot support the non-evidence based public health policy decision-making and educational efforts that HB 1933 would institutionalize. We appreciate you consideration of our input.

Sincerely,

Mark Leasure
Chief Executive Officer