International Lyme & Associated Diseases Society (ILADS) has put out a letter responding to the CDC MMWR publication on June 16, 2017 discussing among other things, several cases of bacterial infections which CDC indicates result from treatments of people who have received a chronic Lyme diagnosis.

ILADS is mainly composed of physicians and other health care providers from around the world who not only treat patients with Lyme and other tick-borne diseases, but also train physicians in their offices, provide several continuing medical education conferences for physicians annually, provide talks for the public and other physicians, and have the only Lyme treatment guidelines on the National Guidelines Clearing House, which is under the auspices of the department of Health & Human Services. These ILADS guidelines meet the requirements for guidelines formation of the National Academy of Medicine, formerly the Institute of Medicine.

In a letter signed by Samuel Shor, MD, President of ILADS, who is Associate Clinical Professor, George Washington University Health Care Sciences, ILADS counters the assertions in the CDC article and closes with the following statement:

As unfortunate as these 5 cases are, we believe that they should not be used to discount a real entity, chronic Lyme disease. Nor should this series be used to entirely discount the judicious use of long term antibiotics for the carefully selected individual. In summary, in those individuals whose ongoing presentation is felt by their Clinician to be due to
an active infection by Bb sensu latu complex, treatment according to clinical responses is more appropriate than use of an arbitrary “guideline.” Caveats are that a careful differential diagnosis will be generated, proactive management with probiotics and carefully monitoring will be undertaken. But that these often disabled individuals when felt to be appropriate by their Clinician at the point of care, warrant access to prolonged antibiotics, with compassion and empathetic oversight.

The Lyme Disease Association fully supports the ILADS position on this letter.

Click here for pdf of ILADS letter