Lyme Disease Misdiagnosed as Alzheimer’s, Parkinson and
ADD/ADHD, Autism, Juvenile Arthritis, Rheumatoid Arthritis, Reactive Arthritis, Infectious Arthritis, Osteoarthritis, Fibromyalgia, Raynaud’s Syndrome, Chronic Fatigue Syndrome, Interstitial Cystitis, Gastroesophageal Reflux Disease, Fifth Disease, Multiple Sclerosis, scleroderma, lupus, early ALS, early Alzheimer’s, crohn’s disease, ménières syndrome, sjogren’s syndrome, irritable bowel syndrome, colitis, prostatitis, psychiatric disorders, bipolar, depression, encephalitis, sleep disorders, thyroid disease to mention a few of 350 diseases that could possibly be Lyme.

Report #1 on Lyme Disease
A Series

by J. C. Spencer
with Charles Eschweiler and Wade Butler

If Lyme Disease is not diagnosed properly it can become chronic and cause neuralgic, psychiatric, cardiac and arthritic problems. Left untreated, it can lead to heart blockage, seizure disorder and brain destruction. In rare cases have people died from Lyme, most simply live a life of constant suffering.

A common thread with Lyme Disease is the number of systems affected which include the brain, central nervous system, autonomic nervous system, cardiovascular, digestive, and respiratory.

We are gathering evidence that seems to indicate that Lyme Disease may be a more dangerous epidemic than bird flu because it has been misdiagnosed as a wide variety of neurodegenerative diseases.

At the time of this writing, Wade Butler, Executive Director of The Endowment for Medical Research, reported that he has encountered twenty five (25) cases of Lyme Disease misdiagnosed as Alzheimer’s, Dementia or Parkinson.

The CDC (Center for Disease Control) requires additional testing to confirm Lyme Disease. We are in the process of obtaining that information for each case.

Researchers at the National Institute of Health (NIH) submitted for publication a paper entitled “Lyme-Associated Parkinsonism, A Neuropathologic Case Study and Review of the Literature by David S. Cassarino, MD, PhD; Martha M. Quezado, MD; Nitya R. Ghatak, MD; and Paul H. Duray, MD. In that paper published by Arch Pathol Lab Med - Vol 127, September 2003, the doctors stated that “Neurological complications of Lyme disease include meningitis, encephalitis, dementia, and rarely, parkinsonism.”

Before we get into the misdiagnosis of Lyme Disease and the fact that it may be far more infectious than ever suspected, let us go to Lyme, Connecticut and to the American Lyme Disease Foundation and other sources to get a better understanding of what is believed about Lyme Disease.

What is Lyme Disease?

Lyme disease (LD) is an infection caused by Borrelia burgdorferi, a type of bacterium called a spirochete (pronounced spy-ro-keet) which was believed to be carried only by deer ticks. Research now shows that the bacteria can be transferred by fleas, mosquitoes, animal bites, body fluids, and the placenta at birth. An infected carrier can transmit the spirochete to humans and animals it bites. Untreated, the bacterium travels through the bloodstream, establishes itself in various body tissues, and can cause a number of symptoms, some of which are severe.

LD manifests itself as a multisystem inflammatory disease that affects the skin in its early, localized stage, and spreads to the joints, nervous system, and, to a lesser extent, other organ systems in its later, disseminated stages. If diagnosed and treated early with antibiotics, LD is almost always readily cured. Generally, LD in its later stages can also be treated effectively, but because the rate of disease progression and individual response to treatment varies from one patient to the next, some patients may have symptoms that linger for months or even years following treatment. In rare instances, LD causes permanent damage.

Although LD is now the most common arthropod-borne illness in the U.S. (more than 150,000 cases have been reported to the Centers for Disease Control and Prevention [CDC] from 1982 through 2000), its diagnosis and treatment can be challenging for clinicians due to its diverse manifestations and the limitations of currently available serological (blood) tests. Current estimates of the spread of LD is now several million infected individuals in the United States with the number increasing in epidemic proportions.

The prevalence of LD originally was limited to the northeast and upper midwest and now reported throughout the United States, Canada, Europe and the Mid-East.

Manifestations of what we now call Lyme disease were first reported in medical literature in Europe in 1883. Over the years, various clinical signs of this illness have been noted as separate medical conditions: acrodermatitis, cronichca atrophicans (ACA), lymphadenosis benigna cutis (LABC), erythema migrans (EM), and lymphocytic meningradiculitis (Bannwarth’s syndrome). However, these diverse manifestations were not recognized as indicators of a single infectious illness until 1975, when LD was described following an outbreak of apparent juvenile arthritis, preceded by a rash, among residents of Lyme, Connecticut.
Symptoms of Lyme Disease

The Canadian Lyme Disease Foundation has discussed misdiagnoses.

Lyme Disease (commonly misspelled as Lime or Lymes) symptoms may show up fast, with a bang, or very slowly and innocuously. There may be The Lyme Rash: initial flu-like symptoms with fever, headache, nausea, jaw pain, light sensitivity, red eyes, muscle ache and stiff neck. Many write this off as a flu and because the nymph stage of the tick is so tiny many do not recall a tick bite. The classic rash may only occur or have been seen in as few as 30% of cases (many rashes in body hair and indiscrate areas go undetected). Treatment in this early stage is critical.

If left untreated or treated insufficiently symptoms may creep into ones life over weeks, months or even years. They wax and wane and may even go into remission only to come out at a later date...even years later.

With symptoms present, a negative lab result means very little as they are very unreliable. The diagnosis, with today's limitations in the lab, must be clinical.

Many Lyme patients were firstly diagnosed with other illnesses such as Juvenile Arthritis, Rheumatoid Arthritis, Reactive Arthritis, Infectious Arthritis, Osteoarthritis, Fibromyalgia, Raynau'd Syndrome, Chronic Fatigue Syndrome, Interstitial Cystitis, Gastroesophageal Reflux Disease, Fifth Disease, Multiple Sclerosis, scleroderma, lupus, early ALS, early Alzheimers Disease, crohn's disease, ménières syndrome, reynaud's syndrome, sjogren's syndrome, irritable bowel syndrome, colitis, prostatitis, psychiatric disorders (bipolar, depression, etc.), encephalitis, sleep disorders, thyroid disease and various other illnesses.

The Canadian Lyme Disease Foundation published a diagnostic questionnaire that they say will help guide a person to see if they have LD. Twenty (20) YES answers out of the seventy five (75) questions gives a strong indication. Circle the ones that apply and count the YESes.

Symptoms of Lyme Disease

The Tick Bite
(fewer than 50% recall a tick bite or get/see the rash)

1. Rash at site of bite
2. Rashes on other parts of your body
3. Rash basically circular and spreading out (or generalized)
4. Raised rash, disappearing and recurring

Head, Face, Neck
5. Unexplained hair loss
6. Headache, mild or severe, Seizures
7. Pressure in Head, White Matter Lesions in Head (MRI)
8. Twitching of facial or other muscles
9. Facial paralysis (Bell's Palsy)
10. Tingling of nose, (tip of) tongue, cheek or facial flushing

11. Stiff or painful neck
12. Jaw pain or stiffness
13. Dental problems (unexplained)
14. Sore throat, clearing throat a lot, phlegm (flem), hoarseness, runny nose

Eyes/Vision
15. Double or blurry vision
16. Increased floating spots
17. Pain in eyes, or swelling around eyes
18. Over-sensitivity to light
19. Flashing lights/Peripheral waves/phantom images in corner of eyes

Ears/Hearing
20. Decreased hearing in one or both ears, plugged ears
21. Buzzing in ears
22. Pain in ears, over-sensitivity to sounds
23. Ringing in one or both ears

Digestive and Excretory Systems
24. Diarrhea
25. Constipation
26. Irritable bladder (trouble starting, stopping) or Interstitial cystitis
27. Upset stomach (nausea or pain) or GERD (gastroesophageal reflux disease)

Musculoskeletal System
28. Bone pain, joint pain or swelling
carpal tunnel syndrome
29. Stiffness of joints, back, neck, tennis elbow
30. Muscle pain or cramps, (Fibromyalgia)

Respiratory and Circulatory Systems
31. Shortness of breath, can't get full/satisfying breath, cough
32. Chest pain or rib soreness
33. Night sweats or unexplained chills
34. Heart palpitations or extra beats
Endocarditis, Heart blockage

Neurologic System
35. Tremors or unexplained shaking
36. Burning or stabbing sensations in the body
37. Fatigue, Chronic Fatigue Syndrome, Weakness, peripheral neuropathy or partial paralysis
38. Pressure in the head
39. Numbness in body, tingling, pinpricks
40. Poor balance, dizziness, difficulty walking
41. Increased motion sickness
42. Lightheadedness, wooziness
43. Psychological well-being
44. Mood swings, irritability, bi-polar disorder
45. Unusual depression
46. Disorientation (getting or feeling lost)
47. Feeling as if you are losing your mind
48. Over-emotional reactions, crying easily
49. Too much sleep, or insomnia
50. Difficulty falling or staying asleep
51. Narcolepsy, sleep apnea
52. Panic attacks, anxiety

Mental Capability
53. Memory loss (short or long term)
54. Confusion, difficulty in thinking
55. Difficulty with concentration or reading
56. Going to the wrong place
57. Speech difficulty (slurred or slow)
58. Stammering speech
59. Forgetting how to perform simple tasks

Reproduction and Sexuality
60. Loss of sex drive
61. Sexual dysfunction
62. Unexplained menstrual pain, irregularity
63. Unexplained breast pain, discharge
64. Testicular or pelvic pain

General Well-being
65. Unexplained weight gain, loss
66. Extreme fatigue
67. Swollen glands/lymph nodes
68. Unexplained fevers (high or low grade)
69. Continual infections (sinus, kidney, eye, etc.)
70. Symptoms seem to change, come and go
71. Pain migrates (moves) to different body parts
72. Early on, experienced a "flu-like" illness, after which you have not since felt well.
73. Low body temperature
74. Allergies/Chemical sensitivities
75. Increased affect from alcohol and possible worse hangover

Blood testing for Lyme Disease appears to be rather tricky with many false readings reported. The Endowment is in a study mode to determine the best means available. Those findings will be reported in a NEWS Release on our website under Health NEWS - Lyme.

Steven Phillips, M.D. has reported that the bacteria, Borrelia burgdorferi, that causes Lyme Disease, result in the denylation of nerves and the Bb flagella are made up of the same protein as the myelin sheath around our nerves.
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Myelin Sheath damage contributes to Many Health Challenges

Myelin is an insulating layer that forms around nerves. It is made up of protein and fatty substances.

Reprinted from our Autism NEWSletter 11/04

The Myelin Sheath of a neuron consists of fat-containing cells that insulate the axon from the electrical transmission of signals. A gap exists between each myelin sheath cell along the axon. Since fat inhibits the flow of electricity, the signals jump from one gap to the next. Multiple sclerosis is characterized by patches of demyelination (destruction or loss of the myelin sheath) in the central nervous system.

The symptoms that result from this demyelination are determined by the functions normally contributed by the affected neurons. Disruption of muscle control, speech and visual disturbances are common and is evident in MS, Parkinson, and other diseases.

The Advanced Tutorial states: The myelin sheath (a tubular case or envelope) give the whitish appearance to the white matter of the brain. Myelin cells are included in the category of Glial cells. Glial cells function to support the processes of neurons in a variety of ways. The glial cells forming myelin sheaths are called oligodendrocytes in the central nervous system and Schwann cells in the peripheral nervous system. The gaps (approx. 1 micrometer wide) formed between myelin sheath cells along the axons are called Nodes or Ranvier.

Since fat serves as a good insulator, the myelin sheaths speed the rate of transmission of an electrical impulse along the axon. The electrical impulse jumps from one node to the next at a rate as fast as 120 meters per second. This rapid rate of conduction is called saltatory conduction.

For the brain to work, it must be connected.

NOTE: This knowledge may help us to better understand how hydrogenated oils ARE silent killers and why good oils give us a better quality of life.

Stem Cells
Hold the Answers: Making the Connection

Stem cells produce neurons. Stem cells are known for their ability to migrate to any part of the human body that needs repair including the brain. Stem cells seem to move to the area of greatest need to do their work.

Stem cells are produced in the bone marrow. A bone marrow transplant may cost up to $300,000. You can harvest your own stem cells, if they are healthy, and have them frozen and later injected back into your own body after radiation or chemotherapy for about $100,000.

Umbilical stem cells can be harvested from a newly born baby without harm to the child and later used in a compatible recipient for $14,500 to $21,000.

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