

1. **Seronegative** Chronic Relapsing Neuroborreliosis.

2. <https://www.ncbi.nlm.nih.gov/pubmed/7796837>

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Eur Neurol **1995**; 35:113–117 (DOI:10.1159/000117104)

**Abstract**

We report an unusual patient with evidence of *Borrelia burgdorferi* infection who experienced repeated neurologic relapses despite aggressive antibiotic therapy. Each course of therapy was associated with a Jarisch-Herxheimer-like reaction. Although the patient never had detectable free antibodies to *B. burgdorferi* in serum or spinal fluid, the CSF was positive on multiple occasions for complexed anti-*B. burgdorferi* antibodies, *B. burgdorferi* nucleic acids and free antigen.

2. **Registered Complaint to the NH Dept of Health**

3. <http://www.gencourt.state.nh.us/statstudcomm/committees/1515/documents/Registered%20Complaint.pdf>

**2010** letter addressed to Dr. Jose Montero, past Director of the NH Department of Health identifying five cases where a **FALSE negative Elisa** led to patient harm. ( *Willful neglect?*)

On 01/14/2021 3:58 PM CARL TUTTLE <[runagain@comcast.net](mailto:runagain@comcast.net)> wrote:

Dear Rep Marsh,

I request these four items be added as a topic for discussion at our next meeting and I have copied all committee members so they can review the documents prior to the meeting.

Please reserve any discussion of these documents until our next scheduled Zoom meeting.

Respectfully submitted,

Carl Tuttle

1. Two-Year Evaluation of *Borrelia burgdorferi* Culture and Supplemental Tests for Definitive Diagnosis of Lyme Disease

[Peggy Coulter](#),<sup>1</sup>[Clara Lema](#),<sup>1</sup>[Diane Flayhart](#),<sup>1</sup>[Amy S. Linhardt](#),<sup>1</sup>[John N. Aucott](#),<sup>2</sup>[Paul G. Auwaerter](#),<sup>2</sup> and [J. Stephen Dumler](#)<sup>1,\*</sup>

Published 2005

Comparisons with qualitative clinical assessments

*"Overall, initial serologic tests agreed with possible or probable clinical Lyme disease diagnosis in only 50% (40/80) of cases." [COIN TOSS]*

2. Commercial test kits for detection of Lyme borreliosis: a meta-analysis of test accuracy

[Michael J Cook](#)<sup>1</sup>, [Basant K Puri](#)<sup>2</sup>

*Sensitivity for each test technology varied from 62.4% for Western blot kits, and 62.3% for enzyme-linked immunosorbent assay tests, to 53.9% for synthetic C6 peptide ELISA tests and 53.7% when the two-tier methodology was used. [COIN TOSS]*

3. Treatment Delays Increase Risk of Persistent Illness in Lyme Disease

<https://www.hopkinslyme.org/news/treatment-delays-increase-risk-of-persistent-illness-in-lyme-disease/>

December 15, 2020 By [JOHNS HOPKINS LYME DISEASE RESEARCH CENTER](#)

Summary

In this retrospective study, one-third of Lyme disease patients report delayed treatment of greater than 30 days, and delayed treatment is associated with post-treatment Lyme disease (PTLD). Delays in treatment are shown to significantly impact patient outcomes and indicate that improved Lyme disease diagnosis and prevention strategies are needed.

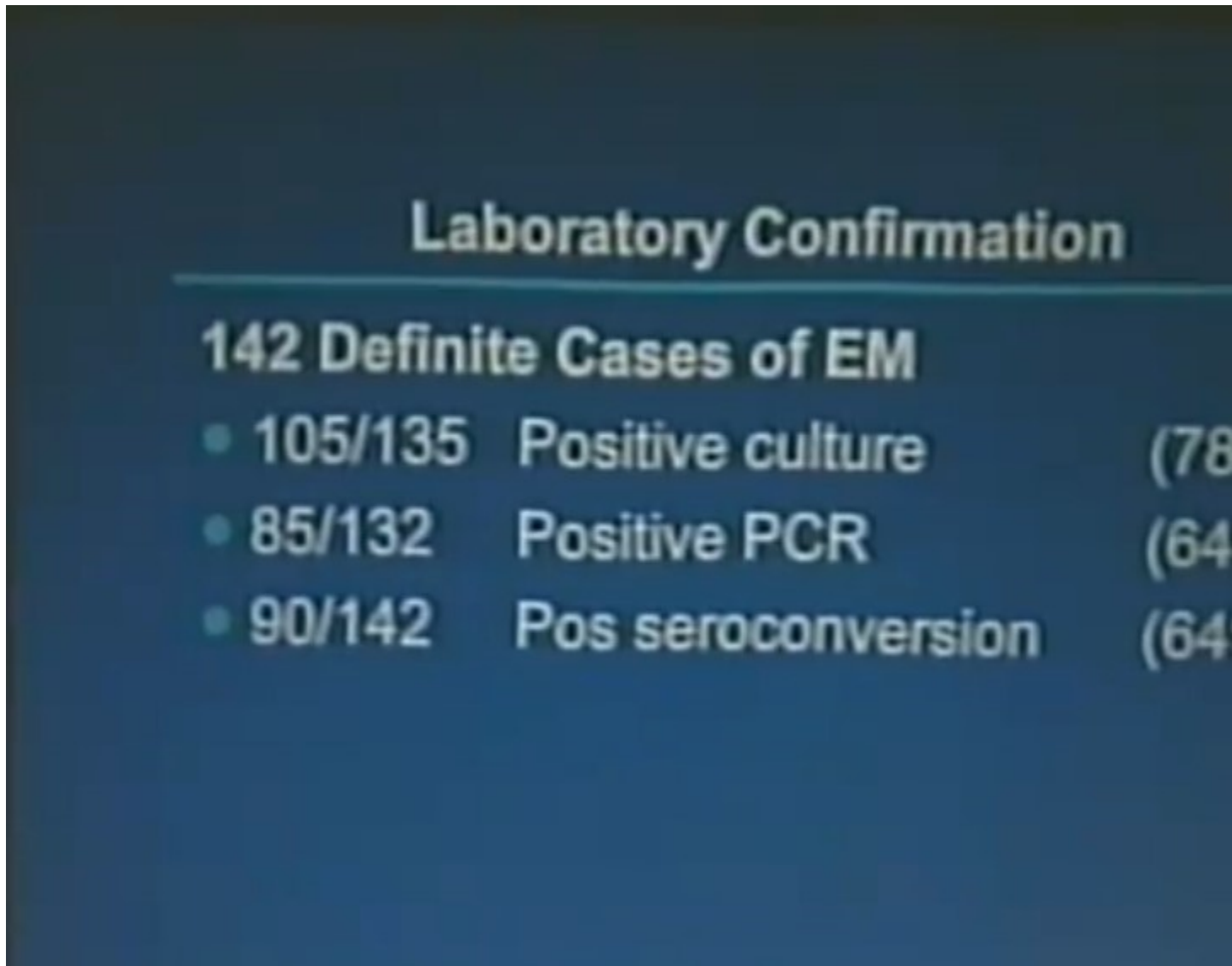
4. Dennis Parenti's 1998 vaccine presentation (Lyme.org at 1 hr 9 minutes). Dr. Parenti, medical director of the vaccine trial (LYMRix) – the largest Lyme trial in history, actually discusses the research findings of seronegative

Lyme. At 36% it is a common presentation. Patients were culture positive and/or DNA positive for Borrelia infection and western blot negative

**1998 satellite conferences from Illinois** (from 1:09 to end)

<https://www.facebook.com/LymeDiseaseFoundation/videos/426886747897148>

Slide from Dennis Parenti's 1998 vaccine presentation:



Laboratory Confirmation			
142 Definite Cases of EM			
• 105/135	Positive culture		(78
• 85/132	Positive PCR		(64
• 90/142	Pos seroconversion		(64