

THE LANCET

Rochelle Walensky: new Director of the US CDC

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)00076-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00076-3/fulltext)

Published: January 14, 2021

The HIV/AIDS epidemic was still raging in early 1995 when **Rochelle Walensky** was an internal medicine resident at Johns Hopkins University School of Medicine in Baltimore, USA. "As interns, we were each admitting six or seven patients a night and half of them had HIV or were dying of AIDS", she recalled. "We could prevent or treat some of their opportunistic infections, but we didn't give them a lot of hope", she said. Yet by the year's end, the US FDA had approved a cocktail of antiretroviral drugs that meant AIDS was no longer a certain death sentence. "We could give it to people and say there was hope", she said. This "huge inflection point" in the epidemic convinced Walensky to specialise in infectious diseases. That year she also graduated from medical school and married another Hopkins medical student, Loren Walensky, now a paediatric oncologist; the couple have three sons.

Jan 20, 2021

Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329
Attn: Rochelle Walensky, MD Director

Dear Dr. Walensky,

Persons with H.I.V. were abused, despised and neglected until ACT-UP-activists threw blood on the steps of St. Patrick's Cathedral.

As a practicing Infectious Disease physician, you should be well aware that culture is the gold standard for definitive diagnosis of bacterial and fungal infections worldwide. The CDC had culture confirmation that we were dealing with an antibiotic resistant/tolerant superbug in 1991 when *Borrelia burgdorferi* was grown from the cerebrospinal fluid of Dr. Kenneth Liegner's patient Vicki Logan at the Centers for Disease Control in Fort Collins, Colorado.

The letter below addressed to former CDC Director Brenda Fitzgerald, MD was forwarded to Robert R. Redfield, MD as well with no response from either of these Directors.

Will you ignore what you are about to read as your predecessors did or will you take responsibility and correct this wrong and find a cure for this antibiotic resistant/tolerant superbug?

Respectfully Submitted,

Carl Tuttle
Hudson, NH

Member of NH Governor Chris Sununu's Lyme Disease Study Commission <http://www.gencourt.state.nh.us/statstudcomm/details.aspx?id=1515&rbl=1&txtbillnumber=hb490>

Letter to Brenda Fitzgerald, MD Director of the Centers for Disease Control:

Aug 29, 2017

Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329
Attn: Brenda Fitzgerald, MD Director

Dear Dr. Fitzgerald,

Untreated strep throat leads to rheumatic fever which can cause irreversible heart damage but rapid culture tests for strep available in the primary care setting has virtually eliminated rheumatic fever and the life-threatening complications associated with that disease.

Misdiagnosed and untreated Lyme disease creates the same life-altering/life-threatening consequences but this has been hidden from the worldwide medical community and general population. Just ask Duke University Professor Neil Spector who required a heart transplant after his Lyme infection went four years untreated. Spector's laboratory tests (serology) were repeatedly negative. Faulty/misleading antibody tests are the root cause of unimaginable pain and suffering.

Lyme disease is capable of producing sudden death with no warning signs; [1,2,3,] heart damage requiring transplant, [4] paralysis with seizures, [5] lymphoma [6] and persistent infection after antibiotic treatment [7, 8,9,10,11] along with congenital transmission [12] and ability to create wheelchair bound patients [13]. The last time we recognized a disease with this potential to cause serious harm, (Zika) the CDC wanted 1.8 billion for research. [14]

Quote from Senator Richard Blumenthal:

"Today for me culminates more than a decade of work and probably a decade more, because I've seen firsthand the devastating, absolutely unacceptable damage done by Lyme disease to individual human beings, Connecticut children and residents whose lives have been changed forever as a result of Lyme disease"

Source: <http://ctmirror.org/2011/07/18/blumenthal-takes-lyme-disease-fight-senate/>

In regards to laboratory testing (culture), please see the following quote from Dr. Kenneth Liegner:

"In 1991 the Lyme disease organism, *Borrelia burgdorferi*, was grown from the cerebrospinal fluid of my patient Vicki Logan at the Centers for Disease Control in Fort Collins, Colorado despite prior treatment with intravenous antibiotics. Her case made the front page of the New York Times Science Times in August of 1993." -Kenneth Liegner, MD

Source: <http://cognitiveliberty.net/wp-content/uploads/2014/12/David-Dennis.pdf>

Vicki Logan's CDC Fort Collins Positive CSF Culture Report:(My personal Dropbox account)

<https://www.dropbox.com/s/vthfdpn7gv8bne2/Logan%20CDC%20Fort%20Collins%20Positive%20CSF%20%20Culture%20Report.JPG?dl=0>

Lyme patient Vicki Logan's 1991 positive culture test performed by the Centers for Disease Control should have set off a red flag but was ignored while the focus remained on discrediting the sick and disabled Lyme patient population.[15]

Here are links to the seven page autopsy results of patient Vicky Logan showing histopathologic findings consistent with neurologic manifestations of chronic Lyme disease.

(Vicky Logan's Autopsy results Page # [1](#) , [2](#) , [3](#) , [4](#) , [5](#) , [6](#) , [7](#))

The destructive nature of *Borrelia* is evident in Vicky Logan's liver (nutmeg liver), kidneys, heart, lungs and brain. The patient died after the insurer refused additional IV antibiotic therapy.

I would like to point out the following case study from Stony Brook Lyme clinic. I understand the patient received thirteen spinal taps, multiple courses of IV and oral meds, and relapsed after each one, proven by CSF antigens and/or PCR. The only way this patient (said to be a physician) remained in remission was to keep her on open

ended clarithromycin- was on it for 22 months by the time of publication.

Seronegative Chronic Relapsing Neuroborreliosis.

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

Lawrence C.a · Lipton R.B.b · Lowy F.D.c · Coyle P.K.d

aDepartment of Medicine, bDepartment of Neurology, and cDivision of Infectious Diseases, Albert Einstein College of Medicine, and dDepartment of Neurology, State University of New York at Stony Brook, New York, NY., USA

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.

For the past three decades, Lyme disease has been portrayed as hard to catch and easily treated[16]while those who control the narrative (Through editorial censorship) refuse to recognize this pathogen as an antibiotic resistant/tolerant superbug by suppressing evidence of persistent infection.[17]This misclassification has all but eliminated government funding that should have been equal to or greater than AIDS or Zika which are also life-altering/life-threatening infections in need of cures.

What we are dealing with here is an antibiotic resistant/tolerant superbug but the focus over the past three decades (as seen in the Lancet article) has been to discredit the sick and disabled along with the practitioners attempting to help these patients as opposed to finding new antimicrobials effective in eradicating all forms of the *Borrelia* spirochete; L-forms, round bodies and persister cells.

The truth about this devastating disease has been kept from the public for 43 years and there are no Public Service Announcements informing the public that you could become horribly disabled or die from Lyme disease

A worldwide community of physicians has been influenced by the ongoing disinformation campaign aimed at promoting the idea that Lyme is little more than a nuisance disease as health agencies across the globe are blindly following what has been deceitfully established here in the U.S.

We are dealing with a life-altering/life-threatening infection with faulty/misleading antibody tests, inadequate treatment, no medical training and absolutely no disease control.

This has been a 43 year epic failure on the part of the CDC and now you inherited this travesty.

Will you continue to turn a blind eye to this 21st Century plague?

A response to this inquiry is requested.

Carl Tuttle

Independent Researcher

Lyme Endemic Hudson, NH USA

Reviewer, American Journal of Infectious Diseases

Lyme Disease: Call for a “Manhattan Project” to Combat the Epidemic

Raphael B. Stricker, Lorraine Johnson

Published: January 02, 2014 DOI: 10.1371/journal.ppat.100379

<http://www.plospathogens.org/article/info:doi/10.1371/journal.ppat.1003796>

Cc: Associate Editors, Diagnostic Microbiology and Infectious Disease

References: (**Please read them!**)

1. **Cardiac Tropism of *Borrelia burgdorferi*: An Autopsy Study of Sudden**
2. **Cardiac Death Associated with Lyme Carditis.** (March 2016)
3. [http://ajp.amjpathol.org/article/S0002-9440\(16\)00099-7/abstract](http://ajp.amjpathol.org/article/S0002-9440(16)00099-7/abstract)

Excerpt:

“Fatal Lyme carditis caused by the spirochete *Borrelia burgdorferi* rarely is identified. Here, we describe the pathologic, immunohistochemical, and molecular findings of five case patients.”

2. **CDC Case Study #1: Three Sudden Cardiac Deaths Associated with Lyme**

Carditis:http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6249a1.htm?s_cid=mm6249a1_w

3. **CDC Case Study #2: A case report of a 17-year old male with fatal Lyme carditis**

4. [http://www.cardiovascularpathology.com/article/S1054-8807\(15\)00025-3/abstract?rss=yes](http://www.cardiovascularpathology.com/article/S1054-8807(15)00025-3/abstract?rss=yes)

4. **Professor Neil Spector: Duke physician uses near-death experience to encourage patient self-advocacy**

<http://www.dukechronicle.com/articles/2015/05/28/duke-physician-uses-near-death-experience-encourage-patient-self-advocacy#.VYIYnxtViko>

Dr Neil Spector from Duke University required a heart transplant after his Lyme disease went undiagnosed for four years.

5. **Nashua Mom in the 'Lyme Light' on Katie Couric Show**

<http://patch.com/new-hampshire/nashua/nashua-mom-talks-chronic-lyme-on-katie-couric-show>

Fifth-grade teacher Kelly Downing was paralyzed from the neck down and interviewed by Katie Couric.

6. **Infection by *Borrelia burgdorferi* and cutaneous B-cell lymphoma (Cancer)**

<https://www.ncbi.nlm.nih.gov/pubmed/9331890>

Specific DNA sequences of *Borrelia burgdorferi* were identified in cutaneous lesions from 9 patients (follicle center lymphoma: 3/20; immunocytoma: 3/4; marginal zone B-cell lymphoma: 2/20; diffuse large B-cell lymphoma: 1/6).

7. **Application of Nanotrap technology for high sensitivity measurement of urinary outer surface protein A carboxyl-terminus domain in early stage Lyme borreliosis.**

8. <http://translational-medicine.biomedcentral.com/articles/10.1186/s12967-015-0701-z>

41 of 100 patients under surveillance for persistent LB in an endemic area were positive for urinary OspA protein after antibiotic treatment.

8. Culture evidence of Lyme disease in antibiotic treated patients living in the Southeast.

<http://danielcameronmd.com/culture-evidence-of-lyme-disease-in-antibiotic-treated-patients-living-in-the-southeast/>

Rudenko and colleagues reported culture confirmation of chronic Lyme disease in 24 patients in North Carolina, Florida, and Georgia. All had undergone previous antibiotic treatment.

9. DNA sequencing diagnosis of off-season spirochetemia with low bacterial density in *Borrelia burgdorferi* and *Borrelia miyamotoi* infections.

<https://www.ncbi.nlm.nih.gov/pubmed/24968274>

Faulty/misleading antibody tests landed a sixteen year old male in a psychiatric ward when his lab results did not meet the CDC's strict criteria for positive results. His Western blot had only four of the required five IgG bands. Subsequent DNA sequencing identified a spirochetemia in this patient's blood so his psychiatric issues were a result of neurologic Lyme disease misdiagnosed by antiquated/misleading serology. This patient was previously treated with antibiotics.

10. Granulomatous hepatitis associated with chronic *Borrelia burgdorferi* infection: a case report

<http://www.labome.org/research/Granulomatous-hepatitis-associated-with-chronic-Borrelia-burgdorferi-infection-a-case-report.html>

The patient had active, systemic *Borrelia burgdorferi* infection and consequent Lyme hepatitis, despite antibiotic therapy.

11. Scotty Shelton and Persistent Infection in Saginaw MN

12. <https://www.change.org/p/the-us-senate-calling-for-a-congressional-investigation-of-the-cdc-idsa-and-aldf/u/11685820>

"Scotty's brain (cerebral cortex) was positive for *Borrelia burgdorferi* and *Borrelia miyamotoi*, his testicle is positive for Bb. We are now testing other tissues. Seven years of antibiotics and 3.5 years of natural treatments (along with antibiotics) and he was highly positive."

12. Congenital Transmission of Lyme/TBD

<https://www.dropbox.com/s/z10em0szgpm8bll/Congenital%20Transmission%20of%20Lyme%202015.doc?dl=0>

13. Wheelchair-Bound Girl Calls Blessing By Pope Francis 'Most Precious Moment Of MyLife' <http://newyork.cbslocal.com/2015/09/24/pope-francis->

[blesses-girl-in-wheelchair/](#)

NEW YORK (CBSNewYork) — A 12-year-old girl who has been confined to a wheelchair since being diagnosed with Lyme disease said meeting Pope Francis as he arrived in New York Thursday was “the most precious moment of my life.”

14. \$1.8 billion to fight Zika: CDC moves to highest alert level

<https://www.washingtonpost.com/news/post-politics/wp/2016/02/08/obama-to-ask-congress-for-1-8-billion-to-combat-zika-virus/>

15. Lyme disease antiscience

[http://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(12\)70054-3/fulltext](http://www.thelancet.com/journals/laninf/article/PIIS1473-3099(12)70054-3/fulltext)

16. Lyme Disease Is Hard to Catch And Easy to Halt, Study Finds

New York Times By GINA KOLATA Published: June 13, 2001

<http://www.nytimes.com/2001/06/13/us/lyme-disease-is-hard-to-catch-and-easy-to-halt-study-finds.html>

Excerpt: But some who have treated hundreds of patients with long-term antibiotics, like **Dr. Sam L. Donta of Boston University Medical Center**, were not convinced. The antibiotics in the studies were not given for a long enough time, Dr. Donta said, and he would have chosen different ones. Perhaps all that the studies show, he said, is “that this particular treatment doesn't work.”

17. Peer Reviewed Evidence of Persistence of Lyme Disease Spirochete *Borrelia burgdorferi* and Tick-Borne Diseases after the mandated one-size-fits-all IDSA treatment approach:(700 articles)

http://www.ilads.org/ilads_news/wp-content/uploads/2015/09/EvidenceofPersistence-V2.pdf