



For Lyme Disease Awareness & Action

LYME DISEASE
ASSOCIATION OF AUSTRALIA
ABN 46 417 706 647

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MEDIA RELEASE

The Senate will continue to investigate tick-borne diseases in Australia

The Lyme Disease Association of Australia (LDAA) is delighted with the Senate's decision to restart the inquiry into tick-borne diseases that causes a Lyme-like illness in Australians. The Community Affairs Reference Committee members reviewed the progress thus far and found the need to look deeper and wider.

The Senate inquiry's interim report recognised that the committee's inquiry was not yet complete. Further investigation into a range of areas is required before the committee is in a position to make any detailed recommendations.

LDAA is calling on the Senate committee to further investigate:

The validity of pathology processes that report a false positive test result when it is understood the pathogens are as yet unknown. The current process results in a denial of treatment and appears to be based on fallacious circular reasoning. Patients are told the bacteria hasn't yet been found in Australian ticks, so therefore it can't be in people. The people whose positive test results are deemed 'false positive' are told: the bacteria can't be making you sick because it hasn't been found in the ticks.

Further thousands of Australians have been given a blood test that was never going to produce a positive result because the test is looking for the wrong thing. But nonetheless it has been used to deny diagnosis, treatment and compassion. Desperately unwell patients are expected to wait for years till the research eventually proves newly discovered and unique bacteria has been found in Australia. Only then will appropriate tests be developed.

The need to investigate why test results from overseas laboratories that are accredited to the same international standards as Australian laboratories, are routinely ignored in spite of the signed international agreement. These specialist laboratories routinely find Lyme-like pathogens and coinfections in Australian patients.

There is a myopic focus on the American strain of the bacteria that creates a barrier to being open minded to bacteria that is native to Australia. There is a need to provide an interim definition of Australian Lyme-like illness based on current world's best practice while the nation waits for the gap in knowledge to be addressed. The current nomenclature used to define, and the language used to describe Lyme-like disease is contentious, controversial and commonly derogatory and

appears to be used as a smoke screen to justify addressing the issues in a professional and scientific way.

There is an urgent need to alert the medical profession that the onset of tick-borne chronic illness can in many instances be prevented by the prescription of readily available antibiotics within the first few weeks after a tick bite.

The culture and regulation of the medical profession has facilitated the denial that there is a problem in Australia which is leaving many sick Australian untreated and outside the system.

There appear to be gaps in the Australian health administration particularly between federal and state governments that has allowed thousands of unwell patients to fall through.

Investigation is needed into the public and private policies or practices that could help patients who have fallen through the cracks. Patients are desperately trying to manage a debilitating chronic disease without the equivalent support offered to Australians with other illnesses.

More issues may yet be raised by the many Lyme-like patients who missed the opportunity to tell their story in a submission to the inquiry and have been hoping to get another chance. Over a thousand submission have been received thus far.

LDAA President Sharon Whiteman said, 'Thousands of patients with a chronic debilitating illness started to suffer following a tick bite. These Australians need the Senate inquiry to help them achieve recognition that this poorly understood emerging illness cannot be denied and neglected any longer.

The plight of Australia's Lyme-like patients is a case study in what not to do when a new disease emerges. World's best practice treats patients with an emerging illness with the best knowledge of the day and also prioritises research to understand how the disease effects people. People around the nation are outraged that this is so hard to achieve. Australia's myopic focus on finding the pathogens in ticks before any action is taken is reprehensible.'

LDAA welcomes the reinstatement of the Senate inquiry and is calling on the parliament to ensure this national travesty is addressed with practical action that helps alleviate the suffering of chronically unwell Australians and halts the onset and spread of this preventable disease.

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Media contact: media@lymedisease.org.au or 0406 378 792

Additional resources for media are available from the Lyme Disease Association of Australia's [website](http://www.lymedisease.org.au/media)

Senate Inquiry page:

http://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/Lyme-like_Illness