Dear Representative Brad Witt:

I am writing today because we have a very important Bill which would affect many Oregonians. As you know, Governor Kate Brown recently proclaimed May as Lyme Disease Awareness Month. In fact, her proclamation states human caseload may be as high as 800 cases per year. . Many physicians in Oregon do not consider a diagnosis for Lyme disease, even when early symptoms are present. When not caught early, many patients will develop late stage Lyme disease which is far more difficult to treat and often accompanied by chronic, debilitating and costly conditions, often without insurance coverage.

I am one of those patients. Neither my doctor, nor I, recognized my classic symptoms of Lyme Disease. I was not diagnosed for almost two years and my symptoms became much worse. I am now on disability and facing the loss of my nine-year career as an Oregon State Trooper. I have had surgeries and medical procedures costing thousands of dollars; these would not have been necessary had I been diagnosed and treated in a timely manner. I have traveled out of state for over a year in order to receive adequate care, and I have improved significantly in a year's time under an ILADS-guided treatment protocol. Most people I know must travel outside Oregon to get proper treatment for Lyme Disease. Please ask yourself if this is just. Why is Oregon not treating Lyme Disease?

My testimony was first in the following video and I implore you to take a few moments and hear from myself and other patients.

We are asking you to consider re-amending the Bill after reading the information below. Please take some time to hear the Senate testimonials on this video (http://oregon.granicus.com/MediaPlayer.php?clip_id=164f47a0-881a-472b-8b9d-42d72a5e50aa&meta_id=706fa6ff-d651-4330-bcd9-59c1433eef6b).

While all the testimony is important we understand it is lengthy, so please be sure to review the following which clearly outline our concerns 1. EXHIBIT 1-10: Theresa Denham, Lyme Disease Network Task Force 00:05:40 2. EXHIBIT 19-20: Beth Schultz, patient, Lyme Disease 00:56:15 3. EXHIBIT 21: Mike Dewey, patient, Lyme Disease 00:59:36 4. Compare this patient's outcome with the above testimony due to her inability to get care: EXHIBIT 22-26: Chris and Kara Chytka, husband and patient, Lyme Disease 01:02:37 5. Why we believe Oregon is failing to recognize the seriousness of our Lyme disease problem: EXHIBIT 27-28: Sharon Lee, patient, Lyme Disease 01:09:10.

It is important to know that the IOM/NAM (Institute of Medicine / National Academy of Medicine) is a branch of the National Academy of Sciences and one of its key purposes is to provide unbiased and authoritative advice to decision makers and the public through evidence based guidelines.
The original Bill was amended in the Senate and essential aspects were removed that were intended to provide beneficial care for Oregon Lyme disease patients. We need the House to add the following important language:

1. **SB916 shall be re-amended to allow a physician, with informed consent from patients, to use any guidelines developed with IOM, PRIZM or NGC criteria for the diagnosis and treatment of Lyme disease and co-infections.**

2. The study needs to be well defined before voting and should include: Asking the question: Why are Oregon patients able to get properly diagnosed and treated with better health outcomes outside of Oregon versus their lack of diagnosis and care for their Lyme Disease within Oregon?
Study participants should be equally represented and include members of:
- Oregon Medical Association
- Oregon Naturopath Association
- IDSA (specialty society)
- ILADS (specialty society)
- Oregon Lyme Disease Network (Patient Advocacy)

Thank you very much for your time.

Respectfully,
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