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Medical Society Settles In Lyme-Disease Dispute

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The Connecticut Attorney General accused a major medical society of harboring conflicts of interest and unveiled a settlement requiring the group to review its practices.

The settlement ended the state's inquiry that was focused on the way the Infectious Diseases Society of America set nonbinding but influential guidelines for treating Lyme disease. The ailment is commonly spread through tick bites and characterized by headaches, fatigue, fever and skin rashes.

In announcing the settlement, Attorney General Richard Blumenthal criticized the society for "allowing individuals with financial interests -- in drug companies, Lyme disease diagnostic tests, patents and consulting arrangements with insurance companies -- to exclude divergent medical evidence and opinion" from its deliberations.

The society denied wrongdoing and said in a statement that it agreed to a settlement "in an effort to clear the air." Society President Donald Poretz said "there was no obvious conflict of interest" on the 14-person Lyme-disease committee and that the society had appropriate vetting procedures in place. Lyme disease has generated controversy because some doctors and patient advocates believe it is a chronic condition best treated by antibiotics.

The settlement was the latest to focus on alleged conflicts at medical societies that set treatment guidelines. In 2006, a guidelines panel of the National Kidney Foundation came under fire for its financial ties to makers of the drug erythropoietin. The panel had recommended more-aggressive use of the drug in treating anemia in kidney patients, which turned out to raise the risks of heart failure.

The Infectious Diseases Society and some other experts say there is no evidence to prove that Lyme is a chronic condition and caution against the prolonged use of

antibiotics. Instead, the society recommends other treatments, such as a short course of oral antibiotics.

Under the settlement agreement with the attorney general's office, the society agreed to review the guidelines and appoint a neutral ombudsman to assess this review panel for conflicts of interest. Dr. Poretz said the review doesn't necessarily mean the guidelines will change. "We are glad this has ended," Dr. Poretz said.

Mr. Blumenthal declined to elaborate on how the existing guidelines may have benefited manufacturers of drugs or diagnostic kits. He launched the investigation under antitrust statutes, arguing that the medical society monopolized treatment standards.

In a 2007 article published in the New England Journal of Medicine, Gary Wormser, chairman of the society's Lyme-disease panel, disclosed receiving research grants from several makers of diagnostic tests for the condition, including **Bio-Rad Laboratories Inc.** of Hercules, Calif. Dr. Wormser, of the New York Medical College in Valhalla, N.Y., couldn't be reached for comment. Bio-Rad declined to comment. Steve Baragona, a spokesman for the society, said the panel recommended testing, but no specific manufacturer.

The society added in a statement Thursday that the panel members "recommended against expensive repeated, long-term antibiotic therapy."

Proponents of such therapy hope a review of society guidelines would allow them to make an argument for long-term antibiotic care.

In its summary of the investigation, the attorney general's office said insurance companies have relied on the 2006 guidelines to deny coverage for long-term antibiotic treatments. The attorney general also said that the society sought to purge from its ranks contrarian views, and in 2000 removed a panelist who held dissenting views.

The society denied this, saying the scientist left voluntarily and that its open to other opinions, provided they are based on solid science.

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