

KAISER PERMANENTE NW

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December 13, 2001

Health Record # _____

Miguel A Perez-Lizano
18715 N E 132ND AVE
Battle Ground, WA 98604

Dear Mr. Perez-Lizano,

Your recent letter to Ms Honzel(11/27/01) was forwarded to me for further comment regarding your concerns of a failure to diagnose and treat you for Lyme Disease. I have again taken the opportunity to review your available medical record to address these concerns.

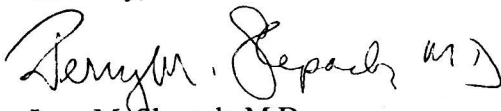
Taking note of your report of "bullseye"lesion following a potential exposure in Northern California, I think there is a possibility that you may have been infected with the Lyme organism at that time. However, the standard serologic studies that would support a diagnosis of previous Lyme infection have been repeatedly negative. Unfortunately the immunoblot test results to which you refer in your letter are not available for my review. While these results could provide evidence of prior infection, they may likewise be uninterpretable. Thus we may or may not be able to ever know if your rash represented an episode of Lyme Disease nor would we know if you would have benefited from treatment at that time.

Your subsequent cardiac symptoms do not conform to the standard recognized cardiac manifestations of Lyme Disease and are more commonly associated with your well documented coronary artery disease and hypertrophic cardiomyopathy. Furthermore my review fails to document inflammatory joint findings or definite neurologic deficits that could be attributed to Lyme Disease. The serologic results described above are nondiagnostic in the absence of a more compatible clinical picture.

In summary, I conclude that although there may have been a self limited episode of Lyme Disease in the past, there is no supporting clinical or serologic evidence available to me to attach a diagnosis of late-stage, disseminated Lyme Disease to your current symptoms. As a consequence I see no benefit, and potential harm, in the use of antibiotics for these symptoms. Further available diagnostic studies are unlikely to shed additional insight into this matter.

My recommendations for further care include careful management by your cardiologist and ongoing primary care attention to your musculoskeletal and neurological needs.

Sincerely,



Jerry M. Slepach, M.D.
East Interstate Infectious Disease