

Waking Up the Nation,  
One Reader at a Time...

FREE

# PUBLIC HEALTH ALERT

Investigating Lyme Disease & Chronic Illness in the U.S.A.

## Dr. William Rea Exonerated In Texas

by *Mary Budinger*

The Texas Medical Board has ended its prosecution of one of the deans of environmental medicine. William J. Rea, M.D., founder of the renowned Environmental Health Center in Dallas, now stands exonerated of all charges.

The battle began when an anonymous complaint against Dr. Rea was filed with the Board. Most cases get settled before a formal complaint is filed. But in this case, the Board issued a formal complaint in 2007 accusing Dr. Rea of "failure to practice medicine in an acceptable professional manner consistent with public health and welfare."

The Board claimed that his testing methods "are more properly described as pseudoscience" and that "injections of neurotransmitters, mycotoxins, jet fuel, natural gas, and other chemicals can be a dangerous practice."

Dr. Rea, a board certified cardiovascular surgeon, established the Environmental Health Center in 1974. More than 30,000 people from all over the world have come for treatment - people who became ill after exposure to Alaskan oil spills and fallout

from the World Trade Center, time spent as a soldier in Desert Storm, as well as people who become ill at home or work from exposures to carpets, paints, pesticides, solvents, formaldehydes, pollens, molds, dust, and foods. Dr. Rea has written four books on chemical sensitivity that are considered the classic textbooks in the field.

Physicians trained in environmental medicine often use antigens, very diluted amounts of an offending substance. It is both an allopathic and a homeopathic approach to treatment. Doctors will typically find the level just below that which causes a reaction, and give patients regular doses of antigens so the body can "learn" how to tolerate the substance(s) again. Jet fuel antigens, for example, would be used to desensitize some patients who fell ill from flying after 9/11 and others who work or live near airports.

"The Board did not understand antigens and perhaps still does not," said Dr. Rea. "They accused us of injecting jet fuel into patients. They eventually analyzed the homeopathic solution we use and didn't find anything in it. Finally they had to accept it was homeopathic-like."

The Board's final rul-

ing came last September and merely concluded that from now on, Dr. Rea must have his patients sign an informed consent explaining that treatment with a few chemical antigens, such as jet fuel and car exhaust, are not FDA-approved, and that the antigens have only the "electromagnetic imprint" of the original substance. And that's fine with Dr. Rea. "About two-thirds of the practice of medicine is not FDA-approved," he said. The therapeutic value of the therapy was not disputed.

### THE ANONYMOUS COMPLAINT

The case against Dr. Rea started with an anonymous complaint about the treatment of five patients. However, none of the patients initially knew that they or their information was being used because none had filed a complaint nor consented for their medical files to be used in an investigation. "In fact, all five patients specifically told the Board they had no allegations to make, and two of the patients told the Board I had saved their lives," Dr. Rea recounted. To this day, the anonymous source is still officially unknown.

"Wild guess as to who did it? The insurance



**William J. Rea, MD; founder, Environmental Health Center**

company because they didn't want to pay the claims for the patients," said Jacques Simon of New York, the lead attorney on the case.

All five patients were from New York City and all five shared the same insurance company. Dr. Rea does not take insurance, which meant all five patients filed for reimbursement of their expenses - a manual process that is more labor intensive for insurance companies than automated claims.

"In Texas, anonymous complaints are allowed and that is very different from a confidential complaint," explained attorney Laurie York of Austin, who was part of Dr. Rea's defense team. "So an insurance company which

# SPECIAL REPORT

might make an anonymous complaint could never be prosecuted for maliciously intended complaint. There is no accountability. Not even the Texas Legislature can find out who is behind anonymous complaints to the Board."

## THE ANONYMOUS REVIEWER

It is common during an investigation that a medical board will initiate a peer review of the patient records in question to determine whether accepted standards of care have been met. The Texas Medical Board allows for reviewers to remain anonymous. But what happens when medical boards do not choose a peer? In Dr. Rea's case, the Board chose a conventional, allopathic allergist who does not specialize in environmental medicine and had never used homeopathic remedies or the provocation neutralization titration process.

"This reviewer gave a negative review of the treatment of the five patients, despite the fact that all the people improved, several of them substantially so, while under my care," Dr. Rea explained. "I had 17 actual peers, physicians who practice environmental medicine, review all five of these cases as well. To a person, these 17 reviewers found that my treatment of these patients was not only adequate, but that it met or exceeded the standard of care for treatment in our specialty. The state board reviewer was uninformed about the specialty of environmental medicine, clearly did not understand the complex nature of the diagnosis and treatment of patients who suffer from chemical sensitivities, grossly misunderstood many of the

facts in the medical records, and was antagonistic towards and biased against the specialty of environmental medicine. Nonetheless, the Board dismissed the review done by 17 actual peers."

Dr. Rea's case is now part of a long-simmering controversy over whether medical peer review has been used as a competitive weapon in turf wars among physicians, hospitals, HMOs, and other entities.

In Dr. Rea's case, it appears the medical board was used by an out-of-state insurance company trying to trim costs by denying claims.

"Many of us who have been turned in to state medical boards do not take insurance assignment," Dr. Rea explained. "It appears that health insurance companies want to be the sole arbiter of what types of treatments are available to patients, and thus what they will be required to pay. They clearly do not want new diagnoses and treatments established because they will then have to pay for these."

That is a dynamic known all too well to physicians who treat chronic Lyme patients with long-term courses of antibiotics.

## THE CONTROVERSIAL TEXAS MEDICAL BOARD

The modus operandi of the Texas Medical Board came to the attention of the Texas Legislature and an investigative hearing was held in 2007. It lasted 11 hours; the crowd overflowed the hearing room. Doctors flew in from other states to testify about the Board's pattern of abuse and unaccountability. Attendees recall that what stood out was that every doctor was terrified of blowback from the medical

board for even being there. Under questioning from State Representative Debbie Riddle, former Board president Dr. Roberta Kalafut admitted that she had her husband had filed a confidential complaint against another doctor in her area. It turned out that 12 of Dr. Kalafut's competitor physicians had anonymous complaints filed against them.

Subsequently, there was a series of hearings where doctors came forward again to tell the Texas Legislature that the medical board has serious problems. "Many of the complaints filed against physicians appear to be malicious," reported Steven F. Hotze, M.D., of the Hotze Health and Wellness Center in Katy, Texas. "Once the complaint is filed, experts are hired by the Texas Medical Board to review the record and tend to discredit the physician. These experts are anonymous to the accused physician, but the physician's identity is known to the experts. Secret proceedings, known as Informal Settlement Conferences (IFC), are conducted without providing the same legal due process that is afforded to common criminals. The physicians are intimidated and often forced to sign agreements under the threat of license revocation."

(See January's issue of PHA regarding the lawsuit by the Association of American Physicians and Surgeons against the Texas Medical Board.)

York points out that there is also a problem with

*"Exonerated" ...cont'd pg 5* patients' rights. "Patients have no privacy. There are patients who get their records used in these kinds of Board actions

even though they were completely satisfied with their doctor and their care."

Simon says, unfortunately, the Board probably didn't learn much from its war with Dr. Rea. "That is not the way it works. Texas has the biggest board I've ever seen, one of the more active in terms of disciplinary actions, and at the end of the day, they don't learn lessons. They are bureaucrats, there to prosecute."

Simon is a member of the so-called Quartet - four American attorneys who specialize in defending doctors who practice complementary and alternative medicine. All four are legal counsels for the American College for the Advancement of Medicine (ACAM).

"I think it would be wrong to draw the conclusion from this case that all complementary and alternative (CAM) doctors are under fire. That is true for many who treat chronic Lyme disease, but not all CAM."

York is hopeful that a good precedent has been set with Dr. Rea's case. "They saw we are more than willing to stand up to the Board and win. The Board's actions were a huge overreach, way out of proportion, and we fought back. I think that medical boards tend to think of the public as unsophisticated. That's not true anymore - people are sophisticated consumers of medical care and people have a right to choose what medical care they want."

## ENTER STAGE LEFT: QUACKWATCH

One of the forces against consumer choice showed up to testify against

Dr. Rea. Robert Baratz of the National Council Against Health Fraud (NCAHF) projects himself as the president of a nonprofit, tax-exempt group "focused upon health fraud, misinformation, and quackery." The organization often uses medical boards and litigation to discourage the practice of complementary and alternative medicine.

But they don't often win their legal battles. For example, NCAHF lost a court case in 2003, NCAHF v. Botanical laboratories, et al. The judges ruled that although NCAHF believes no one should be allowed to market homeopathic remedies, "Congress has decided otherwise, and officially recognizes the Homeopathic Pharmacopoeia. Appellant's broad-brush approach of sweeping all homeopathic remedies into a single bag marked 'undesirable' simply does not work in the courts."

Simon said Baratz did not make a compelling showing in Dr. Rea's case either. "Baratz was unable to back up any of his opinions with peer-reviewed medicine. He really didn't come off too well."

NCAHF members have included William T. Jarvis, a retired professor of public health; Stephen Barrett, a retired psychiatrist; and Victor Herbert, M.D., J.D., who fought Linus Pauling's "quack promotion" of vitamin C. All are affiliated with the Quackwatch organization which sprang up after the historic Supreme Court decision, *Wilk v. American Medical Association*, a federal antitrust suit brought against the American Medical Association (AMA) by the Doctors of Chiropractic. The Supreme Court ruled in favor of the chi-

ropractic profession in 1990 saying the AMA had engaged in a "lengthy, systematic, successful and unlawful boycott designed to restrict cooperation between M.D.s and chiropractors in order to eliminate the profession of chiropractic."

The AMA had taken a very public beating. Many, including author Dr. James P. Carter, feel that the AMA subsequently created third party entities like Quackwatch to carry on the fight between allopathic medicine and its competitors. Barrett and his associates work to discredit businesses that make alternative health therapies or products available, and doctors who practice a wider standard of care than allopathic medicine provides.

Quackwatch will never say where its organization gets its funding so it has never been able to disprove allegations that they are a front group. However, all eyes are on a current court case, *Doctors Data versus Barrett et al.* Doctors Data is an Illinois lab that provides specialty testing used in the assessment, detection, prevention, and treatment of heavy metal burden, nutritional deficiencies, gastrointestinal function, hepatic detoxification, metabolic abnormalities, and diseases of environmental origin. Steve Barrett claimed last year that their tests are used to defraud patients and noted that "several state licensing boards have taken action against doctors who used provoked urine testing as a prelude to chelation." Doctors Data filed suit, saying they were defamed.

Attorney Jacques Simon said, "If the case survives a motion to dismiss, the discovery process in federal court can be quite wide and

they may be forced to reveal their funding. This would be the case to watch for this."

## ENVIRONMENTAL MEDICINE

The understanding of environmental illness began in Chicago in the 1950s. Dr. Theron G. Randolph, a professor at Northwestern University, noticed that some of his patients got ill when they passed through heavily industrialized areas. He saw it as a "petrochemical problem." Dr. Randolph came to believe that chemical residues are not always eliminated from the body and can lodge in fatty tissue and act as continual irritants to the immune system. Once a person is sensitized to a substance, future exposures can lead to increasingly severe and debilitating reactivity.

"For those unacquainted with the effects of the environment on our lives, this process can be compared to carrying a load of bricks," Dr. Rea explains. "Just as we might fill our arms with bricks, our bodies are being filled with a variety of stressors, including biological, chemical, emotional and physical. As long as the amount of bricks, or stress factors, stays within a range our bodies can manage, everything is fine. But, when the load becomes more than our bodies can handle, down come the bricks. This collapse is represented physically as symptoms."

Dr. Rea's Dallas clinic was built with numerous unique features including porcelain walls, tile floors, full-spectrum lighting, organically grown cotton cushions, computers and printers encased in stainless steel to mitigate the outgassing of

plastics into the air, special air handling systems, filtered water, and no use of pesticides or toxic cleaning products.

"Most of our patients have been to 20 or 30 doctors with no help," said Dr. Rea. "The world is getting dirtier; there is no question that the incidence of chemical sensitivity is growing. The more analysis people do, the more chemicals are found. We are working now on breath analysis to find more chemicals than we've been able to find in blood." A breath test would also cost a lot less than the expensive blood tests journalists like Anderson Cooper and Paul Moyers have done to determine their "body burden."

Dr. Rea's advice to avoid environmental illness? The number one thing we can do is practice avoidance. An educated consumer can avoid a lot of chemicals by learning how to read labels on everything from shampoo to kitchen cleaners - many of which can contain petroleum by-products to which people are increasingly sensitive.

One place to start might be the Environmental Working Group's "Body Burden." The group has documented the industrial chemicals that are building up in our bodies. Another place to look would be the PBS series "Trade Secrets," which followed a study of pollutant loads in the human body sponsored by the Mount Sinai School of Medicine in New York.

The second most important thing we can do, according to Dr. Rea, is to have enough nutrients on board so our body can detox. He regularly sees shortages of B vitamins, magnesium, chromium, and selenium.

## SPECIAL REPORT

"Some of the chemicals affect absorption of them." A nutrient-dense diet has infinitely more advantages for health than a diet of processed foods.

Moms-to-be can also read up on how to create robust immune systems in their babies. (Hint: exposure to

germs outdoors is good because this strengthens the immune system, so save your money and don't buy those bleach wipes.)

Unfortunately, medical schools have been slow to teach environmental sensitivities, metal toxicity, and nutri-

tion. However, many are now starting and probably the next 20 years will see a burgeoning of research. There are already thousands of scientific articles from around the world.

It would appear likely that patients will have increas-

ing need for the skills Dr. Rea has brought to the forefront; the national and global scale of industrial chemical production is expected to grow four-fold by 2050.

*pha*

# The Public Health Alert

Investigating Lyme Disease & Chronic Illness in the USA

Order Bulk Boxes of approximately 50 issues  
\$15 for postage to anywhere in the U.S.

Individual One Year Subscription mailed to your home  
\$35 per year

[www.publichealthalert.org](http://www.publichealthalert.org)

Email: [Publichealthalert@yahoo.com](mailto:Publichealthalert@yahoo.com)

for information about print or online advertising  
in the PHA

**Our website averages about 90,000 hits  
per month & we have nation wide distribution!**