Tick-borne disease is spreading at an alarming rate and much of the needed atten-
tion is upon the treatment as we all know is important. However, we would all agree
much more needs to be done for prevention and public awareness.

With this very thought in mind, I attacked the preven-
tion aspect of the disease as an outgrowth of my seeing Lyme cases in my office sent by physicians who had exhausted their approaches.

It seems many more people could avoid tick bites if there was a product which did not smell bad and was safe for pets and small children.

Alternatively, there are many natural bug repellent products on the market too but very few, if any, specific to ticks.

Present products break down into two types: ones that are chemically based and ones which are from natural ingredi-
ments.

Some of the chemical products are suspected to cause cancer. Others of these pesti-
cides are bio-pesticide and others are titled as not probable to cause cancer. Many of these products contain chemical which can damage plastics,
clothing and cause eye injury. Some will migrate into the blood stream of the user. Many of these products are not suit-
able for use on small children.

The natural products are made from herbs and strong smelling scents which may repel insects but again are not specific for ticks. Here again these products often contain
oils as carriers of the scents and some products may stain cloth-
ing as well.

In looking at all these products, both chemical and natural, I realized if there was a less toxic non-oily fragrance-free product on the market, more people might use a repel-

lent and thus avoid tick bites and therefore avoid disease including Lyme.

I surveyed the mecha-
nism of action of the presently available products, both chemi-
cal and natural. I purchased samples of products, read labels and spent hours reading EPA test data. At the end of an exhaustive literature search and bench-testing of products, it was clear a new product needed to be tick specific, without fra-
grance, without chemicals or even natural poisons and should be non-toxic and utilize some new and different mechanism of action.

With these stringent product design requirements in place, I set out to understand the tick and how it tracks its

blood meal. I looked at the mechanism of action of the cur-
rent tick repellents, as well as common complaints and nega-
tive reactions. It seemed there were few easy possibilities for a unique design yet realizing there had to be a solution to the many problems posed by my design requirement. I pushed forward.

Realizing nature has its own pain systems to balance “good” against “bad”, I began to match as many polar oppo-
sites as possible. When I landed upon a potential solution, the mechanism of action was pure-
ly theoretical and difficult to prove. We had certain data

which supported our theory but the only way to prove it was to test it in a small pilot study.

Subjects were recruited from my patients and because all the ingredients were considered consumables and were even registered as dietary supple-
mements there was no risk of reac-
tion, especially figuring we were going to spray them on the

skin.

Our test subjects were members of three large fami-

lies. The objective was to see if the product would protect people who were not users of tick repellents currently but who were at very high risk of tick exposure. It was important to have people who were active outdoors, playing sports, going to summer camp and playing with the family dog.

Many of the subjects already had confirmed cases of tick-borne illness and some were currently being treated for Lyme disease. They were not users of repellents because of all the very reasons which had driven the design of my prod-

uct. This was also important because they would be the worst critics of a product which had any aggravating properties at all.

In all the test families, the Mom became the trial coor-

"EXPOSIVE” For News

SouthParkPublicHealth

Vol 6, Issue 2 February 2011

Amazing Results from Clinical Trial on Tick Repellant by Geno Print Corporation

by Dr. Toby Watkinson

Tick-borne disease is spreading at an alarming rate and much of the needed attention is upon the treatment as we all know is important. However, we would all agree much more needs to be done for prevention and public awareness.

With this very thought in mind, I attacked the prevention aspect of the disease as an outgrowth of my seeing Lyme cases in my office sent by physicians who had exhausted their approaches.

It seems many more people could avoid tick bites if there was a product which did not smell bad and was safe for pets and small children.

Alternatively, there are many natural bug repellent products on the market too but very few, if any, specific to ticks.

Present products break down into two types: ones that are chemically based and ones which are from natural ingredients.

Some of the chemical products are suspected to cause cancer. Others of these pesticides are bio-pesticide and others are titled as not probable to cause cancer. Many of these products contain chemical which can damage plastics, clothing and cause eye injury. Some will migrate into the blood stream of the user. Many of these products are not suitable for use on small children.

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oils as carriers of the scents and some products may stain clothing as well.

In looking at all these products, both chemical and natural, I realized if there was a less toxic non-oily fragrance-free product on the market, more people might use a repellent and thus avoid tick bites and therefore avoid disease including Lyme.

I surveyed the mechanism of action of the presently available products, both chemical and natural. I purchased samples of products, read labels and spent hours reading EPA test data. At the end of an exhaustive literature search and bench-testing of products, it was clear a new product needed to be tick specific, without fragrance, without chemicals or even natural poisons and should be non-toxic and utilize some new and different mechanism of action.

With these stringent product design requirements in place, I set out to understand the tick and how it tracks its blood meal. I looked at the mechanism of action of the current tick repellents, as well as common complaints and negative reactions. It seemed there were few easy possibilities for a unique design yet realizing there had to be a solution to the many problems posed by my design requirement. I pushed forward.

Realizing nature has its own pain systems to balance “good” against “bad”, I began to match as many polar opposites as possible. When I landed upon a potential solution, the mechanism of action was purely theoretical and difficult to prove. We had certain data which supported our theory but the only way to prove it was to test it in a small pilot study.

Subjects were recruited from my patients and because all the ingredients were considered consumables and were even registered as dietary supplements there was no risk of reaction, especially figuring we were going to spray them on the skin.

Our test subjects were members of three large families. The objective was to see if the product would protect people who were not users of tick repellents currently but who were at very high risk of tick exposure. It was important to have people who were active outdoors, playing sports, going to summer camp and playing with the family dog.

Many of the subjects already had confirmed cases of tick-borne illness and some were currently being treated for Lyme disease. They were not users of repellents because of all the very reasons which had driven the design of my product. This was also important because they would be the worst critics of a product which had any aggravating properties at all.

In all the test families, the Mom became the trial coordinator keeping me advised of usage, any reactions, and any important issues I should be informed about. They were also in charge of the completion of the test questionnaires.

The trials took place over a two year period which included the peak tick seasons during both years. At the end of this period, questionnaires were completed and returned to our office for review by my staff.

The results were amazing … not one tick contact was experienced by any test subject where previously there were body tick sightings, in some cases on a weekly basis and sometimes more. There were no known bites during the tick trials either. The product review was equally successful. The product was shipped as a concentrate and diluted for use. Everyone thought the dilution process was easy and not a problem for a final product. No one complained about the lasting effects of the product or need for replications. There were no complaints about any smell or irritation of any kind from the product. So what do you imagine are you asking why is it I am going to conduct another study. It is simple: I want to be sure. I want to test it with a larger group of subjects. I want to do it through a governmental agency so the results are monitored and all the compliance requirements are met and verified before entering the market. Bottom line, I want to make sure the product really works and a larger trial is the only way to have the confidence.

If you would like to be considered as a participant in the upcoming clinical trial please go to the website www.GenoPrintCorp.com and sign up. We will send you a pre-qualification questionnaire and a human subject release form to complete. The study is targeting late winter 2011 as the expected start date for the trial to begin.
What is Wrong With the American Medical Health Care System?

$9,804 for the medication)

$9,004 for the medication)

$4,658 = allowed as “reasonable” by Blue Cross (including $2,178 for the medication)

$932 = my cost (20%) 

Not long after I reached my $6,000 deductible, Blue Cross dumped me off. After the dump, my only choice was to go shopping. I found everything I need, including the medication and all IV supplies for $326 per month. Some of the supplies come from my neighborhood pharmacy, and some from the Internet.

I reduced my share of the national health care bill by a whopping 93%. I did it by shopping carefully, spending my own money, and being able to operate in a free market, unrestrained by government. Surely, those from whom I buy are making a profit or they wouldn’t be selling. The initial infusion company was not only making a fair profit, but was absolutely taking insurance (and Medicare) to a ride. My sense is thelush fund we call Medicare has destroyed any sense of sanity in American health care. Government and insurance companies like Blue Cross base their decisions on the guidelines written by the Infectious Disease Society of America (IDSA). IDSA denies that late-stage Lyme exists, and that any Lyme, regardless of how sick the person is or how long she has been sick, is treatable with just four weeks doxycycline. Period!

Interestingly, IDSA’s guidelines were challenged by the Connecticut Attorney General. He found many irregularities in their writing and found numerous conflicts of interest. Some of the conflicts included various panelists who advise insurance companies and testify for them against Lyme-literate physicians. The group was required to hold new hearings and reconsider. No Lyme-treating physicians were allowed to participate. We don’t have to wait for Obamacare death panels. They are already here.

Fortunately for me, there is an opposing group, International Lyme and Associated Diseases Association (ILADS), that understand late-stage Lyme and contend that it can indeed be treated. This group understands that the longer someone has been sick, and the sicker the person is, the longer treatment is going to take. The good people from this school of thought have given me a chance for life...

God bless them, and God bless America.

Elizabeth's Chalker's Book Is Now Available!

Elizabeth has written a powerful, God-inspired book that will encourage and help strengthen anyone who reads it. If you are in the midst of suffering, or struggling through intense hardships, then this book will provide solace and hope to pull you out of the darkness and into the light.

Elizabeth is still courageously fighting for her life and to get the resources necessary to receive life-saving medical treatment.

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- *Borrelia hermsii*
- *Ehrlichia ricketsii*
- *Ehrlichia chaffeensis*
- *Francisella tularensis*
- *Rickettsia prowazekii* (Ehrlichia)
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- *Tularemia*
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Meet John Pellini

John Pellini stood over 6' and weighed 250 pounds.
Every Christmas and New Year, when I give thanks for the people who have blessed my life, I remember the mothers and fathers of severely vaccine-injured children, who have taught me the most about love and courage. I know that my son, Chris, who developed brain inflammation within hours of his fourth DPT shot in 1990, could have been far worse.

Chris’s vaccine reaction at two and a half years old left him with milder forms of brain dysfunction—multiple learning disabilities and attention deficit disorder—but he and I both understand that he could have suffered medication resistant seizures, autism, profound mental retardation, or he could have died that day. So when I meet parents whose children have died or are more seriously affected, always I wonder what kind of mother or father would have been and what kind of choices I would have made if Chris’s brain inflammation following his DPT vaccination had been much more severe.

This past fall, my husband, Paul Arthur, and I traveled to family gatherings in New England and, on the way, we stopped in Connecticut to visit Mia and Mia’s husband, and their three daughters, Mia Gianna, and Bella, who have autism. Mia is the managing editor of Age of Autism and the author of a new book, All I Can Handle: I’m No Mother Teresa by Mia Gianna, with her remarkable courage, while others do not, is a reminder that great courage is often defined by the kind of mother who may be no longer. Stagliano, with her remarkable courage, while others do not, is a reminder that great courage is often defined by the kind of mother who may be no longer. Stagliano, with her remarkable courage, while others do not, is a reminder that great courage is often defined by the kind of mother who may be no longer. Stagliano, with her remarkable courage, while others do not, is a reminder that great courage is often defined by the kind of mother who may be no longer. 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It is important to note that while the majority of people with Lyme disease make a full recovery with appropriate treatment, some may experience long-term effects or ongoing symptoms. These patients may require ongoing medical care and support to manage their condition effectively. It is crucial to ensure that patients have access to specialized care and resources in their local communities. Additionally, there is a growing awareness of the importance of early detection and treatment of Lyme disease. Many experts agree that timely diagnosis and prompt treatment are critical for achieving the best outcomes. Early intervention can help prevent chronic complications and reduce the risk of long-term sequelae. It is essential to address the underlying causes of Lyme disease and its co-infections. Prevention is key, and this includes informing the public about effective preventive measures such as avoiding tick-infested areas and using insect repellents. It is also important to encourage healthcare professionals to stay informed about the latest research and guidelines. In conclusion, Lyme disease is a serious and complex condition that requires a multidisciplinary approach for effective management. Patients and their families deserve the best possible care and support, and we must continue to advocate for increased awareness, funding, and research to improve outcomes for those affected by Lyme disease. The struggle for recognition and support persists, but there is hope for a better tomorrow for those living with Lyme disease and related conditions. It is through collective efforts and persistence that we can make a positive impact in the lives of those affected.
The Poison Plum is a gripping, chilling novel exposing the rampaging epidemic of Lyme disease now sweeping across America and the disease’s connection, if any, to the government’s top-secret biological research laboratory at Plum Island, New York.

Dr. Burrascano’s
2008
Lyme & Associated
Tick Borne Disease
Treatment Guidelines

“The Poison Plum is a gripping, chilling novel exposing the rampaging epidemic of Lyme disease now sweeping across America and the disease’s connection, if any, to the government’s top-secret biological research laboratory at Plum Island, New York.

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Spirochetes on the Brain

by Dr. Robert C. Bransfield

To know Lyme disease is to know medicine, neurology, psychiatry, ecology, law, politics, and ethics. Clearly this dis- ease requires a unique set of skills for any one individual to possess such a broad range of expertise.

For many years, I noticed a significant number of Lyme disease patients complaining of sleep disorders or severe fatigue. Both had a number of other central nerv- ous system (CNS) complaints. Whenever the sleep disorder and other psychiatric symptoms were effectively treated, often there was an improvement in the Lyme disease symptoms. With time, I began to appreciate the wide range of cognitive, psychiatric, neuro- logical, and somatic symptoms that were a part of Lyme dis- ease.

One such patient led to my greater involvement with Lyme disease. She had been previously diagnosed with sleep disorders and the disease and was treated with the usual protocol that was con- sidered standard practice for several years. I found her mental status to be falling mal- nourished down slope, in spite of every psychotherapeutic treatment possible. Apart from the headaches, joint pain, cogni- tive impairments, etc., it was also the mood swings, homicidal, and suicidal threats that were the most threatening symptoms. An extended period of IV antibiotics were clearly effective in treating the disease. The National Institute of Mental Health needs to be more actively involved in research into the effects of Lyme disease on the brain. Since this is such a complex disease, the greatest challenge is the ability of individuals from very different disciplines to work together effectively in a unified direction.

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Dr. Bransfield is the President of IAIDS.

their ailing children. Tragically, those authorities are empow- ered to terminate the life of a sick or partially healed young one from their devoted fami- lies.

To their everlasting shame, medical authorities have stood by while innocent moth- ers have been sent to jail for insisting that their children were ill and again have stood by while the parent's belief was verified by the death of their sick or partially healed young ones from their devoted fami- lies.

"Under-Treated" ...cont'd from pg 5
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- Phone: (205) 879-8881
- Phone: 1-800-FIGHT-MS
- Email: alc@nmss.org
- [www.nmss.org/alc](http://www.nmss.org/alc)

**Northern California:**
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- Phone: 510-268-0572
- Toll-free: 1-800-FIGHT-MS
- Email: info@flc.nmss.org
- [www.nmss.org/flc](http://www.nmss.org/flc)

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- Maitland, FL 32751
- Phone: 1-800-4FIGHT-MS
- [www.nmss.org/alc](http://www.nmss.org/alc)

**National Support:**
- [www.nationalmssociety.org](http://www.nationalmssociety.org)

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- [www.nationalmssociety.org](http://www.nationalmssociety.org)
- [www.timeforlyme.org](http://www.timeforlyme.org)

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- [Providing Quality Natural Products Since 1993](http://www.timeforlyme.org)

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**Military Lyme Disease Support**

- [Military Lyme Disease Support](http://health.groups.yahoo.com/group/MilitaryLyme)

**Texas Lyme Disease Association**

- [www.txlda.org](http://www.txlda.org)

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**Public Health Alert**
follow-up story. Why would Channel 5 drop a story about shabby healthcare, especially since this does not seem to be an isolated case? Kaiser has been involved in "patient dumping" and violations of their kidney transplant program. Is this not important news? To view the Channel 5 video go to: http://cbs5.com/local/joe.pellicciere.teresa.2.446500.html.

Unfortunately, John Pellini passed away without getting his day in court. Teresa keeps vigil over her father's case and my resources tell me there will soon be a book published detailing all the events which led to John's passing.

The saddest thing is, John Pellini's initial problem with his leg was never addressed, the very problem he sought help for on the day that would be the beginning of his end.

References:
2. In order to contain costs, Kaiser requires agreement by planholders to submit patient malpractice claims to arbitration rather than litigating through the court system. This has triggered some discussion and dissent. (Chris Rauber.) "Kaiser fires back in arbitration suit." San Francisco Business Times. February 20, 1998

Patients and consumer interest groups sporadically attempt to bring lawsuits against Kaiser Permanente. Recent lawsuits include Gary Rushford's attempt to use proof of a physician lie to overturn an Arbitration decision.

"Survive"...cont'd from pg 4

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Dallas - Fort Worth Lyme Support Group
Monthly Meetings:
2nd Saturday each month 2-4 p.m.
Harris Methodist Hospital- HEB
1600 Hospital Parkway
Bedford, TX 76022-6913

We meet in the left wing when facing the front of the building.

Contact our group leaders for more information:
Rick Houts, email: Pedler3710@aol.com
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