

**ILLINOIS STATE MEDICAL SOCIETY**

**Resolution 02.2019-35  
(A-19)**

Introduced by: Rashmi Chugh, M.D., M.P.H., ISMS Member

Subject: Repeal of Disciplinary Exemption for Physicians Providing  
Experimental Therapy

Referred to: Governmental Affairs Council

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1           Whereas, the Illinois General Assembly voted HB 4515 into law (Public Act 100-  
2 1137) in 2018, which states: “The Department shall not revoke, suspend, place on  
3 probation, reprimand, refuse to issue or renew, or take any other disciplinary or non-  
4 disciplinary action against the license or permit issued under this Act to practice  
5 medicine to a physician...for experimental treatment for Lyme disease or other tick-  
6 borne diseases, including, but not limited to, the prescription of or treatment with long-  
7 term antibiotics;” and

8  
9           Whereas, “chronic Lyme disease” is a nonspecific diagnosis without a consistent  
10 definition that has been given to patients with various symptoms; treatments offered for  
11 chronic Lyme disease, such as prolonged antibiotic or immunoglobulin therapy, lack  
12 data supporting effectiveness and are not recommended<sup>1</sup>; and

13  
14           Whereas, clinicians, health departments, and patients have contacted Centers for  
15 Disease Control and Prevention (CDC) with reports of serious bacterial infections  
16 resulting from treatment of persons who have received a diagnosis of chronic Lyme  
17 disease<sup>1</sup>; and

18  
19           Whereas, experimental therapies, specifically long-term antibiotics, have been shown in  
20 multiple studies to be dangerous and may result in serious complications resulting from  
21 unproven treatments, including Clostridium difficile colitis, osteodiscitis, abscess, septic  
22 shock, and death<sup>1</sup>; and

23  
24           Whereas, such therapy also promotes the growth of drug-resistant organisms that may  
25 lead to serious infections in the patient and in the community; in addition, patients may  
26 incur thousands of dollars of direct medical costs for unproven therapy that is often not  
27 covered by medical insurance; and

1           Whereas, Lyme disease cases have increased in Illinois and neighboring states<sup>2</sup>;  
2 Lyme disease is transmitted by blacklegged ticks, and common symptoms include a  
3 rash, fever, body aches, facial paralysis, arthritis, inflammation of the brain, and  
4 abnormalities of the heart; most recover after treatment with antibiotics for 14–28 days;  
5 some may continue to experience symptoms such as fatigue, pain, or muscle aches;  
6 based on current research, there is no evidence of active infection after treatment as  
7 outlined by the Infectious Diseases Society of America (IDSA)<sup>3</sup>; and  
8

9           Whereas, the ISMS has no policy regarding experimental treatment and did not  
10 oppose HB 4515 in 2018 which subsequently became law; therefore, be it  
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12           RESOLVED, in the interest of patient safety and protecting the public’s health,  
13 that the ISMS oppose provision of and payment for experimental therapy that has not  
14 met human subject safety protocols within an institutional review board-approved study;  
15 and be it further  
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17           RESOLVED, that the ISMS support or cause to be introduced legislation that  
18 repeals the disciplinary exemption in Public Act 100-1137 for physicians and other  
19 healthcare professionals who provide experimental treatment for Lyme disease or other  
20 tick-borne diseases, including, but not limited to, the prescription of or treatment with  
21 long-term antibiotics.

References:

1. Marzec NS, Nelson C, Waldron PR, et al. Serious Bacterial Infections Acquired During Treatment of Patients Given a Diagnosis of Chronic Lyme Disease — United States. MMWR Morb Mortal Wkly Rep 2017;66:607–609. DOI: <http://dx.doi.org/10.15585/mmwr.mm6623a3>.
2. Lyme Disease Data and Statistics (see maps of “Reported Cases of Lyme Disease—United States, 2001-2016). Centers for Disease Control and Prevention. Retrieved from <https://www.cdc.gov/lyme/stats/index.html>.
3. Lyme Disease and State Policy Primer for State Legislators, August 2016. Infectious Diseases Society of America (IDSA). Retrieved from <https://www.idsociety.org/globalassets/idsa/topics-of-interest/lyme/lyme-state-policy-primer-update-2016-final.pdf>.

**Fiscal Note:**

N/A

**Existing ISMS policy related to this issue:**

With respect to experimental medical procedures, physicians must adhere to and affirm the following: Accepted ethical standards; the codified regulations of the Department of Health and Human Services as specified in Title 45 USC, Sec. 46; and appropriate Illinois statutory or regulatory requirements. (HOD 1981; Last BOT Review 2013)

It is the policy of ISMS to require that routine and continuing care of patients remain the responsibility of the patient and his third party payer even during the conduct of an experimental protocol. The experimental medication, any tests necessary to evaluate the therapy, and any treatment necessary to correct any complications of the experimental therapy remain the responsibility of the sponsor of the protocol. (HOD 2001; Last BOT Review 2014)

Due process should always be respected during disciplinary actions, and all related disciplinary proceedings should remain confidential until the final decision is rendered. (HOD 2007; Last BOT Review 2011)