



June 19, 2007

A position statement from Randy S. Wymore on the topic of Morgellons Disease and other Morgellons-related issues:

1. Delusions of parasites (DOP) is a diagnosable condition.
2. Neurotic excoriations can be found in the general population.
3. Crystal-meth users as well as some other addictive substances can cause DOP or DOP-like symptoms and severe skin problems.
4. The condition known as Morgellons Disease, or Morgellons Syndrome (the CDC preference for labeling this condition), is none-of-the-above. Researchers and clinical faculty at the Oklahoma State University Center for Health Sciences have been looking into Morgellons Disease for several years now. We do not know a) the cause of Morgellons, b) what the fibers, black specks, granules or other unusual "shed" material are made of, or c) any conclusively effective treatment. We do know that some samples of fibers associated with Morgellons Disease are not simple textiles of animal, plant or synthetic nature.
5. Does everyone who thinks they have Morgellons Disease actually have it? Undoubtedly, the answer is no. There is no way to determine the percentage of self-reported registrants that actually have Morgellons Disease. Of the many thousands who have self-reported at the OSU web-based registration site we do not know whether 1% actually suffer from DOP or 90%. Of the thirty or so patients claiming to have Morgellons disease, that clinical faculty have examined in facilities associated with OSU, only one patient likely did not have Morgellons.
6. There is no clear and simple diagnostic test yet to confirm or rule out Morgellons. Still, 100% of the patients, that were felt to genuinely have Morgellons Disease, have large microscopic-to small macroscopic fibers visible under their outer layer of skin. These fibers are not associated with scabs or open lesions, nor are they under scarred tissue. The idea that Morgellons fibers are mere fuzz and lint, simply sticking to the lesions and scabs, is not possible based on the observations that were just described. These fibers are under "normal-appearing" areas of skin. In contrast, such fibers have never been observed in even one person who does not claim to have Morgellons. Clearly, there is something different in the skin of purported Morgellons sufferers compared to the non-Morgellons population. The writing of manuscripts, for

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submission to scientific and medical journals, detailing our observations is a work in progress. Preliminary observations were presented at the annual Molecular Medicine TriConference during late January/ early February in San Francisco, with a title of: "Physical Evidence in Morgellons Disease".

7. This conference was attended by physicians and biomedical scientists from various universities, biotechnology companies and major pharmaceutical companies. Those scientists and physicians who viewed the presentation from the preliminary evidence through to the conclusions made no attempt to "debunk" the presentation. They asked the kind of rigorous questions that are expected from a highly trained, skeptical and critical audience. Their reactions tended to be surprise, shock and puzzlement. Not one single person tried to convince his/her colleagues, or me, that I was mistaken in the conclusion that Morgellons Disease is real physical pathology of unknown cause.

8. Amateur debunkers carry no weight in academia and have no relevance in the discussion of Morgellons Disease in the scientific and medical community. Since the clinicians (both D.O. and M.D.) and scientists at the conference I mentioned above did not debunk a formal presentation on the topic of Morgellons Disease, why would an amateur think that they could? An amateurish debunking approach is often nothing more than a type argumentative arrogance. A person, or persons, manages to attract an audience that will participate in the argument and it gives the debunker a sense of power. What goes on at debunking sites is most definitely NOT scientific debate and critical inquiry. Critical scientific debate occurs at conferences (regional, national or international), during seminars and during the editorial review when scientific manuscripts are submitted. If an amateur debunker (unless the debunker is paid for the debunking services, in which case she/he would be a professional debunker) feels that they can compete in the professional scientific arena, let them submit an abstract to a conference or a manuscript to a scientific journal (a legitimate, peer-reviewed scientific journal). The results would be laughable; probably not to the debunker, but the reality of the world is that none of the mainstream journals that are peer-reviewed would publish such a manuscript. The internet is a wonderful forum for discussions of all sorts and a place where information can be obtained on just about any subject imaginable. If a person, or group of people, wish to spend time deconstructing the words, comments and images of others, or to try to debunk what they view as unreal, then that is certainly their option in life. I personally do not find that it would be very personally satisfying. In my mind, such efforts are, at the very least, a waste of valuable time and at the worst, hurtful. What good can come of it? If the Morgellons community TRULY was delusional, then a debunking site would not convince them not to be delusional. Truly delusional behavior is a psychological condition; one cannot "cure" a delusion by simply arguing against the delusion on an internet site. The delusional person will not simply read the words and in near-miraculous form say, "Oh my, I really am delusional. Now that I know this I can give up my delusion. Thank you for pointing out the obvious and curing me." Since that will

not happen, then what good can come from the debunking site? It is difficult to use the word "good" when the main accomplishment of such a site is to cause consternation and further emotional pain to an already suffering population. The reason is that, while the professional medical and scientific community will pay no attention to a debunking website, the same cannot be said for the friends and family of the Morgellons sufferer. Words are powerful and when spoken in an authoritative fashion those loved ones of a Morgellons sufferer may well feel that the debunking arguments clearly prove that Morgellons is not real. In a formal debate ANY position can be effectively argued. It is possible to argue a position that one does not even believe in during a debate. It is all about skill with words, the ability argue in a logical and convincing fashion and a personal talent for thinking fast on one's feet. When debates are judged in high-school and college/university settings, the winner is not the contestant that bases his/her argument on truth, reality or the socially accepted constructs; it is the person who can argue their point the most effectively. Most debunkers are quite good at this. That is why true scientific debate is not carried out using the same judging standards as a competitive debate. Generally, scientists try to understand the world around them. Scientific "debate" is all about experimental design, methods, materials, quality and reproducibility of data and conclusions. And that type of debate can only occur between scientific peers.

9. Recently, OSU-CHS has established a Center for the Investigation of Morgellons Disease and the OSU Foundation has established a Morgellons Research, Education and Treatment Fund for individuals wishing to make tax-deductible donations to help in trying to sort out this mystery that is called Morgellons Disease. Physician associated with this Center are not seeing patients at this time as there is nothing to offer in the way of treatment options. We are currently focusing our efforts into examination of the fibers and other shed material observed in Morgellons Disease. Why? Because we stand a better chance of determining the cause of Morgellons Disease once we understand what the physical and chemical nature of the unusual fibers are. Once the cause of Morgellons Disease is identified it will be more likely that an effective treatment and, ultimately, a cure will be devised. I applaud the many physicians and nurses who ARE attempting to treat Morgellons Disease by trying different strategies. It will be wonderful if one of them stumbles onto a complete cure for the disease. In an academic or medical school setting that approach is not workable. Before human subjects can be used or so-called clinical trial established, there must be an arguable rationale for the treatment. Until the cause of Morgellons can be established (bacterial, fungal, viral, parasitic, genetic, or none-of-the-above) such a rationale cannot be provided. A statement regarding the role and goals of OSU-CHS and Morgellons Disease has been provided to this website.

10. There are many ideas and conspiracies regarding the cause of Morgellons Disease to be found circulating about the internet. Many Morgellons sufferers

are convinced they know what the cause is. Here at the OSU-CHS Center for the Investigation of Morgellons Disease we are rooting all efforts in a central tenet of scientific thought: the testable hypothesis. Efforts to find microorganisms associated with Morgellons are a process of elimination. We use molecular biology techniques to try to identify the presence of DNA sequences of candidate organisms and chemical and physical analyses to characterize the fibers and other Morgellons-associated material. At The Center, we are not competing against other researchers or anyone's "pet hypothesis". Often in science there is a race to beat competing labs. There is so much suffering with Morgellons that the only race from my perspective is a race to end the suffering. For those who read this and then feel the need to analyze and micro-analyze this position statement for debunking purposes or to try to divine my "real" motivation and intentions why deconstruct away! For those who are suffering from Morgellons Disease, I can only encourage you to hang on and try to not despair. This summer there are 2 medical students, an undergraduate, a graduate student, 2 physicians in their residencies, a laboratory technician and several biomedical/clinical faculty at OSU-CHS and other universities, that are working on this mystery. One or two people can only complete a limited amount of work. Collectively, this group will be able to accomplish so much more than could otherwise be envisioned. Whether the answers to the questions surrounding Morgellons Disease come from Tulsa, Oklahoma, another state, another country or bits and pieces from here and there is not what should be focused on. The point of focus that should be maintained is that the answers WILL be forthcoming; who comes up with the answers and where they are located are only details.

Sincerely,



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