

PRESS KIT

# UNDER OUR SKIN

THERE'S NO MEDICINE FOR SOMEONE LIKE YOU

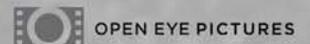


AN OPEN EYE PICTURES PRODUCTION "UNDER OUR SKIN" A FILM BY ANDY ABRAHAMS WILSON EDITOR EVA ILONA BRZESKI MUSIC JUSTIN MELLAND SENIOR PRODUCER KRIS NEWBY  
CO-PRODUCERS CHERYL DRAKE, EVE MORGENSTERN ASSOCIATE PRODUCER & ASSISTANT EDITOR RENNY MCCAULEY EXECUTIVE PRODUCER THE SWARTZ FOUNDATION  
OUTREACH PARTNER TURN THE CORNER FOUNDATION PRODUCED, DIRECTED & PHOTOGRAPHED BY ANDY ABRAHAMS WILSON



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## Tagline

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A dramatic and frightening expose about how our corrupt medical system is failing to address one of the most serious epidemics of our times.

## Synopsis

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A gripping tale of microbes, medicine and money, this eye-opening film investigates the untold story of Lyme disease, an emerging epidemic larger than AIDS. Each year thousands go undiagnosed or misdiagnosed, told that their symptoms are "all in their head." Following the stories of patients and physicians fighting the disease, the film brings into focus a haunting picture of the healthcare system and a medical establishment all too willing to put profits ahead of patients.

## Exhibition and Credits

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Exhibition Format: 35mm Film, HDCAM, TRT 104 minutes  
Sound Format: Dolby Stereo

World Premiere: Tribeca Film Festival, April 2008  
Theatrical Premiere: IFC Center, June 19, 2009  
Broadcast Premiere: TBD

A Production of.....Open Eye Pictures, Inc.  
A Film by..... Andy Abrahams Wilson  
Editor.....Eva Ilona Brzeski  
Cinematographer.....Andy Abrahams Wilson  
Music.....Justin Melland  
Senior Producer.....Kris Newby  
Co-Producers.....Cheryl Drake, Eve Morgenstern  
Executive Producer..... The Swartz Foundation

### Major Funding:

The Nathan Cummings Foundation, The Educational Foundation of America, Gib & Susan Myers, The Frank & Denise Quattrone Foundation, The Purple Monkey Fund, Kenneth Broad, Karen Kissling, Elizabeth Austin Family, The Cullen-Martin Family Foundation, Erik & Mary Giese, The Kortschak Family Foundation, Steven & Janet Kouroubacalis, The Rinkle Family Fdn.

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## Background

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In the early 1970's, a mysterious ailment was discovered among children living around the town of Lyme, CT. What was first diagnosed as isolated cases of juvenile arthritis, eventually became known as Lyme disease, an illness triggered by spiral-shaped bacteria, similar to the microorganisms that cause syphilis. Today, many of those untreated will suffer chronic debilitating illness. Some unknowingly will pass the disease on to their unborn children. Many will lose their livelihoods, and still others, their lives.

Yet Lyme disease is one of the most misunderstood and controversial illnesses of our time. Difficult to test accurately, tens of thousands of people go undiagnosed—or misdiagnosed with such conditions as fibromyalgia, chronic fatigue, autism, MS and ALS. The Centers for Disease Control admits that more than 300,000 people may acquire Lyme disease each year, a number greater than AIDS, West Nile virus, and swine and avian flu combined. And yet, the medical establishment—with profound influence from the insurance industry—has stated that the disease is easily detectable and treatable, and that “chronic Lyme” is some other unrecognized syndrome or a completely psychosomatic disorder.

UNDER OUR SKIN is a powerful and often terrifying look not only at the science and politics of the disease, but also the personal stories of those whose lives have been affected and nearly destroyed. From a few brave doctors who risk their medical licenses, to patients who once led active lives but now can barely walk, the film uncovers a hidden world that will astound viewers. While exposing a broken health care and medical research system, the film also gives voice to those who believe that instead of a crisis, Lyme is simply a "disease du jour," over diagnosed and contributing to another crisis: the looming resistance of microbes and ineffectuality of antibiotics. As suspenseful and hair-raising as a Hollywood thriller, UNDER OUR SKIN is sure to get under yours.

## Director's Statement

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My nightmarish journey into the depths of the Lyme disease controversy started by accident. A friend of mine in San Francisco was getting sicker and sicker with severe and progressive neurological illness. She was first diagnosed with multiple sclerosis, and then Lou Gehrig's disease (which is basically a death sentence). But she kept looking for possible explanations and, finally, was diagnosed with Lyme disease. *Lyme disease?! I recalled that my twin sister in Upstate New York suffered from it years ago. I remember she was always tired and achy, even though she looked just fine. So I never took it seriously, like most people, and I believed it was just an East Coast disease, if a real disease at all.*

So I was shocked that Lyme disease could be so debilitating, even life-threatening. I discovered that the prevalence of Lyme disease in the U.S. may be at least ten times greater than HIV, West Nile virus (and now swine flu) combined. Like its genetic cousin, the "great imitator" syphilis, it mimics other illnesses, including chronic fatigue, fibromyalgia, rheumatoid arthritis, lupus, MS, ALS, Alzheimer's and autism. I learned it could be transmitted from mother to child *in utero* and that sexual transmission has not been ruled out.

Worse still: standard tests seem hopelessly inaccurate, and most physicians are untrained to diagnose or treat the illness. Furthermore, physicians who do take on chronic Lyme patients risk the suspension of their medical licenses. On the patient side, I found variations of the same story repeated thousand-fold: doctor after doctor, years of misdiagnoses, hundreds of thousands of dollars exhausted, denial of insurance coverage, accusations of hypochondria and, finally if ever, a long road back to health.

What was going on? What if my friend had stopped after the ALS diagnosis? Would she still be alive today? What if my sister didn't persevere until she proved wrong those (like myself) who thought it was all in her head? Sometimes I think the film is my way of making penance for the way I treated my sister when she was sick. After all, William Osler, considered to be the father of modern medicine, once said, "If you listen carefully to the patient they will tell you the diagnosis." Our patriarchal medical system is coming up against its limits of knowledge and arrogance, threatened in good measure by "internet activists" (mostly women) who are taking their family's healthcare into their own hands, sharing community and resources, and demanding help.

After four years of research and production—and over 375 hours of footage, what we uncovered is a chilling tale of microbes, medicine and money. Deregulation and lack of oversight of scientific research and conflicts of interest in medicine are poisoning healthcare, denying our citizens health, and costing our citizenry profound loss of productivity and resources. We need an overhaul of our medical research, health delivery and insurance systems. Lyme disease is the canary in the coalmine and a case study for what's wrong and needs to be fixed. UNDER OUR SKIN is an important contribution to the current national debate about healthcare reform.

At the epicenter, a tiny, but larger-than-life microbe looms, providing a powerful symbol for an issue that is hidden and lurking, so small yet so big, so real but unrecognized. What has gotten under our skin is not just a microorganism, but medicine itself, and a poisonous system which has abandoned some of the most needy. Our own human skin is a microcosm of the skin of the earth, and the extent to which the earth's body is out of balance, so is our own. Nature is context but also content.

I want to show the horror of an illness and an ill system that too long has been ignored. But I also want to show the human and natural beauty right next to it. Sometimes indistinguishable, the beauty and horror are connected. If UNDER OUR SKIN merely perpetuates the idea that the natural world is perilous, or that human nature is corrupt, we miss out on the beauty that surrounds us. On the other hand, if we are lulled by convention or don't look below the surface, we risk infection by the equally dangerous maladies of ignorance and indifference.

- *Andy Abrahams Wilson*

## About The Filmmakers

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### **Andy Abrahams Wilson, Producer/Director/Cinematographer**

Andy studied journalism and anthropology at Northwestern University and received an MA from USC in visual anthropology and film. He is an Emmy-nominated producer and director of creative non-fiction films. Credits include the HBO special and multi-award winning *Bubbeh Lee & Me* and the Sundance Channel broadcast *Hope Is The Thing With Feathers*. A recipient of a Pew Charitable Trust Fellowship in Dance/Media, Wilson has produced several films about dance or dancers, including *Positive Motion* (Best of Show, Dance on Camera Festival), *Casualty* (First Place, Planet Out Short Movie Awards) and *Returning Home* (Grand Jury Award, Dance on Camera Festival). Wilson is founder of Open Eye Pictures, past Budget Director of the film distribution cooperative New Day Films, and a 2003 recipient of an Individual Artist Award from the Marin Arts Council.

### **Kris Newby, Senior Producer**

Kris is an award-winning screenwriter and science writer, with engineering degrees from Stanford and the University Of Utah. Kris combines a strong science and writing background with personal experience as a person with Lyme disease. Past film honors include first place in the Vanity Fair Screenwriting Competition for *The Horse Trader*. This film was recently produced and has been shown in several film festivals across the country. Kris has also managed video and multimedia projects for Apple Computer and other Silicon Valley companies.

### **Eva Ilona Brzeski, Editor**

Eva is principal editor of UNDER OUR SKIN. A filmmaker as well as an editor, she was featured as one of Filmmaker Magazine's "25 new faces" in 1999 and is the recipient of numerous honors for her work, including screenings at Sundance and fellowships from the NEA and McDowell Colony. Eva is the writer/director/editor of the documentaries *This Unfamiliar Place*, *24 Girls*, and the recent feature *Last Seen*. She also edited Ellen Bruno's *Sacrifice* and David Jacobson's *Criminal*. In addition to cutting her own films and working as a freelance editor, she worked for three years as a television editor for MTV's *The Simple Life* and *Real World*.

## About The Film Subjects

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### **Patients**

#### **Mandy Hughes**

Once a marine animal trainer at Sea World, Mandy is diagnosed with Lyme disease at age 19, but is given insufficient treatment. For more than seven years her health deteriorates as doctors tell her she has chronic fatigue syndrome, dystonia, multiple sclerosis, and psychological problems. Finally, a physician diagnoses her with Lyme disease and treats her with intravenous antibiotics. Just as her health begins to improve, her very supportive husband, Sean, begins to exhibit his own Lyme-like symptoms and the couple is left to worry about the possibility that Mandy has sexually transmitted the disease to her spouse.

### **Jordan Fisher Smith**

Jordan, a forest ranger, pulls out an embedded tick and brings it to his doctor concerned about contracting Lyme disease. The doctor tells him not to worry about it, because "it's a rare disease in California." Eight months later, Jordan's overwhelming cognitive issues and fatigue cause him to go on disability. After a renowned Lyme-literate physician begins treating him with long-term antibiotics, Jordan starts getting his old life back, and he goes on to write the acclaimed naturalist book, *Nature Noir*.

### **Dana Walsh**

Penniless and in desperate need of medical help to treat her chronic Lyme symptoms, Dana accepts a crew job with U2 on tour. But with a body that is shutting down, the strains of life on the road force her to quit her dream job. In a last ditch effort to save her health, she relocates to Seattle to seek treatment from a leading physician of integrative medicine.

### **Elise Brady-Moe**

After several miscarriages deemed to be caused by the congenital transmission of Lyme disease, Elise is pregnant again and soon gives birth. A mother and school administrator in Connecticut, she fears for her baby's life and health. Her Lyme treating physician wonders how many mothers unknowingly pass Lyme to their children in utero, unaware that they themselves have Lyme or that their disease can be transmitted congenitally.

### **Jared Shea**

Jayne Shea knows her newborn son, Jared, has developmental problems, but her doctors either won't believe her or ascribe his problems to "unknown etiology." As Jared's neurological symptoms worsen, she demands that her son's pediatrician test him for Lyme. After positive test results, Jayne realizes that her son's cascading symptoms are likely the result of her passing on the disease in utero. In an endemic rural area of Southeastern Pennsylvania, Jayne points out home after home in her neighborhood "where Lyme lives."

### **Marlena Connors**

Marlena was a promising young ballet dancer when, at age 12, she is struck with severe joint pain, inflammation and other debilitating symptoms. Almost overnight, she goes from performing the Nutcracker with the Boston Ballet to being wheelchair-bound. After local doctors suggest that Marlena's problems are "all in her head," her mother takes her to a controversial Connecticut Lyme pediatrician. The long-term antibiotic therapy he prescribes finally enables Marlena to walk again and return to school.

### **Ben Petrick**

An up-and-coming star of major league baseball, Ben is forced to retire from the Colorado Rockies at age 23 because of a diagnosis of Parkinson's disease. He is skeptical of the suggestion to get tested for Lyme disease, but a positive result and subsequent Lyme treatment give him a reprieve from what he previously thought was a "slow death sentence."

## **Experts**

### **Alan Macdonald, MD**

Dr. Macdonald is a staff pathologist at a regional hospital on Long Island, but in his free time he is an impassioned researcher who works out of a makeshift home laboratory. Dr. Macdonald's research into Lyme disease began over 25 years ago, when he noticed striking similarities between the bacteria that cause Lyme disease and the related bacteria that cause syphilis. Against the odds and currents of the mainstream medical establishment, his pioneering research shows promising connections between Lyme disease and neurodegenerative disease, bacterial biofilms, and the role of maternal-fetal transmission.

### **Charles Ray Jones, MD**

Dr. Jones, the leading Lyme-literate pediatrician in the U.S., is considered the dean of pediatric Lyme by his colleagues. In his private practice he has treated more than 10,000 Lyme patients, 300 of whom contracted Lyme in the womb, and at least 35 who acquired the disease through breast milk. He has reported success treating the chronic form of the disease with long-term antibiotics. At age 79, Dr. Jones has been in legal proceedings for 2 years, initiated by a divorce-inspired complaint by a non-custodial father in Nevada. The Connecticut Medical Board found Dr. Jones guilty of diagnosing Lyme over the phone and prescribing antibiotics over the phone. His case is currently in appeal.

### **Joseph Jemsek, MD**

Dr. Jemsek is one the leading Lyme-literate physicians in the Southern U.S. From 2003-06 his Lyme clinic treated an average of 80 new patients per month from 46 states. A vocal critic of the Infectious Disease Society of America's Lyme Guidelines, he has reported success treating the chronic form of Lyme disease with long-term antibiotics. For his maverick approach to treatment, Dr. Jemsek was officially sanctioned by the North Carolina Medical Board. The sanction provided a foundation on which Blue Cross/Blue Shield filed suit to recoup fees they had paid for the "unauthorized" treatment. He declared bankruptcy and moved his practice to South Carolina.

### **Joseph Burrascano, MD**

Dr. Burrascano is the leading Lyme-literate physician in the U.S., having treated more than 7,000 Lyme patients and pioneering treatment protocols with long-term antibiotics. At a time when many Lyme-treating physicians are forced out of practice or disinclined to take on Lyme patients, Dr. Burrascano decides to close his practice, leaving hundreds of patients in the lurch. He is currently developing a universal database for the gathering and analysis of Lyme and tick borne diseases.

### **David C. Martz, MD**

Recently retired from private practice at Rocky Mountain Chronic Disease Specialists, Dr. Martz is an internist, hematologist, and oncologist with a special interest in antibiotic treatment of motor neuron diseases. Dr. Martz was diagnosed with ALS and was told he had, at most, a few years to live. After closing his practice and looking for ways to fight the disease, he tested positive for Lyme disease, and started a regime of high-dose intravenous antibiotic drugs. After making a surprising recovery, he opened a chronic disease clinic in Colorado to help others with neurodegenerative conditions.

## **Gary Wormser, MD**

Dr. Wormser is the lead author of the Lyme disease guidelines published by the Infectious Diseases Society of America (IDSA). He also serves as IDSA's Lyme media liaison and heads up IDSA's State/Regional Societies Board. Dr. Wormser is the Vice Chairman of Medicine at New York Medical College. He is also Chief of Infectious Diseases and the director of the Lyme disease diagnostics center at Westchester Medical Center. Dr. Wormser is the lead proponent of the stance that Lyme can be cured with a two to four week dose of antibiotics and that “post-Lyme syndrome” is an autoimmune or psychosomatic disorder.

## **Eugene Shapiro, MD**

Dr. Shapiro is the Deputy Director of the Yale Program in Investigative Medicine. As a leading academic pediatric Lyme expert, he espouses that Lyme can be cured with a two to four week dose of antibiotics, that “post-Lyme syndrome” is an autoimmune or psychosomatic disorder, and that the current Lyme testing is adequate. As newly appointed head of the NIH-Yale Clinical Trial Center, Dr. Shapiro says he plans on running future Lyme vaccine trials. Yale ran the pediatric Lyme vaccine trials from 2000-2004 and the adult trial in 2003.

## **Film Facts \***

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- More than four years to make the film
- 375 hours of footage
- Over 150 people interviewed
- Over 300,000 hits on YouTube (trailer and film clips)
- Consistently ranked as a “Hot Film” on SnagFilms (10-min. clip)
- Over 2600 Facebook fans ([www.facebook.com/underourskin](http://www.facebook.com/underourskin))
- National media spots on CNN, ABC, FOX and Oprah Network’s “Dr. Oz Show”
- Winner of 5 “Best Documentary” and 2 “Audience Favorite” awards at int’l film festivals
- Official Selection at over 25 int’l film festivals, including Tribeca & AFI/SilverDocs

*\* as of July 1, 2009*

## **Lyme Facts**

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### **Prevalence**

Lyme disease is the most common vector-borne disease in America. 1

Reported Lyme cases have more than doubled since 1991. 2

The Centers for Disease Control and Prevention (CDC) estimates that more than 300,000 Americans a year may come down with Lyme disease. (Cases reported to the CDC are underreported six to twelve-fold.) 3

In 2007 there were 27,444 Lyme cases reported to the CDC—a 37% increase over the previous year, but the actual number of new cases could be higher than 300,000. 4

Undercounting of the CDC Lyme cases are due to inaccurate tests <sup>5</sup>, the inherent flaws of a passive reporting system, and fear of medical board scrutiny by physicians treating Lyme disease.

### **Transmission**

The bacterium that causes Lyme disease, *Borrelia burgdorferi* (*B. burgdorferi*), is most commonly transmitted to humans through the bite of an infected deer tick. <sup>6</sup>

Lyme disease, as well as other tick-borne infections, can be transmitted from an infected mother to a fetus through the placenta during pregnancy, possibly resulting in complications or stillbirth. <sup>7</sup>

Many Lyme practitioners believe that *B. burgdorferi* can be transmitted sexually, though no studies have conclusively proved this theory.

### **Symptoms**

Lyme disease is caused by a microorganism related to syphilis and presents with similar symptoms.

Early symptoms of infection can include fever, headache, fatigue, and a “bullseye” skin rash called erythema migrans. Late stage Lyme symptoms can include a stiff neck, joint inflammation, sleep disturbances, and neurological issues such as shooting pains, numbness or tingling in the hands or feet, and problems with concentration and short-term memory. <sup>8</sup>

Contrary to popular belief, only 35-59% Lyme patients present with a bulls-eye rash, the flat or slightly raised red circular rash at the site of the tick bite. <sup>9</sup>

### **Testing**

A Lyme diagnosis should be based on clinical signs, symptoms, history, exposure risk, and course of illness. Tests play only a supportive role, and according to the CDC, the NIH, and the FDA, a Lyme diagnosis should not be ruled out based on tests alone. <sup>10</sup>

According to a recent Johns Hopkins study, the IDSA-endorsed two-tiered testing procedure misses 75% of positive Lyme cases. <sup>11</sup>

### **Treatment**

*B. burgdorferi* is a slow-growing, evasive bacteria that often requires longer courses of antibiotics if not treated in the early stages.

Antibiotic treatment for 14-21 days results in a 26-50% failure rate. <sup>12</sup>

Persistence of *B burgdorferi* despite antibiotic treatment has been demonstrated by post-treatment isolation of the bacteria. 13

Both clinical and study evidence show that long-term antibiotics can significantly improve the quality of life for patients with chronic Lyme disease. The potential harm in letting a persistent Lyme infection go untreated far outweighs the potential side effects of long-term antibiotic use. Five uncontrolled studies support longer treatment approaches. 14

Upon removal of an embedded tick, a single dose of Doxycycline is NOT an effective means of preventing Lyme disease. CDC immunologist Nordin Zeidner, chief of the CDC's Vector-Host Laboratory, found this dosage to be effective only 20 to 30 percent of the time in mice. 15

### **Vaccines**

The only FDA-approved Lyme vaccine, called Lymerix, was withdrawn from the market by the manufacturer in 2002 before adequate Phase IV safety data could be obtained. Recipients required 3 shots in the first year in order to achieve 76% effectiveness in preventing Lyme disease.16

Vaccine recipients reported a number of adverse effects to the CDC/FDA Vaccine Adverse Effects Reporting System. Based on legal action aimed at Lymerix, it is likely that Phase IV studies would have shown significant risks in a broader population if the Lyme vaccine had not been withdrawn by the manufacturer. 17

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FILM REVIEWS

## Under Our Skin Film Review

By Sarah Sluis, June 19, 2009 02:26 ET



"Under Our Skin"

frustrating struggle between patients afflicted with a disease and those who think it exists only in their heads.

**Bottom Line: An infectiously persuasive account of Lyme, a disease that has polarized the medical community.**

NEW YORK -- Both informative and persuasive, "Under Our Skin" targets both the heart and brain to advocate for the Lyme disease community. For those suffering from chronic Lyme, the terror of the disease is matched by a medical community that cannot agree on its treatment, and insurance companies that refuse to pay for it. Director Andy Abrahams Wilson inserts us into the

Interviews with patients who can barely walk, exhibit tremors and confront neurological problems are backed up by interviews with doctors and researchers who describe the spirally bacteria that cause the disease. Like "The Business of Being Born," which advocates medical practices that go against the norm, "Under Our Skin" should have a long life on DVD as it is recommended to those who are affected. As the film notes, Lyme disease is now found nearly everywhere, making the doc precautionary viewing for those who live near the wooded areas deer ticks call home.

Shooting with a high-definition camera, Wilson imbues the wooded habitat of the deer tick with a lush, saturated palette. Under his lens, the quintessentially American surroundings seem both beautiful and dangerous. The attention to visuals extends to animated segments that clarify medical and legal issues, and even a testimonial section has stylistic punch. Unified by a white-lit background, a chorus of sufferers reels off laundry lists of misdiagnoses, symptoms and the various occasions they were told they needed to see a psychologist, not a doctor.

Policy-makers and doctors on both sides of the Lyme debate receive screen time, though the film convincingly points out the naysayers' conflicts of interest. Those unfamiliar with Lyme disease receive a 101 in its origin, treatment and spread. With considerably more unity and coherence than a Google search, the doc effectively eliminates much misinformation about the disease.

Wilson also highlights new research from Dr. Alan Macdonald, who discovered a biofilm that protects the bacteria. Skeptics may find themselves swayed by the fascinating comparisons of Lyme disease to syphilis. Both are caused by a spiral-shaped bacteria, start with a mere rash, but cause neurological problems decades later. The latter disease has centuries of medical observation and research on its side, along with effective diagnosis and treatment.

For an ailment more defined by the unknown than the known, Wilson sheds much-needed light and direction. Wilson's own sister and friend have been diagnosed with Lyme disease, which may explain the emotion and urgency with which he persuades us.

*Opens: June 19, NYC, June 26, L.A. (Shadow Distribution)*

*Production company: Open Eye Pictures*

*Director/screenwriter/producer: Andy Abrahams Wilson*

*Senior Producer: Kris Newby*

*Co-Producers: Cheryl Drake, Eve Morgenstern*

*Executive producers: The Swartz Foundation*

*Photographer: Andy Abrahams Wilson.*

*Music: Justin Melland*

*Editor: Eva Ilona Brzeski*

*No rating, 104 minutes*

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June 19, 2009

## Ticked Off

By STEPHEN HOLDEN

[“Under Our Skin.”](#) Andy Abrahams Wilson’s inflammatory documentary about the tick-borne ailment Lyme disease, is scary enough to make the faint of heart decide never to venture into the woods or to lie on the grass again without protective covering. The polemic takes awhile to get its guns lined up. But once it does, it takes aim at the medical establishment, in particular the Infectious Diseases Society of America, which has declared that chronic Lyme disease does not exist.

The film follows the quest by longtime sufferers increasingly debilitated from all manner of physical and neurological ailments to find effective treatment. Some have spent tens and even hundreds of thousands of dollars going from doctor to doctor. Many are told that their suffering is psychosomatic.

Several doctors who have devoted their lives to research and treatment are interviewed. They compare chronic Lyme disease to A.L.S. (Lou Gehrig’s disease), Parkinson’s, Alzheimer’s and multiple sclerosis, and one implies that it may be a contributing factor to such illnesses, for which there no known cure.

State medical boards, supported by the Infectious Diseases Society and backed by insurance companies, have pursued some of these renegade doctors and even suspended their medical licenses for prescribing expensive intravenous long-term antibiotic therapy. Several patients receiving such treatments rejoice that they have finally gotten their lives back. Heart-rending scenes earlier in the film show the same people when they were barely able to move and talk.

“Under Our Skin” makes no bones about its advocacy for these patients and for the doctors willing to treat them. Although the Infectious Diseases Society’s position is crisply stated by Dr. Gary Wormser, the chief writer of its treatment guidelines, the movie portrays him as the mouthpiece for an organization riddled with conflicts of interest.

*UNDER OUR SKIN*

*Opens on Friday in Manhattan.*



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## Under Our Skin

by Lauren Wissot  
Posted: June 14, 2009



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**Director(s):** Andy Abrahams Wilson. **Screenplay:** Andy Abrahams Wilson. **Cast:** Mandy Hughes, Jordan Fisher Smith, and Dana Walsh. **Distributor:** Shadow Distribution. **Runtime:** 103 min. **Rating:** NR. **Year:** 2008.

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**U**nder *Our Skin* is a rigorously researched and highly thorough piece of investigative reporting on the silent epidemic that is Lyme disease. Director Andy Abrahams Wilson, whose twin sister was diagnosed with the illness, painstakingly profiles a vast array of sufferers—everyone from a "usual suspect" park ranger whose doctor wouldn't diagnose Lyme even though he'd proffered the tick that bit him as evidence, to a young, pretty, often wheelchair-bound blonde and a hipster chick, an event producer for U2 who offers, "The hardest thing is everybody thinks I'm normal." And through montages of talking heads divulging the many different diseases they were misdiagnosed as having, their outrageous out-of-pocket expenses, and the startling diversity of their symptoms, Abrahams has managed to create a film that flows with the same head-spinning feel that informs these victims' frustration with both their debilitated bodies and the medical establishment at large.

Indeed, the sheer number of physicians and patients willing to address Abrahams's lens should give pause. Why is this hugely underreported disease that statistically is much more widespread than AIDS—not to mention much more of an equal-opportunity infector—such a relative mystery? Why are so many sufferers told that there's no such thing as "chronic" Lyme? Though it's obvious Abrahams is on the side of those who believe they've contracted the bacteria that was first reported by a woman in Lyme, Connecticut (who appears in the film along with the scientist who made the discovery), to his credit the director does seek out those doctors and scientists who claim with a straight face that Lyme can't be transmitted from a pregnant woman to the fetus, that children just don't get chronic Lyme. (And, yes, Abrahams does appropriately cut to the mother who had numerous miscarriages, Lyme bacteria found in the placenta, and to the brain-damaged teenager with the illness whose deterioration began at birth.)

Even more fascinating is the disease's many parallels to HIV (one doctor likens the current sense of an imminent explosion in cases to that at the start of the AIDS epidemic, while another explains that the Lyme bacteria most resembles is the one for syphilis), as well as the politics surrounding the illness. While the visual juxtaposition of straightforward interviews, soft piano and string music playing lightly in the background, with animation (even a clip from *The Simpsons*) and overhead shots of tick-ridden forests keeps *Under Our Skin* moving swiftly, it's the story of the strong-arming HMOs, who file the majority of the complaints against physicians, that make it riveting.

Similar to the damage done to society when environmental researchers are in the back pockets of big energy, this silent epidemic seems to be muted as a result of Lyme diagnosis guidelines written by a medical board funded by insurance companies averse to paying for any lengthy antibiotic treatment. As even Connecticut's attorney general notes, there's a dangerous conflict of interest when most of the medical board is taking money from HMOs with a vested interest in an illness remaining "controversial." Indeed, as long as the public remains confused about Lyme, as long as sufferers are misdiagnosed, there will never be enough informed citizenry to even form a powerful lobbying group. And that's a sad thing. But that mounting evidence of Lyme's probable links to Alzheimer's, ALS, Parkinson's, and MS—all diseases with a smoking gun yet to be discovered—is being swept under the rug is nothing short of a tragedy.

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*Posted: Fri., May 2, 2008*

## Under Our Skin

(Documentary) An Open Eye Pictures production. (International sales: Submarine Entertainment, New York.) Produced by Andy Abrahams Wilson. Executive producer, the Swartz Foundation. Senior producer, Kris Newby. Co-producers, Cheryl Drake, Eve Morgernstern. Directed, written by Andy Abrahams Wilson.

With: Mandy Hughes, Sean Cobb, Dana Walsh, Jordan Fisher-Smith, Marlena Connors, Elise Brady-Moe, Ben Petrick, Dr. Alan MacDonald, Kris Newby, Dr. Joseph Jemsek, Dr. Charles Ray Jones, Dr. Gary Wormser, Dr. Eugene Shapiro.

By ALISSA SIMON

Well-researched investigative docu "Under Our Skin" examines schisms surrounding the diagnosis and treatment of Lyme disease, a near-epidemic in the U.S. Like Michael Moore's "Sicko," it reveals a controversial connection between conventional protocols, private patents, managed care and insurance companies that restrict consumer choice with huge consequences for patient care. Producer-director-writer Andy Abrahams Wilson ("Bubbeh Lee and Me") takes a creative, humanistic approach that makes the complex material dramatic and visually interesting. A natural for domestic cable, informative pic should have a long shelf life.

Mixing interviews and archival footage, pic creates a suspenseful dramatic arc by following six chronic Lyme-disease patients and a small group of "Lyme-literate" physicians as they struggle for their lives and livelihoods. Hard science and statistics are made memorably clear through clever animation. Instead of chapter headings, a chorus of artfully shot talking heads introduces topics such as symptoms, misdiagnoses and problems finding a doctor. Although it sides with those advocating unconventional treatments, pic gives gatekeepers from Infectious Diseases of America their say. Inclusion of pathologist Alan MacDonald's recent discovery linking the Lyme infection to microbial biofilms signals new hope for chronic sufferers.

Camera (color, video), Wilson; editor, Eva Ilona Brzeski; music, Justin Melland. Reviewed at Tribeca Film Festival (Discovery), April 28, 2008. Running time: 104 MIN.

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## Move over, Michael Moore

A local director discusses his provocative new documentary.

By Jane Ganahl, Photograph by Emily Polar

A handsome man eases past a coffee-hungry crowd at the Starbucks on Union Street. Heads turn. But Andy Abrahams Wilson, 44, pays no attention—he's on a mission. The Sausalito-based director is busy promoting *Under Our Skin: An Infectious New Film About Microbes, Money, and Medicine*, his Tribeca award-winning documentary about the scandals surrounding Lyme disease, which is causing a sensation everywhere it screens. Though some believe too many people are being falsely diagnosed, Wilson and his film take the opposite point of view. Anticipating the Bay Area premiere of the movie this month, Wilson talks about how the disease's stateside victims now outnumber those with HIV/AIDS, the continuing pervasiveness of misdiagnosis, and a certain afflicted president.

**What set you off on what has clearly become a crusade for you?** Both my twin sister and a friend contracted Lyme disease. My sister was considered cured yet suffered a litany of problems. My friend was diagnosed with multiple sclerosis, then ALS [Lou Gehrig's disease]. Only after a correct diagnosis did she begin to mend. I was shocked—then and now—at how little is known about Lyme disease.

**It seems like there might be a perfect storm happening when it comes to Lyme disease, with your film, the new book *Cure Unknown*, and a rising tide of Lyme-related lawsuits and patient activism.** Yes, signs are promising. But the word really needs to get out, because it could literally save lives. Experts say that thousands upon thousands of people have Lyme and don't know it. The sooner they're tested, the sooner they can recover.

**Many of the problems surrounding Lyme disease are a result of misdiagnosis. Why are doctors still missing this?** Because of its multisystem symptomology and the inadequacy of standard tests, Lyme disease often mimics other illnesses, including fibromyalgia and MS. There's also a lot of pressure from insurance companies and the medical establishment to deny that Lyme exists, because treatment is lengthy.

**You have compared this to the AIDS epidemic of the '80s. In what ways are they similar?** Both have mysterious symptoms and no cure, but I think there are better treatments by far for AIDS. One physician in North Carolina has two communities of patients, Lyme and HIV/AIDS, and he now says his Lyme patients are more debilitated.

**Why should people in the Bay Area care enough about Lyme disease to go to the Mill Valley Film Festival to see the film?** Because, with the Centers for Disease Control estimating a possible 200,000 new cases a year, pretty soon everyone will know someone who's sick with it. Because San Franciscans love to go to the country, where ticks live. And because Northern California is a hot spot for Lyme.

**Many famous folks have been stricken with Lyme disease—Amy Tan, Alice Walker, Tom Seaver, even president George W. Bush, right?** We learned the president had been diagnosed, so we faxed the White House and asked for an interview. We didn't hear back, but two weeks later, they released a statement that he had tested positive but was "fine." I think it explains a lot, actually. He hasn't always been this cognitively impaired!

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