

Still more evidence that Morgellons disease is most likely delusional parasitosis



Posted by [Orac](#) on May 18, 2011

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Research
Blogging

One of the stranger Internet-based quackery phenomena of the last decade is [Morgellon's disease](#). This is a topic I haven't visited that much on this blog, its having last come up in a big way a little more than a year ago, when I discussed it in the context of [Dr. Rolando Arafles and the other quackery he was promoting](#). This led to [extreme unhappiness on the part of self-proclaimed Morgellons disease "expert" Marc Neumann](#), who later bombarded me with threatening e-mail rants. In any case, whatever Morgellons disease is, its cause is almost certainly not what patients think it is, namely the presence of tiny organisms in the skin leading to a chronic itch that leads to chronic scratching. Its [adherents describe it thusly](#):

Morgellons is a multi-symptom disease that is just now starting to be researched and understood. It has a number primary symptoms:

Physical

- Spontaneously Erupting Skin lesions
- Sensation of crawling, biting on and under the skin
- Appearance of blue, black or red fibers and granules beneath and/or extruding from the skin
- Fatigue

Mental

- Short-term memory loss
- Attention Deficit, Bipolar or Obsessive-Compulsive disorders
- Impaired thought processing (brain fog)
- Depression and feelings of isolation

It is frequently misdiagnosed as Delusional Parasitosis or an Obsessive Picking Disorder.

Except that delusional parasitosis is probably not a misdiagnosis. The "fibers" or "granules" found in the skin virtually always turn out to be consistent with fibers from clothing or other sources. At least, no advocate of Morgellons disease has ever demonstrated them to be anything mysterious. This concept has led to treatments for Morgellons that resemble those of chronic Lyme disease, namely chronic antibiotic use. Indeed, interestingly, Morgellons advocates frequently link Lyme disease to Morgellons, with some even asking whether Morgellons disease is the "[Lyme disease of our time](#)."

I was reminded of this frustrating (for both patient and physician) phenomenon by a couple of things recently. First, Mark Crislip wrote an excellent discussion of [Morgellons disease and delusional parasitosis](#) (which, of course, appear to be basically the more or less the same thing). The second was the publication of a study in the *Archives of Dermatology* by a group from the Mayo Clinic entitled Delusional Infestation, Including [Delusions of Parasitosis: Results of Histologic Examination of Skin Biopsy and Patient-Provided Skin Specimens](#). Basically, what investigators Hylwa *et al* did was something very obvious. They retrospectively reviewed the pathology results of patient-provided specimens and physician-ordered skin biopsies in patients with Morgellons and diagnoses akin to Morgellons. Their search strategy was as follows:

A computerized search of patients seen at Mayo Clinic's site in Rochester, from 1996 through 2007, was performed using the following search terms: delusion of lice, delusional disorder with parasitosis, delusion(s) of parasitosis, delusional parasitosis, delusion(s) of parasitism, delusion(s) of parasites, parasitosis (delusional), delusional infestation, delusory parasitosis, psychogenic parasitosis, neurogenic parasitosis, neurotic parasitosis, Ekbom syndrome, formication and parasites, chronic tactile hallucination(s), dermatophobia, parasitophobia, toxic psychosis, tactile psychosis, monosymptomatic hypochondriacal psychosis, Morgellon(s), psychogenic dermatitis, neurotic dermatitis, neurogenic dermatitis, self-induced excoriations, and psychogenic excoriations.

From this, the authors chose cases thusly:

All patients who were seen at Mayo Clinic and whose final assessment was consistent with the criteria for diagnosis of delusional skin infestation as described by Freudenmann and Lepping¹² were identified as having the disorder and were evaluated for inclusion in this study. The 2 inclusion criteria were (1) the patient's conviction that he or she was being infested by pathogens (animate [eg, insects or worms] or inanimate [eg, fibers]) without any medical or microbiological evidence for this, ranging from overvalued ideas to a fixed, unshakable belief; and (2) the patient's complaint of abnormal sensations in the skin explained by the first criterion. When a diagnosis was uncertain, the case was discussed between the reviewers and a final decision to include or exclude the patient was agreed between them.

The general term delusional infestation was chosen because it embraces the 2 main categories in which patients present: delusions that they are infested with animate material (such as parasites) and delusions that they are infested with inanimate material (such as fibers).

So what were the results?

Basically, out of the 80 cases of patients who underwent skin biopsy, Hylwa *et al* found not a single patient had objective evidence of parasite infestation on skin biopsy, although 61% did reveal dermatitis, including 33 cases of chronic dermatitis, 10 cases of subacute, and 6 cases of lichen simplex chronicus. This last diagnosis is a thickening of the skin with scaling that arises secondary to repetitive rubbing or scratching. In actuality, I'm rather surprised that only 60% of biopsies showed this result; I would have expected it to be higher. I am not surprised that the skin biopsies were in essence nondiagnostic. A number of patients had skin cultures. These, too, were all nondiagnostic, being either negative or yielding common contaminating organisms that couldn't possibly account for the patients' symptoms.

Also not unexpected are the results of examinations of patient-provided specimens. These were examined by dermatologists, pathologists, tropical medicine specialists, internal medicine doctors, psychiatry, or infectious disease physicians like Dr. Crislip. Most commonly, they were found to be skin flakes or serum crust, hair, or textile fibers. There were a couple of insects found among the specimens. One of them was interesting in that it was an actual parasite, specifically a pubic louse, but physical examination showed no evidence of infestation. Another patient brought in a tick, but the clinical judgment of the practitioners was that the tick could not account for the patient's symptoms. The bottom line is that none of the patient-provided specimens resulted in any useful information other than that the patient did not have parasites.

Consistent with the scientific literature on Morgellons disease, they were nothing consistent with a diagnosis of parasite infestation.

The authors point out that this is to the best of their knowledge the first study that addressed the histological analysis of skin biopsies and patient-provided specimens in a relatively large number of patients. They also note, as you would expect, that this is a retrospective study, and thus prone to all the shortcomings of retrospective studies, including the potential for incomplete information and bias. One aspect that the investigators mention that isn't really a bug (if you'll excuse the term) but a feature is that the patients had "disparate characteristics, with an array of presentations." That's pretty much the definition of Morgellons; it consists of an array of nonspecific symptoms that focus around the belief that something has infested the skin, be it parasites or some sort of inanimate contaminants, and disparate presentations would be expected. Be that as it may, the authors ended up concluding that examination of patient-provided specimens and skin biopsies showed no evidence of infestation, although they did frequently show evidence of dermatitis. Unfortunately, this is a nonspecific finding; it's also difficult to figure out whether the dermatitis is a cause of the sensation of infestation or occurs as a result of it and the scratching and rubbing that such patients engage in. Indeed, the authors ask:

The results of this study raise many questions concerning the value of skin biopsies in the context of a patient presenting with delusional infestation. Given that a skin biopsy and histologic examination of specimens brought by patients do not yield evidence of infesting materials, either animate or inanimate, should a biopsy be performed? Some have proposed that an alliance with a patient is a justification for a skin biopsy, but is it? What is the outcome following a biopsy? Did it improve the outcome of the interaction with the patient? Were patients more likely to be compliant with therapy following a biopsy? These questions remain unanswered by this study, which concentrated on the results of skin biopsies in this situation.

It's a difficult set of questions. This study would suggest that the diagnostic yield of doing such biopsies is incredibly low. So, what reason is there to do a skin biopsy in cases like this? If this study is to be believed, the answer is: None.

Overall, this study also provides still more evidence, as if any were needed, that patients with the constellation of symptoms consistent with Morgellons disease and/or delusional parasitosis (which appear to be more or less the same thing) rarely, if ever, have any specific findings consistent with real parasitic infestations of the skin, their belief that they are somehow infested notwithstanding. Many of them have some form of dermatitis, but it is not clear whether it is the primary explanation for their symptoms or occurs as a result of the scratching that these patients engage in. Whatever the case, I have no doubt that these patients are suffering, but the explanations proffered by advocates of Morgellons as the cause of their symptoms. Unfortunately, this study is highly unlikely to change the minds of patient advocacy groups promoting Morgellons disease as an entity, just as numerous studies failing to support the idea of chronic Lyme disease have failed to convince patient advocacy groups that chronic antibiotic therapy for the constellation of symptoms attributed to chronic Lyme disease is not a good idea. It should also be noted that delusional parasitosis existed as a distinct diagnosis before Morgellons disease, which has only come to the fore over the last decade or so.

One thing that is sure. The promotion of Morgellons disease as a distinct disease, primarily by means of Internet-fueled advocacy and old-fashioned conspiracy mongering. What these patients need is the application of science and science-based medicine to their problem, not the various quack nostrums sold to them by practitioners who are either unscrupulous or themselves share the delusion. This study adds to our knowledge by providing yet more evidence that there is rarely, if ever, a documented parasitic infestation in these patients.

REFERENCE:

Hylwa, S., Bury, J., Davis, M., Pittelkow, M., & Bostwick, J. (2011). Delusional Infestation, Including Delusions of Parasitosis: Results of Histologic Examination of Skin Biopsy and Patient-Provided Skin Specimens *Archives of Dermatology* DOI: [10.1001/archdermatol.2011.114](https://doi.org/10.1001/archdermatol.2011.114)

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Comments



1. triskelethecat
May 18, 2011

I enjoyed this review very much, having read Dr Crislip's post with interest when it was created. It's a difficult thing to tell a patient that there is nothing 'physically' wrong with them when they are certain there IS something wrong.

One question...you have an incomplete sentence (bolded below) and I'm not certain what you meant to say to complete it.

Overall, this study also provides still more evidence, as if any were needed, that patients with the constellation of symptoms consistent with Morgellons disease and/or delusional parasitosis (which appear to be more or less the same thing) rarely, if ever, have any specific findings consistent with real parasitic infestations of the skin, their belief that they are somehow infested notwithstanding. Many of them have some form of dermatitis, but it is not clear whether it is the primary explanation for their symptoms or occurs as a result of the scratching that these patients engage in. **Whatever the case, I have no doubt that these patients are suffering, but the explanations proffered by advocates of Morgellons as the cause of their symptoms.**

MI Dawn



2. Randall
May 18, 2011

What do you make of this article from the Guardian a few weeks back, which argues that it's a neurological disorder that leads to itchiness of skin patches, not a psychological disorder of thinking that there's stuff on your skin when there isn't? The hypothesis here is that while the itchiness is real, whatever the patient erroneously thinks is causing it isn't, and that's why tests to find these phantom bugs/fibers/whatever always come up false.

<http://www.guardian.co.uk/lifeandstyle/2011/may/07/morgellons-mysterious-illness>

Of course, even if this were true it would put Morgellon's disease in the same category as fibromyalgia, a penumbra of disorders which are difficult to distinguish from hysteria.



3. still not itchy
May 18, 2011

It does seem likely that there are a number of different skin, itch, neurological or psychological conditions which could lead to patients having these symptoms.

I think that the tendency for some doctors to lump all these patients together as suffering from ‘delusional parasitosis’ is likely to be the most significant factor in leading patients to give up on mainstream medicine and turn to google instead.

That Guardian article has, amongst much else, this paragraph:

“I contact Dr Anne Louise Oaklander, associate professor at Harvard Medical School and perhaps the only neurologist in the world to specialise in itch. I email her describing morgellons, pointing out it’s probably some form of DOP. But when we speak, she knows all about morgellons already. “In my experience, morgellons patients are doing the best they can to make sense of symptoms that are real. They’re suffering from a chronic itch disorder that’s undiagnosed. They have been maltreated by the medical establishment. And you are welcome to quote me on that,” she adds.”

Once patients have been mistreated by the medical establishment, it’s not at all surprising that many of them will be drawn towards quackery instead. I think that the priority should be stopping this cycle before it begins by ensuring that doctors realise it is wrong to provide misleading reassurances, or presume psychological illness based only on the absence of a known physical mechanism for illness.



4. [weemaels](#)
May 18, 2011

Ola,

Si les médecins ne peuvent croire leurs patients pourquoi ne tiennent ils pas compte des témoignages de leurs entourages.

Les conjoints , les parents, les enfants, les amis cela fait du monde...

perso, je suis convaincu que le morgellon est une maladie bien réelle. Pendant plus de 7 ans ,j’ai pû constater, voir et toucher, toutes ces “choses” qui sortaient de la peau de mon épouse.

D’autres personnes aussi on pû voir cela. Mon épouse est actuellement hospitalisée en psychiatrie. Son état mental était devenu ingérable. Elle est soignée aux neuroleptiques pour de la parasitophobie. Du morgellon, les médecins rencontrés n’ont rien voulu savoir. Aucune suite à mes informations et à mes demandes d’observations.

Pöur croire au morgellon il faut un esprit ouvert et/ou des connaissances liées au développement des sciences tels les nanosciences .

Mon histoire avec le morgellon est dramatique,comme chez tous ceux qui en souffrent. Je témoigne dans un blog : le blog d’Alfalfa. Là, mon histoire est aussi spirituelle.



5. Anonymous
May 18, 2011

Hamilton Nolan had a go at this yesterday.

<http://ca.gawker.com/5802828/there-are-not-bugs-crawling-under-your-skin-youre-just-crazy>



6. Antaeus Feldspar
May 18, 2011

My question would be, why are people coming down with a chronic itch disorder *now*, in great numbers that coincide so greatly with the rise in prevalence of the ‘Morgellons disease’ meme? It seems to me that in order for Morgellons to be an artifact of diagnostic substitution, there has to be something to substitute *for*; we should be able to find people, in numbers comparable to those who are claiming Morgellons *now*, who were claiming heavy itches *then*. But I’ve never seen any indication of such.

I realize that Oaklander is an expert in her field, and I am not even an expert in a directly related field. Still, though, without a lot more supporting evidence and explanation, I can’t feel really confident in her opinion that there must actually be a physical disorder underlying the rise of Morgellons, not when we know how thoroughly a mind which *believes* the body is suffering illness can generate dramatic symptoms to match what they believe the illness entails (Desiree Jennings, anyone?)



7. Kristen
May 18, 2011

@Anonymous

That article is a great illustration of the problem. People are looking for a physical diagnosis because of the stigma associated with psychological disorders. If one is absolutely convinced that there are creepy crawlies under the skin this doesn’t mean that person is “crazy”. Patients can’t keep an open mind to the possibility of a psychological mechanism if they think it makes them “crazy”, they will just be all the more determined there must be a physiological reason.

If this is “crazy” then so is the placebo effect. They are both a reaction to something perceived to be there, but in reality is not.

This Hamilton Nolan is wrong to label people this way, it only compounds the problem.

8.  Beamup
May 18, 2011

I think it's telling that Dr. Oaklander's "evidence" for her claim was those three fatal words "in my experience." Just not at all compelling whatever her expertise.

So what it comes down to is that the evidence of "mistreatment by the medical establishment" is a single person's non-quantitative uncontrolled observation. Which simply is not sufficient to draw such a conclusion.


9.  [Todd W.](#)
May 18, 2011

@Beamup

But, but, but. She's from Harvard! That means she must know what she's talking about. I mean, it's not like they would have professors spouting nonsense like, I dunno, that UFO abductions are real.

10.  Anonymous
May 18, 2011

Kristen, HamNo writes in heavy snark. It's the Gawker way. I don't think he's *literally* calling people crazy, just using hyperbole for comic effect.

11.  still not itchy
May 18, 2011

Dr Oaklander was just commenting to a journalist for an article, not publishing a paper. What evidence did you want her to provide? Equally, the 'in my experience' is an important proviso because, given her speciality, it's likely that the patients with a Morgellons diagnosis she came in to contact with would be particularly likely to suffer from some sort of neurological 'itch' problem.

I don't think anyone was writing on the presumption that her claims must be true for all Morgellons patients because she's a professor at Harvard.

It's difficult to get conclusive evidence that there has been a widespread problem with the mistreatment of Morgellons patients. It's difficult to get conclusive evidence that there has not been. Assessing how groups of people may be adversely affected by profiling or prejudices within institutions as diverse and complicated as those of mainstream medicine will always be difficult. However it does seem that there are some doctors willing to jump to a presumption of psychological illness based only on the absence of identified biological causes for symptoms, which may not be appropriate, and is likely to lead to some patients feeling mistreated and giving up on mainstream medicine.



12. [Neil Craig](#)
May 18, 2011

In one of Orac's recent threads which he described as a "tribute" to me personally he described my request for evidence to support what he claims to be proven science as "nonsense"

Evidence is a basic requirement of science. Only religions rely on faith.

He has continued to refuse to even attempt to produce any evidence for his claims of catastrophic global warming and the linear no threshold theory (LNT) of radiation.

And indeed no other contributor or reader of this blog has been able to produce any good evidence of either either.

Clearly nobody could ever try to justify what they know to be religious assertions by wrapping themselves in the stolen mantle of "science" if they had any actual respect for it.

As of now the warming alarmists have accepted that in scaring the populace into paying vast amounts of money to fight catastrophic global warming the warming alarmists have been lying. None of the alarmists are now claiming any warming catastrophe claims they have supported to be credible.

The radiation alarmists have been reduced to trying to downplay the large amount of evidence for hormesis, (that at low levels radiation is good for you) rather than actually trying to produce evidence for the politically approved scare. Even if that were true it would only mean Ms Coulter's position was not much more scientific than Orac's.

I had previously asked Orac to apologise to Ann Coulter, the target of his LNT tirade for saying she was "against physics" when the alleged physics in question is simply politics without evidential support.

I now think he should also apologise to me for describing, against all the evidence, what I wrote and the 7 questions about alleged catastrophic warming as "nonsense" and encouraging numerous ad hominem attacks on me in his thread "tributing" me.

Orac I suggest that being willing to admit being wrong is a major and necessary step towards being right. Make the admissions and apologies.

I will leave the last word to Orac on yet another thread “it’s easier to lampoon a person than it is to address the science”. Said in defence of Al “smoking is a major cause of global warming/ 2 miles down the Earth’s core is millions of degrees” Gore who he says “usually got the science mostly right”. Clearly Coulter & indeed I have attained a considerably higher standard of scientific accuracy.



13. PatchUp
May 18, 2011

Kristen – the simultaneous denial of somatisation disorder and rejection of psychiatric and psychological illness as ‘real’ is something the morgies have in common with the cfs/me/fibro brigade. What they don’t seem to realise is that this internalised ableism is only furthering stigma around mental illness, and also potentially hindering their own progress toward recovery.

Someone on reddit was insisting that his parents had morgellons and cfs, that they had ‘real’ problems, and would not even consider trying any treatment that was aimed at helping their minds, because “They’re not crazy”. Well... apart from the whole folie a deux thing, ahem. They’re still convinced it’s bloody XMRV, and that Big Pharma is suppressing the ‘real’ information.

I’d better go, the morgies will be here soon screaming about “TEH SPRINGTAILS!” and nanobots. Just like their cfs/me/fibro cohorts their primary symptom seems to be ranting on blogs in block text, without ever using paragraph breaks, about how it’s all a conspiracy and only they know the truth. Sadly, lack of paragraph breaks is what causes my uncontrollable itching and twitching, so I’d better go and medicate myself before they arrive.



14. [Todd W.](#)
May 18, 2011

@Neil Craig

Do try to stay on topic.



15. Vicki
May 18, 2011

“Delusion” and “hallucination” are scary words. It’s not just that mental illness is stigmatized: we want to be able to trust our senses.

I once had a friend ask me whether I saw insects in their kitchen, because that person knew they were sometimes having visual hallucinations (as part of a

constellation of neurological issues including migraine). They weren't exactly delighted to know that they really did have ladybugs in there, but they wanted to know.

A lot of other people would have dismissed the idea “those insects are a hallucination” because the idea of hallucinations is scarier than the idea of ladybugs.



16. Calli Arcale
May 18, 2011

weemaels — my French is rusty, but you seem to have a history of Morgellons and you are calling for doctors to be more open-minded about the possibility that it's real.

Ten years ago, before Morgellons was fashionable, people were saying aliens were implanting fibers under their skin, and various forms of “delusional parasitosis” are not new — the diagnosis has been around for a very long time, it just hasn't had a common focus until now. I also think it's worth exploring Oakland's suggestion that there could be an itch disorder behind some of these cases.



17. Denice Walter
May 18, 2011

OT (but are taunts by the woo-entranced *ever* _truly_ OT @ RI?)

Today at AoA (a/k/a the School for Scandal): JB has a go at our fearless (and peerless) leader. It appears that he is not exactly thrilled with Orac's many references to AoA's belief system and what they laughingly call “science”.Rich.

Another taunt which I myself have had hurled at me : “childless” people shouldn't talk. How could you possibly understand children's medical (or psychological) problems if you ain't got any? I think that this contains another disguised inference: there is something *wrong* with people who have no children (gay? physical problems? too vain or immersed in career?) I'm sure that any of these factors would be then cancelling out logic and education. Sure. BTW: None of your business, Mr!

Even more unforgivingly, he goes on to critique *style*: as if he had any idea about what style involves.I have read (and wept) over AoA posts many times and it wasn't about the *truly* sad stories but about the manner in which they were purveyed.

I could go on and on about his criticisms of Orac's science but I think that most of you have the general gist by now. I am so glad I never got the hang of writing fiction because I find that the real world throws forth such awe-inspiringly fanciful stuff my way I could scream with delight! And I want to share!



18. Beamup
May 18, 2011

Dr Oaklander was just commenting to a journalist for an article, not publishing a paper. What evidence did you want her to provide?

In order to be taken seriously, she would have had to tell the reporter “according to my recent research published in journal X.” If she doesn’t have enough evidence to publish a paper, she has no business making such claims in an interview either.



19. [daedalus2u](#)
May 18, 2011

Beamup, I disagree. Dr Oaklander’s comments need not be referred back to a paper.

What is she saying? That people have real symptoms of itchy skin? That many hundreds of people report itchy skin and have scratched themselves until they are covered with sores and scars is not disputed. What additional evidence would be necessary to “prove” symptoms of itchy skin? Such patients don’t have delusions of itchy skin, they have real itchy skin, the cause of that itchy skin happens to not be parasite infestation of the skin. No doctor has been able to diagnose what the cause of the itchy skin is. Calling the itchy skin a “delusion” is not helping.

I think that calling this condition Delusion of Parasitosis is analogous to calling phantom limb pain “delusional limb pain”. Technically phantom limb pain is a delusion because there is no limb present to exhibit pain and everyone (doctor and patient) knows that there is no limb present. Fortunately for people with phantom limb pain, there is sufficient understanding to know that even though the limb is absent, the nerves that carry signals of pain to the brain are still present and can trigger signals interpreted as pain in a limb that is no longer there.

All signals in the nervous system are subject to automatic gain control. That is the only way that the nervous system can remain functional over many years, through growth, in disease and in health. If the “gain” got turned up too high in the itch transducing nerves, the symptoms would be an itch with no apparent “cause”, which would provoke scratching and eventually sores and lesions exactly as are observed in Morgellons.


I think the itching of cocaine abuse and of the disorder some call Morgellons have the same physiological basis. I mention that in my blog post. I think calling it a hallucination rather than delusional is more appropriate in both cases. I think the itching is very similar to the itching of primary biliary cirrhosis and of end stage kidney failure and relates to low nitric oxide in the skin, which potentiates mast cell degranulation. If mast cell degranulation is potentiated enough, then it can occur spontaneously and propagate as the products of mast cell degranulation trigger adjacent mast cells to degranulate, setting up a traveling wave of mast cell degranulation. I have blogged about it.

<http://daedalus2u.blogspot.com/2008/02/morgellons-disease-hallucinatory.html>

If the problem is automatic gain control in the peripheral nervous system, calling it a delusion is not correct. A better term would be Hallucination of Parasitosis.

20. JohnV 
May 18, 2011

Neil Craig you stupid shit, this threat isn't about you and your paranoid persecution fantasies and your insane position that people who care about the environment are literally nazis. Fuck off and stay in the thread devoted to you.

21. Blasphemous_Kansan 
May 18, 2011

Fascinating stuff. I always enjoy the research entries the most here on scienceblogs.

Also, allow me to paraphrase Neil Craig for those who don't want to read his entire post: "Waaaaaaaaaah!!!"

22. PatchUp 
May 18, 2011

Wow daedalus, that was quick. Google alerts are amazing things. You might want to vary the routine a bit, it's getting stale. Nothing worse than cospasta for every meal.

Oh and it's not the itching that's 'delusional', it's the belief that aliens/chemtrails/gmo/springtails/nanobots are causing the itch.

23. Beamup 
May 18, 2011

She's not saying that people have itchy skin. She's saying that they are being "maltreated by the medical establishment." Absolutely requires real published evidence, since she's claiming that most/all other doctors are wrong and she's the one who has correctly figured out what's going on.



24. Rory
May 18, 2011

Part of the problem is that the American medical system just isn't very good at dealing with things like this. There's not a lot of incentive for doctors to work with patients to explore low probability diagnoses, nor do many patients have insurance that allows them to pursue appropriate specialized care. You're left with patients who are clearly experiencing distress, whether due to an actual physical symptom or simply due to a psychological issue masquerading as one, and doctors who have a limited ability to provide any relief. A vacuum like this is a red carpet to the woo-peddlers.



25. Krebiozen
May 18, 2011

Neil, [Coulter's article](#) is full of idiotic inaccuracies. How can you continue to defend such a terrible piece of journalism?

Coulter claims of Chernobyl that, "the thyroid cancers in people who lived near the reactor were attributed to low iodine in the Russian diet — and consequently had no effect on the cancer rate". Iodine deficiency does not cause thyroid cancer, though iodine supplementation can protect against it, and even the [IAEA acknowledges](#) that Chernobyl has caused thousands of cases of thyroid cancer. "There have been at least 1800 documented cases of thyroid cancer children who were between 0 and 14 years of age when the accident occurred, which is far higher than normal."

Coulter also claimed that, "tuberculosis patients subjected to multiple chest X-rays had much lower rates of breast cancer than the general population" which is simply wrong. They had [higher rates of breast cancer](#) than the general population, just not as high as predicted.

Victims of the Taiwanese cobalt-60 incident had, "a cancer rate 96 percent lower than the general population"? Coulter claims that the 96% lower rate looked at "the same age group", but the [original paper](#) says, "the age distribution of the exposed population has not yet been determined, and it was assumed that the age distribution of the exposed population is the same as that of the general Taiwan population". In a [more recent study](#) "cancer risks were compared with those populations with the same temporal and geographic characteristics in Taiwan by standardized incidence ratios (SIR), adjusted for age and gender". No sign of hormesis was found, in fact "all solid cancers combined were shown to exhibit significant exposure-dependent increased risks in individuals with the initial exposure before the age of 30, but not beyond this age".

Coulter's other claims are contradicted by better or more recent evidence which suggests the LNT is correct. These studies of [Hiroshima](#), [nuclear workers](#) and [the effects of radon](#) argue against Coulter's claims. The [National Academy of Sciences](#) agrees.

There is not a "large amount of evidence for hormesis". There is a lot of evidence for a linear dose response relationship at high doses, and conflicting evidence at low doses. It seems to me that as more evidence becomes available, the more convincing the LNT becomes. It is not for scientists to prove the LNT, it is for proponents of threshold or hormesis to prove their case. If regulations were relaxed and the LNT is correct, the consequences could be thousands of excess cancers and deaths.

26. still not itchy
May 18, 2011



@patchup: “Oh and it’s not the itching that’s ‘delusional’, it’s the belief that aliens/chemtrails/gmo/springtails/nanobots are causing the itch.”

So if a doctor were to wrongly diagnose a neurological itch problem as a delusional somatisation disorder resulting from emotional problems, should the doctor be classed as deluded and psychologically ill? People can be mistaken without being deluded, and psychological diagnoses can be applied on the bases of social power structures, rather than objectively identified distortions of thought.

27. Calli Arcale
May 18, 2011



Beamup, in her defense, she didn’t write the Guardian article, and it’s quite likely that the author did not quote every single word she said during the interview, as that wasn’t the point of his article. (It’s an article about DOP in which he quotes a neurologist, not an interview of said neurologist.) It’s possible she actually did cite such research but it didn’t make it into the article. I think we may be criticizing her without sufficient basis to know whether she’s engaged in pseudoscience or not. The point of quoting her in the article is, I believe, simply to point out that there may be a real sensory disorder at work which few doctors are considering, and that’s a fair point I think. “You’re not really infested; here’s a prescription for anti-anxiety meds and please see a shrink” may not be the right answer in a lot of cases.

28. lilady
May 18, 2011



The new disease de Jour; so reminiscent of “chronic” Lyme disease and the alleged conspiracy between insurance companies (which didn’t want to pay for prolonged IV treatment), researchers and public health officials. Fortunately, some of those LLMDs (Lyme Literate Medical Doctors) who are the equivalent of DAN! doctors, have been sanctioned-medical licenses revoked and criminally prosecuted for the deaths of patients. Unfortunately, “chronic” Lyme disease sufferers still persist and LLMDs are still preying upon their patients.

We used to get telephone inquiries at the health department where I worked from germ phobic/skin crawling people. Some of them were “frequent fliers”... dependable for weekly phone calls to the health department. Occasionally, people would call who actually had scabies infestation on their hands. And then, there were the phone calls from people who experienced pruritis after (ahem) “short stays” at the local hot pillow motel.

Some people just need to have the latest disorder/disease de Jour...sad.



29. [daedalus2u](#)
May 18, 2011

Beamup, what she said:

“In my experience, morgellons patients are doing the best they can to make sense of symptoms that are real. They’re suffering from a chronic itch disorder that’s undiagnosed. They have been maltreated by the medical establishment. And you are welcome to quote me on that,” she adds.”

She is saying that patients have an undiagnosed chronic itch disorder; in other words, itchy skin that doctors can’t diagnose. If there is a disorder than can’t be diagnosed, calling the patient’s symptoms delusional is not helping.

There are cause and effect problems here. The first problem is itchy skin. The second problem is that doctors can’t diagnose what is causing the itchy skin. The third problem is that chronic itchy skin causes people to scratch and dig at their skin until they have lesions. The fourth problem is that doctors can’t treat what ever is causing the itchy skin. The fifth problem is that the chronic scratching causes the lesions to form scars. The sixth problem is that doctors can’t do anything to stop the itching. The seventh problem is that people who have been itching for so long get really desperate for some way to stop the itching. The eighth problem is that doctors get frustrated at being unable to help desperate patients so they throw up their hands and call it delusion of parasitosis. The ninth problem is that the itching is still there and no amount of cognitive effort on the part of the patients can make it go away. The tenth problem is that people hear the diagnosis of DoP and think “crazy patient”.

The problem with the tenth problem is that the part of the nervous system that instantiates itching has very little to do with the part of the nervous system that regulates rationality. One can be completely rational and still have severe itching. Itching is supposed to be difficult to ignore. That is the whole point of the urge to scratch. Evolution configured itching to be difficult to ignore because our ancestors who couldn’t ignore itching survived better because they had fewer skin parasites than our non-ancestors who didn’t have such a strong itch instinct and so succumbed to skin parasites.



30. Beamup
May 18, 2011


@ Callie:

Unless she was actively misquoted, what’s there is pretty damning IMO. I can’t conceive of anything which could be said around that to make it reasonable. That is NOT the sort of thing that can fit with any sort of discussion of uncertainties or maybe more research is needed.

31.  trrll
May 18, 2011

I realize that Oaklander is an expert in her field, and I am not even an expert in a directly related field. Still, though, without a lot more supporting evidence and explanation, I can't feel really confident in her opinion that there must actually be a physical disorder underlying the rise of Morgellons, not when we know how thoroughly a mind which believes the body is suffering illness can generate dramatic symptoms to match what they believe the illness entails (Desiree Jennings, anyone?)


If one accepts that the mind is a function of the physical brain, then it follows that there must be a physical neurological basis for *all* psychiatric disorders. And delusional parasitosis sometimes responds to physical intervention medications—they just aren't the medications used to treat parasites, but rather the ones used to treat psychiatric disorders.

32. [Blasphemous Kansan](#) 
May 18, 2011

still not itchy:

You seem to have some misunderstandings about the word 'delusion'. A delusion, when it is severe enough to impair some function of daily life, can be indicative of a psychological illness, but anyone who has any delusion is not automatically psychologically ill. It seems to me (at least according to dictionary.com) that 'deluded' and 'mistaken' are interchangeable words in almost any context that does not explicitly deal with psychological illness. So, actually, someone cannot be 'mistaken' without being 'deluded' since, technically a mistake(*) can be argued to be a mild delusion. You seem to be offering a diagnosis based on your social power structure (a blog commenter with no accountability for your statements) rather than objectively identified AND QUANTIFIED distortions of thought.

* the word 'mistake' in this sense is limited to the scope of Still not itchy's pose: as a statement given by someone in a professional capacity.

33.  still not itchy
May 18, 2011

@Blasphemous_Kansan: I was using 'delusion' to mean 'a belief which is part of a psychological illness'. In the context of this thread, I think that was a fair use of the term, and allowed some brevity on a complicated topic – it also seemed to be how others used the term. If it misled you, I apologise.

(Actually, having looked back, I did first say: "as deluded and psychologically ill", and it was only my pithy "people can be mistaken without being deluded" which

allowed any ambiguity. The rhythm of the phrase wouldn't allow more provisos).



34. Vicki
May 18, 2011

Kansan–

The denotations of “delusion” and “mistake” may be close, but the connotations are different. Mistakes can be small, more reasonable relative to reality, and people are usually more willing to acknowledge them. If I think there's a 5:30 train to Boston, email my partner there and tell her I'm going to take it, and there isn't such a train, I'm mistaken. If I turn up at the train station on Friday because I think I have a ticket for the 6:00 train, and then get to the front of the line and see that it says “Saturday,” that's a mistake. If I insist that there is a 5:30 train, despite what the Amtrak website says, I might be getting into delusion. If I turn up at the train station on Friday because I thought I had a ticket for the 6:00 train, and then get to the front of the line and see that it says “Saturday,” that's a mistake.

In terms of skin problems: lots of people have itches. Absent other evidence, I might go to a doctor and say “this area itches, I think there's an infection” and want a prescription. The doctor examines me, and maybe she gives me an antibiotic, or maybe she says “no, it's just dry, try changing the soap you use.” [I've had both those things happen.] Thinking there was an infection in the second case was a mistake. If I clung to it, and went from doctor to doctor looking for one who would confirm that idea, it might be a delusion. (My current hypothesis is that it's an allergy to something in my house, because the itch goes away when I'm traveling. I really hope it's not the cat.)



35. PatchUp
May 18, 2011

stillamorgie er... notitchy, again – it's not the itch that's the problem. If someone walked into their GP's office and said “I'm unbearably itchy, I keep scratching myself until I bleed, please help” then there would be no basis to assign a psychological cause immediately. On the other hand, if someone claims they're infested with bugs or GM nanobots that are causing spontaneous lesions (that only occur within scratching distance, oddly enough), and have the evidence to prove it (usually a box of scabs, fluff, sebum, skin flakes etc) then DOP is the obvious conclusion.

The problem is that even if the itch has physical origins (as someone with peripheral neuropathy I can attest that constant itching is horrific) once the morgie is convinced that they've been implanted with hexagonal nanotransmitters, their delusion will cause a nocebo effect, meaning that even successful treatment of the physical cause of the itch will not remove the delusion of infestation.

The symptoms and the delusions are quite separate things. A tinea versicolor rash on it's own would be treated with antifungal cream. The same rash, with the patient insisting “it's the physical manifestation of a chemtrail passing through my house, and now I have to drink dettol and cover my windows with aluminium foil” would be treated entirely differently. not because one patient has tinea and the other has been a victim of GMOPharma conspiracy. but because the second patient is clearly

off their rocker.

Morgellons is not a disease, or a conspiracy, or anything but a group of desperately sad, unbalanced individuals who've found kinship on the internet. Folie a domain name, Munchhausens by proxy server.

As with your buddies in the cfs/me/fibro/mcs camp, nobody doubts that your pain is real. Nobody thinks you're not ill, just that your own stigma about mental illnesses and somatisation disorders is preventing you from being well and living a normal life. If you truly wanted to fully participate in society, if you really wanted to be like everyone else, you'd say "Fuck the label, I'll try anything!". Instead you thrive on being professional victims, on demonising mental illnesses while raving about mysterious fibres and swirling urine, and hairs that move independently. I vote that all of these somatisation disorder sufferers who refuse treatment that would help, be labelled as suffering from 'Cop-out Disorder'.



36. Mu
May 18, 2011

Morgellons is 100% curable by twice daily rinse with 30C Toxicodendron radicans.



37. Composer99
May 18, 2011

Denialist troll is denialist.

On topic:

What sprang to mind reading this was Dumbledore's line at the end of the 'King's Cross' chapter in *Deathly Hallows* (paraphrase by me): "Of course it's all in your head. Why should that mean it isn't real?"

It seems to me that if the sensation of itching in this case is of psychosomatic origin, is it not the case that it is nevertheless the result of some sort of neurological or otherwise physiological issue?

A marginally-related observation: Someone with a chronic itch problem, whether arising from a skin issue or a nerve/neuronal issue, which they attribute to Morgellon's or other infestation, is, by buying into the stigma against psychosomatic/psychological symptoms & illness, perpetuating a social structure of psychological 'ritual purity'. In my non-expert opinion, of course.

38. Denice Walter
May 18, 2011



I vaguely remembered something and went over to the Morgellons Research Foundation's site; looking over "geography"- while the map is c. 2007, is there *possibly* a factor based on warmer climes? (altho' SoCA is dry, FL not, TX both).

39. Blasphemous_Kansan
May 18, 2011



Vicki,

I greatly appreciate the clarifications!! I was trying to limit the scope of the word 'mistake' in my little disclaimer at the end of my comment (as a statement of fact made by a professional, as a professional), but did not emphasize enough the difference in implied magnitude between the words 'mistake' and 'delusion'. I was only thinking in the psychological context, but your example illustrates a more practical situation very well.

Again, much appreciated!

40. Patchup
May 18, 2011



stillamorgie er... notitchy, again – it's not the itch that's the problem. If someone walked into their GP's office and said "I'm unbearably itchy, I keep scratching myself until I bleed, please help" then there would be no basis to assign a psychological cause immediately. On the other hand, if someone claims they're infested with bugs or GM nanobots that are causing spontaneous lesions (that only occur within scratching distance, oddly enough), and have the evidence to prove it (usually a box of scabs, fluff, sebum, skin flakes etc) then DOP is the obvious conclusion.

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41. Blasphemous_Kansan
May 18, 2011

Itchy; it was exactly those two phrases that rubbed me the wrong way, and had me a little confused as to why it appeared you were lambasting lazy diagnoses, while appearing to partake in it!

Thanks for the clarification!



42. JayK
May 18, 2011

There are cause and effect problems here. The first problem is itchy skin.

You've offered no proof that "itchy skin" is really itchy skin. There are mental processes and conditions that can make the person scratch and cause itchy skin. Orac mentions this in his post. Psychosomatic studies are real, but you seem to be more than willing to write them off in preference for some kind of anecdotal evidence and wishful bias.

This appears to be an area of study that can benefit from placebo testing. I'll do some real research when I can, unless someone else has the time. I have 4 deadlines by the end of week and this blog is just a minute distraction in between.



43. [somearebooiiums](#)

May 18, 2011

Seth Mnookin gives an excellent history of the Morgellons affair in *The Panic Virus*. In September 2009 the CDC's NCZVED DPD^[1] commissioned an external panel to look into it, but (so far as I know, anyway) they have not reported back yet.

[1] There is a truly wonderful expansion of these initials, but this margin is too small to contain it.

44. [Kurdele Nakisi](#)



May 18, 2011

My question would be, why are people coming down with a chronic itch disorder now, in great numbers that coincide so greatly with the rise in prevalence of the 'Morgellons disease' meme? It seems to me that in order for Morgellons to be an artifact of diagnostic substitution, there has to be something to substitute for; we should be able to find people, in numbers comparable to those who are claiming Morgellons now, who were claiming heavy itches then. But I've never seen any indication of such.

helooo istanbul kurdele nakisi

45. [Calli Arcale](#)



May 18, 2011

JayK — I would be willing to bet that some Morgellon's cases really do start out as genuine itchy skin. I recently had a fibroma removed from my leg (turned out to be benign, as most do), but it had been itchy, and before it was removed, it had *oozed* (which is what made me a bit concerned it might actually be cancerous or something). I also got to see it before it was put in the specimen container, and it looked *weird* under the skin. Not at all as I'd expected — but not totally alien or anything. Yet if I didn't have this fascination with medical stuff and biological stuff, I might think something very strange indeed was going on, and been suspicious at my doctor's easy dismissal of any risks. (Also, if I didn't know her personally and know that she's just a very fast-moving and bubbly person.)

I get itches. Everybody gets itches. And everybody seeks correlations; it's part of being human. If I hadn't gone and read up as much as I could about fibromas and such, I might've been tempted to think there was something else going on, and perhaps connected other itches to that one, worried at them, made them worse, and perhaps even triggered new fibromas. Which would have *confirmed* my wrong suspicions!

I can totally see a Morgellon's case arising out of a perfectly benign case of actual, real skin itchies, and then persisting long after the original problem was resolved.



46. [I Bruce](#) 

May 18, 2011

@#42:

Back when I was a med student, the term for a chronic itch disorder for which no cause could be found was neurodermatitis. It was thought to be caused by a “vicious circle” of pruritis, excessive scratching resulting in skin inflammation (dermatitis), causing more itching and scratching, and so on. Some of these cases could result in extensive excoriation and open wounds. It is quite common. I suspect that Morgellons is a subset of neurodermatitis, with the added feature of fibres and other junk sticking in the scabs being mistaken for parasites emerging from the skin.

Interestingly, the parasitic infestation that did not appear in the studies was scabies. This can produce intense itching with scratching, and is in fact a true parasitic disease. However, it usually does have specific findings on examination, and can be diagnosed by microscopic examination. Also, the mites are microscopic and would not be seen by the patient.



47. [JayK](#)

May 18, 2011

@Calli Arcale: proper case history would be essential for determining the original causation. A researcher or physician would have to rely on introspection, however, to try to come up with a determination of origins, which would result in various biases, both from the observer and the patient. You started to hint at that, but I thought I'd try to summarize it.

No one goes to a doctor with the first little “itch”, so proper documentation of origin just isn't going to be available. A patient that is convinced in a physiological origin for “itch” will not be a good source of information. The original “itch” wouldn't have enough initial mental/learning reinforcement to be able to recall the environmental and ecological variables that might be important. It isn't likely that an itch would start out with the same reinforcements as a trauma.

I'm sure someone will claim I'm trivializing their “real” problem, but I'm not trying to do that, I'm trying to determine a way to get a recreation of an original diagnosis long after the start of the itch.

My original post about using placebo treatment might be useful in determining physical vs. psychosomatic origins or present causation.



48. [daedalus2u](#)

May 18, 2011

JayK, the sensation of itching is an internal personal subjective feeling. There is no objective reality to the sensation of itching other than in the mind of the person who has that subjective feeling. If you want to get hyper-technical, then you could say there is no evidence for any feelings, all feelings merely being internal personal subjective experiences

subjective experience.

The definition of “delusion” is

“an idiosyncratic false belief that is firmly maintained in spite of incontrovertible and obvious proof or evidence to the contrary.”

<http://medical-dictionary.thefreedictionary.com/delusion>

With this definition, phantom limb pain is a delusion. There is no limb, that is obvious proof that the limb could not be producing pain. Why isn't phantom limb pain called “delusional limb pain”?

Is there any evidence that individuals are not experiencing itchy skin? No there is not. There certainly isn't “incontrovertible and obvious proof or evidence” that they are not experiencing itchy skin. There isn't any evidence that those affected individuals are not experiencing itchy skin. There couldn't be because itchy skin is an internal personal subjective experience. No one by the person experiencing it can know if it is “real” or not.

The diagnosis “Delusion of Parasitosis” is a medical diagnosis. It has a precise medical meaning that is distinct from what non-medical professionals think it means. It does not mean that the person with DoP is psychotic or delusional or crazy. It can only be diagnosed after there has been a sufficient medical work-up to rule out all possible parasites and when the patient then understands that itch causation due to all possible parasites has been ruled out.

Delusional limb pain is easy to diagnose. If someone reports pain in a limb they don't have, the absent limb can't be causing actual pain, it *must be a delusion*. Calling phantom limb pain delusional limb pain would not be helpful to the patient. Pain, like itch is a property of the peripheral nervous system that isn't under conscious control. Virtually all people don't have conscious control over the pain and itch signals produced by their peripheral nervous system. When itch of unknown cause remains unknown, that does not mean that there is no cause, or that the cause is “mental”, or that the cause is “delusional”, it means that the cause is unknown.

SSRIs have been reported to help the itching associated with primary biliary cirrhosis. The itching of primary biliary cirrhosis is not considered to be DoP because PBC is known to cause itching as a symptom. How PBC causes itching as a symptom is unknown. How SSRIs relieve the itching of PBC is unknown. I suspect that SSRIs alter the reuptake of serotonin by mast cells and so modulate the “gain” that mast cells exhibit. Mast cells are triggered by serotonin, when they are triggered they release serotonin. That released serotonin can release more serotonin, depending on the “gain” of the system. That SSRIs relieve the itching of PBC does not mean that the itching of PBC is “in their heads”, even though SSRIs are also used to treat depression.



49. Rob Jase

May 18, 2011

A treatment for Morgellons was demonstrated in the film Hellraiser II.

It was a bit harsh though.



50. Anon
May 18, 2011

Delusional parasitosis SUCKS. After my apartment got bedbugs, I got it taken care of but for a year afterwards the sensation of a bead of sweat running down my leg was enough to set me off my rocker completely, even though I never entertained the notion that it was anything else.



51. [bluegrassgeek](#)
May 18, 2011

Clearly Coulter & indeed I have attained a considerably higher standard of scientific accuracy.

I'm sure there's a name for **this** sort of delusion too.



52. Scott Cunningham
May 18, 2011

Delusional parasitosis definitely sucks. And once it's been self-described as parasitosis, confirmation and availability biases keep it there. I spent months thinking I had some kind of insect problem, and a neighbour with an extremely, extremely violent abusive husband, and was sleeping two hours a night and calling police in the middle of the night about screaming constantly, but oh no, they're not related. Good thing all that violence and sleep loss hasn't affected me at all. I'm sleeping in the college residence office lounge on the other end of town because still a third party in the apartment building, with a drug habit, got mad at me calling the cops, and now she's taken to yelling threats and scraping on my door with a knife to make scary knife noises, but I'm not affected. Now I just need to get rid of these damn dermal insecticide resistant scabies or lice or something on every inch of my skin that my inept doctor can't find.

Yeah. There were no insects. Sorry doc.



53. Luna_the_cat
May 18, 2011

There ARE also real peripheral neuropathies which cause physical sensations of itching; they don't originate in the brain, they originate in the peripheral nerves themselves. Many are also idiopathic or undiagnosable under anything but highly specialist conditions, because the cause is either very rare and arcane or just not

themselves. Many are also irritable, or undiagnosable under anything but highly specialist conditions, because the cause is either very rare and arcane or just not well understood. It doesn't mean that any parasitosis is real, but it does mean that the people experiencing the sensation aren't experiencing a psychosomatic symptom.

The problem is in the name, and in the reaction: calling it *delusional* parasitosis, though accurate, implies to the average lay person “you're crazy”, and the “it probably *does* originate in your brain” reaction sadly only reinforces that. Is it any wonder that people get defensive, and flee to the arms of the woo-meisters who at least tell them “yes, it's a real and physical, not mental, thing”?

I am not on the side of the woo-meisters — and I dislike this as much as I dislike the whole “chronic Lyme” thing, because I think as soon as someone embraces a false diagnosis and becomes emotionally wedded to it, their chance of a real diagnosis and effective treatment drops to nil. But it does no-one any good to ignore why people go for the false diagnosis in the first place.



54. [Neuroskeptic](#)
May 18, 2011

How do you pronounce morgellons? Is it morge (like “more”)-ellons or more-gell-ons? Or maybe even more-guh-lons?



55. Kathryn Hedges
May 18, 2011

I strongly suspect that Morgellon's starts out with a real itch which gets worse from scratching and from the extreme decontamination measures cited by Mark Crislip.

Since I know I have a history of allergies, if something itches, my first assumption if I itch (and my clothes aren't rubbing or brushing there) is it's an allergy. If I've been outside after dusk during mosquito season, and I see welts, I assume mosquito bites. If it's a red blistery rash, probably poison oak or mango peels.

But if I didn't know about all this, and my mama hadn't told me that scratching makes it worse, I might start a cycle of worsening itch leading to scabs. Scabs that might get clothing fibers stuck in them, which might look scary to someone who hasn't noticed this before. (How they'd avoid noticing stuff sticking to scabs from cuts etc. I don't know—maybe they're more careful with bandages than I am, maybe less observant.)

Regarding the fibers, I have an incidental expertise in recognizing various bits and threads under the microscope. I finally tried to avoid wearing long sleeves, particularly sweaters, because I was tired of getting fibers on my slides. I could probably recognize my favorite items of clothing from the synthetic and natural fibers that fell onto slides and petri dishes. (Lots of dyes, or maybe even the synthetic fibers themselves, fluoresce brightly.)

56. [someareboojums](#)

May 18, 2011

How do you pronounce morgellons? Is it morge (like “more”)-ellons or more-gell-ons? Or maybe even more-guh-lons?

The word Sir Thomas Browne used to name the disease was French, so it was probably more like “more-gay-yones” with a bit of a gargle. Here’s how he [described it](#).

Hairs which have most amused me have not been in the face or head, but on the Back, and not in Men but Children, as I long ago observed in that endemial Distemper of little Children in Languedock, called the Morgellons, wherein they critically break out with harsh Hairs on their Backs, which takes off the unquiet symptoms of the Disease, and delivers them from Coughs and Convulsions.

57. [patchup](#)

May 18, 2011

stillamorgie er... notitchy, again – it’s not the itch that’s the problem. If someone walked into their GP’s office and said “I’m unbearably itchy, I keep scratching myself until I bleed, please help” then there would be no basis to assign a psychological cause immediately. On the other hand, if someone claims they’re infested with bugs or GM nanobots that are causing spontaneous lesions (that only occur within scratching distance, oddly enough), and have the evidence to prove it (usually a box of scabs, fluff, sebum, skin flakes etc) then DOP is the obvious conclusion.

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The symptoms and the delusions are quite separate things. A tinea versicolor rash on it’s own would be treated with antifungal cream. The same rash, with the patient insisting “it’s the physical manifestation of a chemtrail passing through my house, and now I have to drink dettol and cover my windows with aluminium foil” would be treated entirely differently, not because one patient has tinea and the other has been a victim of GMOPharma conspiracy, but because the second patient is clearly off their rocker.

Morgellons is not a disease, or a conspiracy, or anything but a group of desperately sad, unbalanced individuals who’ve found kinship on the internet. Folie a domain name, Munchhausens by proxy server.

As with your buddies in the cfs/me/fibro/mcs camp, nobody doubts that your pain is real. Nobody thinks you’re not ill, just that your own stigma about mental illnesses and somatisation disorders is preventing you from being well and living a normal life. If you truly wanted to fully participate in society, if you really wanted to be like everyone else, you’d say “Fuck the label. I’ll try anything!” Instead you thrive on being professional victims, or demonizing mental illnesses while ruining

to be like everyone else, you'd say "fuck the label, I'll try anything": . Instead you thrive on being professional victims, on demonising mental illnesses while raving about mysterious fibres and swirling urine, and hairs that move independently. I vote that all of these somatisation disorder sufferers who refuse treatment that would help, be labelled as suffering from 'Cop-out Disorder'.



58. [DoctorDiva](#)
May 18, 2011

I agree with Luna that there's a problem with the name.

There is a fine line between the patient with chronic skin itching and no identifiable medical diagnosis and another with chronic skin itching who has a fixed delusion about the cause of that itching. Perhaps, the ones with the delusions started out in the other category and turned to the delusion out of frustration at medicine's inability to solve their problem. I think it is a mistake to label all of them as delusional.

I am, in no way, suggesting these patients actually have any parasites, but I can identify with the frustration. My husband has a mystery disease -involving syncope (and some itchy skin, by the way) – and for years has been treated as either crazy or malingering by most physicians he encountered. Only after being married to an MD, did he get the workup he needed.



59. [Andreas Johansson](#)
May 18, 2011

I read somewhere (New Scientist?) of a group of doctors who, it was said, wanted to make "Morgellons disease" an alternate name of delusional parasitosis, because their patients would accept treatment if and only if the doctor agreed they were suffering from "Morgellons".

I don't know quite what I feel about that ...



60. [Adrian W.](#)
May 18, 2011

Has anyone been able to read this post and comment thread without becoming hyper-aware of all the little itches on your body you were previously successfully ignoring?

To anyone who answered "yes" to the above question: how about now?



61. herr doktor bimler
May 18, 2011

Morgellons advocates frequently link Lyme disease to Morgellons, with some even asking whether Morgellons disease is the “Lyme disease of our time.”

Even the Chronic Lyme enthusiasts find the Morgellons crowd embarrassing, regarding them as parvenus and wannabees who should keep to their own specialised websites and stop bringing other delusional illnesses into disrepute:

****Please note** that unfortunately, the Lymebuster forum can no longer be affiliated with the original Lymebuster website. We will not go into specific details, but evidently she does not like that we include Morgellons disease on our board despite the obvious connections for many of us. We will continue to keep our focus on getting recognition toward the seriousness of Lyme and Morgellons diseases.



62. anne
May 18, 2011

I’m clearly way too suggestible to be reading stuff like this – I am now itching all over...



63. herr doktor bimler
May 18, 2011

Here’s [someone complaining](#) — with no evidence of insight — that she are doubly cursed, suffering from OCD as well as Morgellons. Possibly not representative.

There is bonus discussion of the relative usefulness of Magical Mineral Supplement versus colloidal silver.



64. trrll
May 18, 2011

With this definition, phantom limb pain is a delusion. There is no limb, that is obvious proof that the limb could not be producing pain. Why isn’t phantom limb pain called “delusional limb pain”?

No, it would only be delusional limb pain if they were convinced that the limb were really there (although perhaps not visible). One can experience referred pain without being convinced that its true origin is where it seems to hurt. An itch is not a belief, it is a sensation, which could have its origin anywhere from the skin to the brain. It becomes a delusion when the individual develops an unshakeable conviction that the cause must be parasites.



65. PP3
May 18, 2011

“People are looking for a physical diagnosis because of the stigma associated with psychological disorders.”

I always find this reason to be just a bit too convenient for those on the psych side of the debate. It is invoked all the time when somebody, especially a patient, does not agree with a psych interpretation, as if merely listing the possible bias is sufficient to prove it.

Psychiatry has a long and very troubled history of making unscientific claims and illegitimate power grabs (including right now with some of the proposed changes to the next edition of the DSM), so there are very good reasons to be cautious about accepting those diagnoses and the above assertion so uncritically.



66. marty
May 18, 2011

Clearly Coulter & indeed I have attained a considerably higher standard of scientific accuracy.

I'm sure there's a name for this sort of delusion too.

Dunning-Kruger Effect.



67. JayK
May 18, 2011

Those that easily confuse psychiatry and psychology might have a bias.

The negative connotations of a psychologically determined disorder is real, and the fear of being diagnosed is also real. Take for instance the increased number of women that are diagnosed as depressed vs. men. One way to look at that is that women don't have as high of a negative connotation to visiting or being diagnosed with depression while men are afraid that their masculinity will be questioned if they either see a psychologist or if they are diagnosed

with depression while men are afraid that their masculinity will be questioned if they either see a psychologist or if they are diagnosed.

The same thing might be at play, where a psychological diagnosis can be ignored or avoided in favor of a physiological problem that has a higher chance of being “cured” with a potion or poultice.



68. [Donna B.](#)
May 18, 2011

@55... haha and thank you very much. EVERY time I read about Morgellons I end up itching. Also, when I'm outside at dusk and see bugs flying around, I start itching even though I haven't been bitten.

However, those itches do not compare to the times I've been bitten by chiggers. You don't feel them crawling on you and you can't see them. The urge to scratch those bites is overwhelming. One year, I got so many bites after working in our yard that I have scar tissue behind my knees from the scratching.



69. [JayK](#)
May 18, 2011

Ah, [ignorance of psychiatry vs. psychology](#) in a professional that should know better?

Dr. Fred Baughman obviously also has an axe to grind.



70. [Mu](#)
May 18, 2011

Vielen Dank Herr Doktor, I went to that lymebuster forum, and I haven't laughed that hard in a long time. They have more conspiracies than Prisonplanet.



71. [Melissa G](#)
May 18, 2011

Anne and Adrian W.– Huh. Reading stuff about Morgellon's doesn't make me the least bit itchy. But reading descriptions of meals always makes me hungry. It's interesting, the variation in people's responses to things!



72. [W. Kevin Vicklund](#)

May 18, 2011

Has anyone been able to read this post and comment thread without becoming hyper-aware of all the little itches on your body you were previously successfully ignoring?

To anyone who answered “yes” to the above question: how about now?

Tonight is my 9th anniversary. So keep that in mind when I tell you, with all due respect:

Go to hell.:)



73. [lilady](#)

May 18, 2011

@ herr doktor bimler: Thank you for the reference. I also located some articles featured in mainstream media and located pictures of the “fibers, organisms, threads” that “infect” Morgollen’s patients on a Lyme disease website:

“lymepotos”

Many of the same practitioners/experts who were associated with ILADS (International Lyme and Associated Diseases Society) are now associated with Morgollen’s disease and sit on a scientific advisory board for Morgollen’s disease.

According to the articles I read in the Washington Post and Los Angeles Times, people afflicted with the disorder organized a telephone campaign during the 2008 election cycle directed at candidates. One million phone calls were placed to get candidates on board to fund a study. The CDC was budgeted \$ 1,000,000 specifically to research Morgollen’s. The study is now complete and will be published within the next few months; such a waste of dwindling research dollars that could better be used to fund cancer research.

@ Mu: I have been following the threads as well and they are now questioning the “credentials” of the research scientists. Hey, it works all the time for the autism fringe groups.



74. [herr doktor bimler](#)

77. herr doktor bimler

May 18, 2011

Here's someone complaining that she is doubly cursed, suffering from OCD *as well as* Morgellons:

<http://www.natmedtalk.com/alternative-therapies/19368-mms-morgellons-disease.html>

Note the lack of insight. One can only hope she is not representative.

The thread degenerates into a discussion of the relative benefits of colloidal silver and Miracle Mineral Supplement.

I blame the existence of the Internet. If a tree falls over in the forest and there is no-one to hear, not only does it make a sound, it goes straight onto the WWW and blogs about the experience, while other trees reply with messages about new miracle cures for falling over that the medical establishment doesn't want us to know.



75. herr doktor bimler

May 18, 2011

A comment has been held for moderation on account of links, so I'll urge people to google "Morgellons + OCD". Some of the first-hand accounts are enlightening, despite the authors' failure to see any link between the two afflictions with which they are burdened.



76. ItchingSucks

May 18, 2011

I don't know much about Morgellon's and don't think I have it, but as someone who suffered (and periodically still suffers) severe itching that doesn't respond to topical treatments, I understand the frustration of anyone who experiences a similar phenomenon on a chronic basis. In my case, the cause was easily identified – itching at graft sites on my feet which is caused by internal processes, not dry skin – so I didn't have the added frustration of being told it was all in my head. But the truth is that there are NO good treatments for itching that isn't resolved by topical treatments. Vistaril, atarax, and Benadryl were useless. Pain killers didn't work and xanax and ambien only helped to the extent they knocked me out for a few hours. It's a common complaint in burn patients. At least we had the "comfort" of the specialists acknowledging the problem and the lack of effective treatment. If some or all Morgellon's sufferers are experiencing similar, real itching that is not only untreatable, but for which their doctors cannot identify a cause without resorting to psychiatric or psychological diagnoses, I understand their desire to grasp at any woo that offers validation of their suffering.



77. Copypasta

May 18, 2011

PatchUp's comments are being held in moderation, she thinks because she accidentally posted twice. (i'm her other half, hence the same ip)

stillamorgie er... notitchy, again – it's not the itch that's the problem. If someone walked into their GP's office and said "I'm unbearably itchy, I keep scratching myself until I bleed, please help" then there would be no basis to assign a psychological cause immediately. On the other hand, if someone claims they're infested with bugs or GM nanobots that are causing spontaneous lesions (that only occur within scratching distance, oddly enough), and have the evidence to prove it (usually a box of scabs, fluff, sebum, skin flakes etc) then DOP is the obvious conclusion.

The problem is that even if the itch has physical origins (as someone with peripheral neuropathy I can attest that constant itching is horrific) once the morgie is convinced that they've been implanted with hexagonal nanotransmitters, their delusion will cause a nocebo effect, meaning that even successful treatment of the physical cause of the itch will not remove the delusion of infestation.

The symptoms and the delusions are quite separate things. A tinea versicolor rash on it's own would be treated with antifungal cream. The same rash, with the patient insisting "it's the physical manifestation of a chemtrail passing through my house, and now I have to drink dettol and cover my windows with aluminium foil" would be treated entirely differently, not because one patient has tinea and the other has been a victim of GMOPharma conspiracy, but because the second patient is clearly off their rocker.

Morgellons is not a disease, or a conspiracy, or anything but a group of desperately sad, unbalanced individuals who've found kinship on the internet. Folie a domain name, Munchhausens by proxy server.

As with your buddies in the cfs/me/fibro/mcs camp, nobody doubts that your pain is real. Nobody thinks you're not ill, just that your own stigma about mental illnesses and somatisation disorders is preventing you from being well and living a normal life. If you truly wanted to fully participate in society, if you really wanted to be like everyone else, you'd say "Fuck the label, I'll try anything!". Instead you thrive on being professional victims, on demonising mental illnesses while raving about mysterious fibres and swirling urine, and hairs that move independently.



78. Dangerous Bacon
May 18, 2011

So, when is the CDC's long-overdue report on its investigation of Morgellons going to be released?

The poor CDC is facing a tough one here. If as is likely their research showed no mystery bug, how do they report that without drawing the fury of believers (and the politicians who pressured the CDC to look into this in the first place)?

Do they report a handful of unexplained blood chemistry anomalies and call for more research? Doubtful that they'd come right out and label it DOP.



79. Jon H 

May 18, 2011

“Psychiatry has a long and very troubled history of making unscientific claims and illegitimate power grabs”

So do other branches of medicine. Psychiatry is hardly alone in that. There’s little point in throwing out psychiatry because they once approved of lobotomy, unless you’re going to throw out surgery as well because surgeons used to do without anesthesia or sterile working conditions.



80. Narad
May 18, 2011

They have more conspiracies than Prisonplanet.

Picking out “quantum dots” from routine microscopy of their tissue samples was a new one on me.



81. Hyperion
May 19, 2011

I do sympathize with these people a bit. I had what turned out to be an endocrine problem go undiagnosed for almost three years, because the initial symptoms (fatigue, loss of consciousness, convulsions and tremors) appeared to be neurological. It wasn’t helped by the fact that there were some nonspecific but disturbing lesions on the brain MRIs.

However, when EEG results failed to show anything conclusive, I was told that the problem was psychogenic and referred back to my psychiatrist (having a previous diagnosis of ADHD was also seen as evidence of “a history of psychiatric problems”). When my psychiatrist couldn’t help, he’d refer me back to the neurologists. I got bounced back and forth between several neurologists and psychiatrists.

The neurologists were adamant that the problem MUST be psychiatric and came up with some really creative explanations. This continued up until blood tests showed my TSH in the double digits. Still no word from any neurologists on the psychological causes for that or for the thyromegaly on the ultrasound that followed. Strange, since they were so absolutely certain that it must be psychogenic.

My point is that I have personally seen how otherwise very intelligent and skilled physicians can assume that if they cannot find the cause for a set of symptoms, it must be psychogenic or otherwise psychiatric in origin, even over the objections of actual psychiatrists. I’ve also seen many physicians who are not psychiatrists, but nonetheless feel perfectly comfortable making psychiatric diagnoses instead of referring the patient (interestingly, many of those physicians also dislike it when you ask them what “scope of practice” means).

Now, it sounds from Dr. Crislip's essay that many of these people probably are suffering from some sort of psychiatric problems, whether a delusional disorder or a conversion disorder or something else I wouldn't know. Hopefully at least some of these patients will be able to receive psychiatric treatment, and hopefully they will improve.

On the other hand, I also know how it feels to have a physician assert that "anything can be psychogenic" (true, but a bit tautological) and to be told that the reason I wasn't getting better was because I didn't want to get better (false on both counts) or to be told that I needed to "pick yourself up by your bootstraps and dust yourself off" (I responded by telling his nurse that the good doctor was welcome to come down to my dojang for a sparring session so I could show him how we learn to pull ourselves up and dust ourselves off).

I was raised by a clinical psychologist, so my objections weren't out of any sense of stigma, but simply a desire to, I don't know, be able to go back to work, get through a full day remaining conscious, minor things like that. A year of that, much less two or three, and it takes its own psychological toll, so it's also entirely possible that some of the behaviors of these patients are a result of their experiences.

In my case, I did have the education and experience (and skepticism) that I would probably not have been willing to accept something like Morgellon's (or any diagnosis where there aren't relevant CPGs and published literature, etc), but as Dr. Crislip mentions, plenty of people wouldn't necessarily know better. They want someone to be able to tell them what is wrong and to be able to help them. Unfortunately, there are plenty of unscrupulous people who are perfectly willing to tell them whatever it takes to sell them some half-baked "cure."

I can also understand their distrust and disdain, those sorts of experiences can change how you view the practice of medicine. In my case, it finally convinced me of the importance of Pay-For-Performance.



82. [wmdkitty#83021](#)
May 19, 2011

shudders

I'm itching just thinking about it.



83. Arkham
May 19, 2011

It seems to me that in order for Morgellons to be an artifact of diagnostic substitution, etc.

Yes, you are correct. Consider: <http://en.wikipedia.org/wiki/Trichotillomania>, or if you'd rather, http://en.wikipedia.org/wiki/List_of_cutaneous_conditions .

If you don't think that wikipedia can be dead on, you're foolish.



84. Arkham
May 19, 2011

In other words: it is precisely that.



85. Neil Craig
May 19, 2011

Kreb said

“It is not for scientists to prove the LNT”

That is not how science works. If that were so the Great Pumpkin in the Sky would be a scientific theory. Science requires some actual evidence before a theory is accepted. There was none when the bureaucrats adopted it and less now.

This goes double because on the LNT thread you have effectively defended LNT as unfalsifiable. A claim adopted without any evidence whose proponents say there is no sort of evidence whatsoever which would make them change their minds is the antithesis of science.

Were Orac or his followers actually on the side of science it would not have been necessary for me to point this out. The only common difference between the pseudoscience Orac supports and that which he opposes is that he is always in support of whatever the state supports, in some cases, such as Wakeman, his opponents show a far greater respect for scientific principles.

If the state supported eugenics, as it used to, he would support it; if it supported the Earth centred universe he would be denouncing Galileo; if the state said Jews were subhuman, as one state used to, he would be denouncing anybody who questioned it as “unscientific”. That is why taking on people like him is important.

Science, from the control of fire onwards, has been responsible for all human progress. Those who oppose scientific principles are opposed to truth and ultimately to humanity and the very worst of them are those who wrap themselves in the, deservedly, good name of science to attack it. Such people must be opposed without reservation.



86. Chance Gearheart, EMI 1-P 

May 19, 2011

Wow, Neil. You might be on to something. You may want to contact the local fire department and let them know their HAZMAT Technicians are part of the conspiracy. I mean, if low-dose chronic beta/gamma radiation is harmless, they're wasting millions in tax dollars buying Level A hazmat suits.

Better yet, you should go there in person, and tell them that to their faces. I'm sure you'll awaken them all to the truth.



87. Orac
May 19, 2011

Neil,

The LNT has nothing to do with the topic of this thread. Your perseveration has gotten to the point where it has become tiresome. Go back to the post where it's relevant if you want to bitch about the LNT. Any further posts by you about the LNT on a thread not related to the LNT will be either deleted or deleted and then moved to the appropriate thread, depending on the mood I'm in and whether I have time to move them.

This is your only warning.



88. NJ
May 19, 2011

Orac, seriously.

He has proven himself a one-note crank. You know it. I know it. Everyone who has read the LNT thread or the climate-related threads you created to mock him knows it. In fact, anyone who has seen his posts pop up on unrelated threads knows it. It's fairly certain that everyone he interacts with in meatspace knows it, too. The only person who does not know it is him.

And that's because, well, he's a crank.

You've been at this long enough to know how it will play out. His response to your post @ 77 will be both triumphal and indignant, and it will spur him to copy pasta the same crap on every new post. You'll finally get annoyed enough to drop the hammer on him. That's ultimately his goal, it's his only means of self-validation.

And that's because, well, he's a crank.

Save yourself the time and irritation.



89. Composer99
May 19, 2011

Denialist projecting troll is denialist and projecting.



90. Christophe Thill
May 19, 2011

“Delusion” and “delusional” are harsh words. As Orac said, people are really suffering, even if the nature of their problem is not what they believe it to be. “Delusion” doesn’t simply mean “you’re crazy” in the mind of most people, which would be bad enough. It suggests that they’re making it up, and perhaps even simulating in order to get attention. I know this is not what the word means in its technical, psychiatric use. But I’m almost sure it’s the way patients hear it.

Seems to me that doctors still haven’t got over an old notion: that physical conditions are “serious” affairs, while psychogenic problems are confusing and dubious. Doctors? Yes, but patients too. They want to hear that their “disease” comes from a physical cause. They want a prescription, a regime of specific drugs ; something that shows that they are as valuable as any other patient. Explain to them that it’s actually psychogenic, address them to a shrink, and they’ll feel like you’re trying to humiliate them, to deprive them from something, and replace it with a mark of shame.

I’m sure that some of these “Morgellons” patients could, very earnestly, scratch off their own flesh with their fingernails. It’s similar to the other “imaginary diseases” generated by modern life, such as “electro-sensitivity”. You can’t just tell people “it’s all in your head”. This calls to a new approach, in my opinion.



91. [In Vitro Infidelium](#)
May 19, 2011

@ John H #69

So do other branches of medicine. Psychiatry is hardly alone in that. There’s little point in throwing out psychiatry because they once approved of lobotomy, unless you’re going to throw out surgery as well because surgeons used to do without anesthesia or sterile working conditions.

Given this discussion is taking place in the context of an affirmation of Science Based Medicine (hooray !) it is only reasonable to acknowledge the lack of any foundational scientific Theory of Psychiatry. Surgeons worked without anaesthesia not because their theory of the body demanded anaesthetics not be used but because there was no viable product available, lack of sterility was not addressed because of a lack of knowledge, not because of any theory of surgical practice prohibited sterility. In contrast psychiatry has produced abundant doctrines that have had no validity beyond the philosophical exposition of the particular doctrine’s

proponent.

Nevertheless we can not abandon psychiatry, not for reasoning based on ‘things were once bad in surgery’, but on the simple lack of any alternative model for offering care and support for individuals experiencing significant distress that is not identifiably somatic. However in accepting the psychiatric model of care, we should avoid getting trapped into the deduction that ‘not identifiably somatic’ is unequivocally ‘psychiatric, and neither should we accept that a sustainable psychiatric diagnosis is exclusive of comorbid somatic illness. After all it’s not unreasonable to suggest that science is not so competent as to able to identify all possible somatic illness, and that an unexplained, untreated and unacknowledge physical illness ‘could’ produce disabling psychological responses.



92. [In Vitro Infidelium](#)

May 19, 2011

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93. Vicki, Chief Assistant to the Assistant Chief

May 19, 2011

In Vitro Infidelium:

I’m not an expert on current theories of psychology, but I do know that parts of modern psychiatric practice are based on the same empirical approach as some other areas of medical practice: “if we do X, it helps with problem Y.” If you can show that a specific drug consistently helps patients with severe depression, you don’t need an explanation of the underlying chemistry. Just as morphine and its derivatives worked to relieve pain before we had an explanation of that brain chemistry.

Also, that numerous invalid theories have been produced doesn't mean that no valid ones have been.

94. JohnV 
May 19, 2011


@Christopher Thill

“You can't just tell people “it's all in your head”. This calls to a new approach, in my opinion.”


Who said that all that is done is telling people “it's all in your head.”? Does a diagnosis of delusional parasitosis not have any treatment besides a stern talking to? Wikipedia, the place where I get all of my medical information, lists a couple of specific drugs used to treat it.

In fact, these posts generally bring out some morgellons sufferers who will invariably state how angry they are that the doctor “called them crazy.” Of course, the followup question is usually “did you try the treatment the doctor suggested?” and the response is usually a variation of “no because he didn't believe me that a secret government project using U2 spy planes to chemically treat my house and cause these fibres to form”.

And then whats left? Adjudication?

95. Terrie 
May 19, 2011

I find Hyperion's experience very interesting, because every single time I see a new psychiatrist, the first thing they do is have my thyroid levels checked. Never mind my assurances that I've already been tested, and my thyroid is FINE, thank you very much, and that I have a long history of GAD and OCD. Nope, gotta make sure it's not the thyroid. It doesn't help that I've always been thin and that ~95% of GAD symptoms are physical, so that every new pdoc wants to be sure there's no underlying physical issue.


96. Robin Laws 
May 19, 2011

There's NO research being done by any of these writers who are bringing these OLD Morgellons articles back up again in what they think is a new way of telling old and unproven stories. Morgellons is in no way a delusion. I've been living it for 7 yrs now along with thousands of others around the world. You wanna talk

delusions? The people of this world are the ones being deluded. Deluded by GMO foods, chemtrails and scientists playing God trying to create synthetic life forms. It's showing in those of us who suffer where the true delusions lie. Lies being one of the keywords in it all.

97. JohnV 
May 19, 2011

Even though it makes my comment at 10:49 AM look like an amazing feat of seeing the future, I promise that I did not make comment 86 @ 12:09 PM.


98. Denice Walter 
May 19, 2011

@ Robin Laws:

Those who put forth theories about GMO foods, chem-trails, exotic new diseases, et al, most assuredly, have something to *sell* you: either a treatment, supplements, books, a website, a radio show, or perhaps *themselves* as Natural Health's New Messiah who is adroitly "sticking it to the man" – i.e. the Establishment, a/k/a SBM medicine, science, journals, universities, governmental bodies, etc- purely for *your* benefit. Or so they say. Why should you dismiss most experts and accept the talk of someone who usually has spurious – or fictional – credentials at best? They have a bill of goods to sell you as well as their list of products. If you don't believe me (afterall, I'm just someone on the internet), check their websites: most will have a section labelled "store" or "donate" or both. Take care of yourself and good luck with whatever ails you.

99. JayK 
May 19, 2011

Hey, look everyone! Robin Laws actually has parasites living in her skin, except that no one can see them because they are living in a different dimensional reality in which Robin Laws' alternate self is living in a world where parasites are people with just different uses for nutritional well being and chemtrails are bringing the Reavers out from the edge of space.

100. Mu 
May 19, 2011

Robin Laws' alternate self has 7000+ posts on Lymebuster, confirming your different reality diagnosis.

101. Yojimbo 
May 19, 2011

@90 Oh Mu! I had not heard of Lymebuster. I went and looked at it. You evil person – my brain hurts now and it's all your fault. You'll be hearing from my attorney...

102. CTBarb 
May 19, 2011

Let it be known that this disease is not ONLY a skin disease, but those who suffer, and some without any indication of a skin disease, suffer INTERNAL parasites. I brought this to the attention of many in the medical community and showed them actual specimens from my bodily fluids, stool and eyes. Local doctors wouldn't believe what they saw, although those who saw the samples within minutes of leaving my body who were Harvard Med. physicians, found them extraordinary and said they had never seen anything like it before! I was tested prior to being an accepted patient for any type of mental disorder, especially 'delusions of parasitosis' etc. I was found to be sane and capable of understanding their findings. One physician said, "Whatever this is, it is out of this world" an exact quote. Another said, "We've never heard of Morgellons", and still another said, "These specimens are moving and alive!", and most would say, "You can't get THAT here!" and conspicuously move away from me. In defense of those who have this horrible, disabling disease, it is much MORE than a dermatological illness, it is a SYSTEMIC illness, it is found in our bodily fluids, i.e. saliva, blood, mucus, semen, urine, feces...to name a few sources. Don't debate or discard what you don't know about!

It is also very curious to note that many Morgellons sufferers have died from a cancerous type illness...including Sue Laws of MD. In fact, I am in possession of her files and photos of this disease, as well as my own library of more than 400k microscopic photos from the start of this disease which was documented from the bite of an Arthropod that shouldn't have been alive at the time of year and location when I was bitten! BTW, I am not a novice in the field of microbiology.

103. JohnV 
May 19, 2011

I guess we'll just have to take your word for it, won't we?

104. Calli Arcale 

May 19, 2011

A few points, CTBarb:

- 1) One can be sane and deluded (or deceived — pick whichever word you prefer) at the same time. A lot of people don't realize this. It's because our perceptions are not actually what we see but rather a highly sophisticated simulation of reality managed by our brains. And our brains are suggestible. To borrow software lingo, this is not a bug; it's a feature. A properly functioning brain/mind can be deceived and believe fervently in that deception. It can even, unwittingly, deceive itself — all while being in perfect working order.
- 2) Physicians say a lot of things, because they are people. They can say something is extraordinary because it really is, or because they are trying to be friendly and take you seriously.
- 3) Delusions of parasitosis are certainly not limited to skin lesions, and DOP is not the only case where patients dramatically misinterpret what they find in their stool or other bodily excretions. That's not to say you don't have parasites — just that finding alleged parasites in your stool doesn't rule out a false self-diagnosis on your part.
- 4) On that note, a wise man (Richard Feynman) once said “The first principle is that you must not fool yourself – and you are the easiest person to fool.” We're all deluded to varying degrees, even when we are perfectly sane; it's part of our brains work. (For instance, nearly everybody suffers from the absolutely vital delusion of being able to see clearly over the entire field of vision, yet all of those people have a blind spot they cannot even perceive because the brain masks it. A delusion which is common and indeed necessary.)



105. lilady
May 19, 2011

The Lymebuster blog is a real hoot. I also read some of the other posters...crazy as can be...strictly internet diagnoses.

@ CTBarb: Internal parasites...in every organ...in all body fluids...really. I also read at the Lymebusters site about Sue Laws who died “from a cancerous type illness” when her husband stated that the doctors told him she died of cancer (not cancerous-type illness...whatever that is). Sue Laws husband still believes his wife died of Morgellon's disease. CTBarb would you like to expand on your diagnoses of “cancerous type illness”?...as you are “not a novice in the field of microbiology”.



106. Kelly
May 19, 2011

Hi. I'm one of the itchers. All I know is that I am not a germaphobe.

Listen folks, I am no scientist. I am no “psychiatric disorder” phobe. I am not invested in being infested. I just itch like hell and no one has told me why or what to do to stop it. I have told my doctor, my dermatologist and my facilities mgmt people at the office in the smart building where I work. I would be happy to submit to any allergy test. I would be happy to have my skin biopsied. I’ll try any psych drug you want to address whatever nerve endings are overreacting to whatever stimulus you want to be at fault. I JUST WANT TO STOP ITCHING. It doesn’t have to be the result of some great big conspiracy and cover up. It could be fibers in the clothes I have worn. I don’t care to find mysterious fibers from outer space under microscopes. I have other hobbies. Maybe it is a simple allergy to something on the rise. Okay-develop the damn drug. I want it. Maybe it is chronic skin irritation caused by a food additive and I accidentally eat more of that in the Spring-an insecticide used on fruit that is cheaper in the spring? Maybe my office is never cleaned and some of us respond more to dust mites than other. Should I try Benadryl? Maybe it is an air borne polutant on the rise that affects our nerve endings from within-making it seem that “bugs” are crawling out of the skin? Maybe its something in fast food wrappers, BPA’s in water bottles, etc. etc. Search me.

All I know is that in my office almost exclusively and largely only in the Spring when the vents in the building start to kick in air conditioning instead of heat, my skin crawls everywhere and consistently enough to make me want to scream. My doctor has told me to get more rest and given me an anti depressant. Very good. I like the anti-depressant. Relaxes me and makes me smoke less. No problem. Let’s get back to my skin crawling ONLY at my office please.

Got any other happy pills for that please? Can I buy them in volume? No resistance here my friends. It could be anything-I am WIDE OPEN to an explanation.

Facilities management has said it finds nothing. Okay I’m the office crazy lady. It has said nonetheless that it could nonetheless by No see ums. WHAT?!

Microscopic bugs that live by lakes? I work at a PC indoors! Don’t you people EVER clean around here Jeez. Would an air particle cleaning machine help do you think? Maybe it’s an allergic dermatitis? OTHER women in the office have it-Not the men.

Nervous reaction to a common ladie’s vitamin deficiency perhaps causing nerve reactions? ONLY in the office-ONLY in the Spring-Only the women? Diet or hormonal differences attracting dust mites? Some people get more bit up by mosquitoes than others in the same environment. I figured we ate more sugar or something. I’m one of those.

I’ve given you a topic people. Please don’t argue over semantics. Tell me I’m seasonally schizoid and I’ll take the right pill six months of the year-really. Just give me a solution. Kelly in Chicago



107. Militant Agnostic
May 19, 2011

CTBarb

it is found in our bodily fluids

I knew it – “they” are always tampering with our precious bodily fluids.



108. Yojimbo

May 19, 2011

May 19, 2011

@ Militant Agnostic

Damn right! Ever see a Communist drink water?



109. Calli Arcale
May 19, 2011

Kelly — “I JUST WANT TO STOP ITCHING.”

This reminds me of what Dave Barry (I think) said in one of his columns ages ago. He’d developed a ferociously itchy rash, so he went to a dermatologist. He was hoping the dermatologists would give him “one of those garden tools with the three tines” and tell him to move into a cave and “rake this tool over the rash every 5-8 seconds as needed”. (Or words to that effect.) Instead, the doctor told him to try and grow a new rash for better study. Torture! Barry was going for comic effect, of course, but when you itch, there is really only one thing on your mind, and man, that has gotta be annoying.

I’m a software engineer, not a doctor, but yeah, I’d try Benadryl or other antihistamines. They’re cheap, and available at any supermarket or drugstore. That it strikes more in the spring makes me think “pollen”. This year has been especially bad for pollen in my part of the country (Minnesota) because of a delayed spring — most of the spring bloomers are pretty much firing all at once now. And in bumper quantities! The flowering trees look beautiful, but man, my eyes are killing me! And you can get allergic responses causing all-over itching, even when the allergen is mostly being inhaled or swallowed. (If I breathe in cat dander, which is my nemesis, my back and chest start to itch fiercely.) So my totally-not-expert advice is you should try an OTC antihistamine first of all, and if that doesn’t help, talk to a doctor. Maybe you need a bigger dose; maybe you could do with a provoked allergy test to find out what you’re allergic to (though be warned; they’re not a lot of fun — I’ve had allergy tests twice).



110. lilady
May 19, 2011

@ Kelly: Cali Arcale gave you some good advice about anti-histamines. You may never find out what your unique “trigger” is but you are obviously having some sort of histamine reaction to something in your office environment...in the springtime.

I would speak with my doctor first, to determine if there are any contra-indications to taking anti-histamines...such as hypertension. WE WANT YOU TO STOP ITCHING!



111. Ema Nymton 

May 19, 2011

Holy shit, Neil Craig!

You're a fucking moron!

112. JayK 
May 19, 2011


@Kelly: Why haven't you tried Benadryl? The only real short term side effect would be drowsiness and possibly dry eye/mouth. It is such a common OTC medication that I thought it was very interesting that you hadn't tried it. Also, is it just a specific area of the body?

113. Vicki 
May 19, 2011

Kelly,

That sounds very much like an allergy. If your symptoms are significantly worse at the office than at home, maybe there's something growing in the air conditioning. Or maybe there are ornamental plants nearby that are different from what's near your home: one landscaper who is fond of the wrong plant could have done it. Or just more greenery upwind from your office than from your home.

Benadryl isn't a bad starting point, if you can't get to an allergist (for lack of time or health coverage).

114. Calli Arcale 
May 19, 2011

One more bit of advice — try a nondrowsy antihistamine first. Benadryl's strong, but it does make you sleepy. (It's also relatively safe, and very cheap.) I'm absolutely thrilled that my old favorite Allegra is now available OTC (and in generic form! *happydance*) but there's also Claritin and Zyrtec. Zyrtec I've always found good for contact allergies — I once took it after an encounter with a stinging nettle, and by golly, that welt was completely gone in five minutes.

Tavist is another one I've used, but it can cause drowsiness.

Oh, and I said pollen earlier mostly because it's what's getting me, but mold also can have seasonal blooms. It may or may not have anything to do with the office A/C (it's totally possible, but so much stuff happens at once in the spring that it's hard to pin down the exact culprit). Could be that the change in the building's HVAC triggers the mold to release spores; maybe it's an autumn-blooming mold, and the A/C kicking on after months of heat triggers it to go forth and multiply. Total speculation here, of course.



115. mayoshmayo
May 19, 2011

wouldnt the easiest way to put this argument to bed would be to have the ubiquitous fibres associated with morgellons identified. detritus, clothing fibres and all the other descriptors are generic not specific. i havent found the complete mayo study online yet but i would bet there has been no materials analysis of the fibres. similarly, the CDC study is not going to answer that question or be that thorough. until someone can come up with a definitive assessment as to the nature, function and makeup of these structures everything else said is supposition.



116. JayK
May 19, 2011

Until someone can prove that there isn't a teapot floating in an opposing orbit between Mars and the asteroid belt, then everything else said is supposition. Oh, and it has to be THE teapot I'm thinking of, not just some random teapot.



117. Sir Eccles
May 19, 2011

A friend of mine recently worked out he was allergic to formaldehyde. Threw out a lot of Ikea furniture and a hell of a lot of other stuff too. Cleared up his skin though.



118. Kelly
May 19, 2011

Kelly here. I've talked to my doctor about Benadryl because I am on other asthma meds so you always check those things out. He said it would be okay but he has

Kelly here. I've talked to my doctor about Benadryl because I am on other asthma meds so you always check those things out. He said it would be okay but he has already sent me to a dermatologist who could not find the problem. He has resisted sending me to an allergist. Don't know why. Suspect he's sick of me. Been through allergy tests as a child-yes I know-no fun-perfectly willing to do it again.

A MOLD that festers in the air ducts! WOW good theory. I am ALLERGIC to mold. We know this one. I have resorted all the way to prednisone doses to counteract this thing as my FIRST assumption was allergy-with my doctor's permission- but the tingling prickly sensation really does feel like tiny bugs. It is awful. Sensations are foolers though. Location? Absolutely everywhere including places you cannot possibly scratch in an office. Ever under dress to go fishing at dawn? Same sensation-bite on the eyelid, then the knee, up the back, into the hairline, now this arm, this finger-like a mite jumping around. So that is what the "bugs" thing is about. But I imagine that could be neurological too-Kelly



119. Justin
May 19, 2011

I dunno, probably a multifactorial disorder in which the factors converge on disrupting the innate immune system causing an increase in pro-inflammatory cytokines.

This would not only cause the physical symptoms such as itching, but also the psychological, such as, depression, OCD, Brain Fog, ADD, etc.

This is where the multifactorial/multigenic comes into play. the common pathway is increased inflammation, the details of the individual symptoms depend on their particular genetic make up and environmental exposures.

The fibers as mysterious parasitic hyphae, ummmm NO. This is the OCD with a little internet sprinkled on top.

Justin



120. Terrie
May 19, 2011

Just a note to everyone throwing around the word "sane." In technical, not casual, use, sane/insane is a legal standard on when a person with a mental disorder can be held criminally liable for their actions. Plenty of people with serious mental illness, including schizophrenia, have been declared sane. So declaring you're sane and that we should take your claims seriously is setting the bar pretty darn low.



121. Calli Arcale
May 19, 2011

You've done the allergy tests? Yeah, no fun. Took three nurses to hold me down. (I was about seven, I think.)

Ooooooh, I totally know what you mean about fishing at dawn and then feeling zillions of insect bites! Just one — or even seeing your buddy get bit — and suddenly every sensation, even the tiniest one, your brain screams “EVIL BLOODSUCKING VAMPIRE BUG! KILLITKILLITKILLIT!” (At least, mine does — it hates mosquitos with a passion.) And suddenly I'm dancing around swatting bugs, most of which don't even exist.

I'm also an arachnophobe (spiders are awesome, important, amazing, fascinating creatures that happen to completely freak me out if I see them) so if I so much as *see* a spider, I tend to get a bit of this. *Especially* if I've seen one on my actual body. Maybe that's what was originally meant by “gives me the willies” — if so, that's sure what happens.



122. JayK
May 19, 2011

I can't believe I missed CTBarb's comment. That was pure awesome. I sure hope it wasn't just a drive-by and that we can have some more. I'd like a few questions answered, though

- When does your book come out?
- How often do you scoot across the carpet with your hind legs in the air?
- Have you talked to a vet about a good deworming medication?



123. Luna_the_cat
May 19, 2011

@Kelly — I have a similar thing, except mine kicks in in November, when the heating comes on. I'd second — or third, or whatever'd — the possibility of a mold allergy, or something similar; there are actually a lot of nasties that can live in AC.

I find claritin — or much more cheaply, generic loratidine, which is what claritin is — works best for me. If the first antihistamine doesn't help, try others, they have different mechanisms.

And I've been through just about every patch test on the planet, and they didn't help pin down precisely what it is that I react to — unfortunately, the other limitations of patch tests is that there are thousands of times the number of potential allergens than they use. They only make tests for the most common ones.

...Ye gods and little fishies, this entire thread is making me itch, now.

124. Luna_the_cat
May 19, 2011



For the first time in forever, and with no links in it, one of my comments just got held for moderation. New policy?

125. lilady
May 19, 2011



@ Kelly: I suspect it is a “histamine reaction” that manifests itself in all-over itching reaction. You can check into Histamine Reaction on a reputable website.

Basically, I have no allergies at all, with the exception of allergy to penicillin, but yet I have occasional weird rapid onset reactions (vertigo) along with H2 histamine reactions to something in the environment...more prevalent for me with prolonged very damp weather. It can be very debilitating, especially if I am away from home where I “stash” my supply of (generic CVS label) Chlorpheniramine maleate 4mg. anti-histamine. It provides relief for me within 30 minutes...along with chewing on dry crackers to absorb the excess stomach acids.

WE WANT YOU TO STOP ITCHING!

126. Carlton
May 19, 2011



Hi all

I have low key Morgellons and rarely get crawling under the skin. When things first started my Dr. took bug samples and guessed at what they were under the scope and treated me twice for Scabbies. Never did get to go to a lab to find out what bugs he saw from my sample. When the Scabbies treatments failed he diagnosed me as delusional which sent me on a hunt with pest control then that failed and on to the net. Back then I was attracting critter big and small. As I got well it got left down to the no-see-ums. I am guessing a parasite or mite maybe. I now am only afflicted with one bug. Got rid of at least five types and their various stages.

I use to be able to go out and stand with people and be the only one swarmed by nats and they would try to go in my mouth, eyes, and nasal. Same with bare feet on the lawn. Small whitish type bugs (maybe another type of Nat) would swarm my feet and not bother other bare feet on others. Wasp would come after me and ignore others with me, Wolf Spiders. Got bit and then pinched the spider right off the body where I just got bit quite a few times. For a while I attracted Fleas. Got rid of that. *It has been weird and it has been rough. It is exhausting and we need prayers and understanding.*

It has been weird and it has been tough. It is exhausting and we need prayers and understanding.

Its hard to get well when the disease invites or has other things jump on board. So you end up with things that look like a conspiroicy theory. (sp) I do not spell well at all. Please forgive. Well when you are left to your own devices you end up trying to figure it out on your own. We all do our best and do not need others trying to knock us down further while we are in the middle of trying to get well. If only you knew how devastating the illness is you would be kinder.

I have a bug sample at a Unversity right now. Waiting for results. Also I am involved in 1 study for Chronic Fatigue caused by molds and or bacteria. Still waiting for results. The study is not for Morgellons but Morgellons seems to be tied in with molds and fungus problems. No one knows why or how one gets Morgellons or why it has become more wide spread. We do know that it will get other things to jump on board. Such a one can get infected with Lymes sense we attract critters. Some of us Like me do not have Lymes. I also rarely ever itch and I do not get the Leasons. Hopefully my treatments have kept me from getting to that stage.

In my area I know of 8 people who have this disease. Mostly nurses. What I see is that Aid's for years was diagnosed as delusional and many people died with no help from the medical. They repeated it with Lymes and Formalgea and are doing it with Morgellons. It took a Dr. 10 years to get Aid's acknowledged as a true affliction and not something made up by a bunch of crazies or mistaken people. I bet back then people who grouped together with aid's looked like conspirosusy theriost also.

For those of you who think this all exist only for the profit and sales. Far is the trueth of that. It would be like me saying a Dr. is only a Dr. because he only is there to sale me something because I am charged for a service. If someone is providing a service they get paid. If someone is saling a product that worked for them and trying to make a profit it is a No no. Well then it is also a no no for Medicine to be sold at a profit to cure cancer. How dare they make money off those poor sick cancer inflicted people. See whare that kind of thinking leads. Nothing wrong with someone trying to help people and recoup their losses.

I do not sale any products and I am not a web site or forum owner. Just a tired person wanting to get the rest of the way well from a living nightmare.



127. Mu
May 19, 2011

Luna, you're repeatedly mentioning a drug brand, my guess is that set off the filter as "commercial spam"



128. JayK
May 19, 2011

@Carlton: How did you come by this thread? Did you use a search engine or did someone direct you here as people that were "hating" on Morgellons sufferers?

See, in the world of woo there are two kinds of people, the leeches and those the leeches are able to latch onto. You're a victim of a bunch of people that have told you that there is such a thing as Morgellons and they have encouraged you to believe that you have physical symptoms. Have you been to a psychologist, vet, or have

you that there is such a thing as Morgellons and they have encouraged you to believe that you have physical symptoms. Have you been to a psychologist, yet, or have you been repeatedly referred to one and you've decided that you're not "crazy"?

I'm not going to analyse you here, that would be unprofessional and it wouldn't actually get anywhere. Most likely you'll never respond, or you'll take offense and shut down because you "aren't crazy". I'd like to suggest that you do see a psychologist, though. Not a counselor, a fully licensed psychologist. Heck, just copy what you wrote here and send it to a local psychologist's office.



129. TBruce
May 19, 2011

What I see is that Aid's for years was diagnosed as delusional and many people died with no help from the medical...It took a Dr. 10 years to get Aid's acknowledged as a true affliction and not something made up by a bunch of crazies or mistaken people. I bet back then people who grouped together with aid's looked like conspirously theriost also.

This is not true. AIDS was recognized as a serious physical illness pretty much as soon as it was described in the medical literature. It was thought most likely to be an infectious disease right from the start because of its pattern of incidence and spread. Identification of the virus, diagnostic testing and antiretroviral treatment came later – they take time to develop.

But AIDS was never thought to be "delusional".



130. Matthew Cline
May 19, 2011

@NJ:

Save yourself the time and irritation.

At first glance I misread that as "Save yourself the time and *irradiation*". Heh.



131. Calli Arcale
May 19, 2011

Carlton — don't ignore the possibility that your symptoms are not all from the same thing. It's possible (seriously) to have both a real parasite infestation AND delusions of parasitosis — hellish, eh? But that's the brain for you. I think we evolved it as a defense mechanism — getting rid of parasites is so important that we're over-sensitive to them. Obviously, in ancient times we didn't have deworming agents and antiparasitics or anything.

oversensitive to them. Obviously, in ancient times we didn't have deworming agents and antiparasitics of anything.

As far as gnats swarming you and leaving everyone else alone, this can definitely happen. It's best known with mosquitos, who can have very strong preferences for particular people. Paler skinned people and blondes or white-haired people tend to attract them more, though this isn't an absolute rule — sometimes they just go for whoever is different in a group. Bright clothing can attract them to, as can floral scents — mosquitos don't actually live on blood but actually live on nectar, so flowers attract them. And bright colored shirts can resemble flowers to them because of the near-UV and fluorescent dyes put in them to make them look brighter to human eyes. You could try switching to dark colored clothing and avoiding anything with a floral scent. But this isn't guaranteed; they may be attracted to you, personally, and not just your clothing, and you can't really change that. Best thing to do is get some DEET-based insect repellent. (There are botanicals you can use as well if you're into that, but DEET's kind of the gold standard. There's another chemical too that's pretty good, but whose name eludes me at the moment. Starts with a P, I think.)

The insects have nothing to do with Morgellons, of course, except that having insects bite you will invariably make you hypersensitive for a while, and you'll feel bugs that aren't really there. (Again, this isn't really being crazy or anything like that; it's entirely normal. I'm sure we evolved it as a defense against things like malaria — better to swat at too many things than not enough.)

Morgellons tied in with molds and fungus — this I believe, based on the conversation just above your post. Allergies can make people itchy, cranky, or just plain tired, and fungus spores are a very common (and pervasive) allergen. Allergies are tricky and very personal; they can manifest in very different ways depending on exactly how that person's immune system has decided to freak out. Just today, I learned that the burning eyes that have been driving me bonkers for the past few weeks is actually an allergic response. This surprises me, because I have no itching and no sniffing, which I usually get with airborne allergies. But the ophthalmologist (who was checking me out for new glasses) said she sees a lot of that. I learned something today!

132. [Suboxone Doctors](#)



May 19, 2011

This is definitely a serious disease that most people should not take lightly. Hopefully more cures for the disease arise

133. [stuartg](#)



May 19, 2011

For a little light relief I submit the following anecdote.

Patient complaint on presentation to the Emergency Department: intense itch caused by "watch batteries under the skin". Examination findings were of flea infestation with multiple flea bites.

Dr. J. R. ... "I ... ****"

Delusional, yes. Parasitosis, yes. Delusional parasitosis, no. Morgellons – “what the **** is that?”

134. Denice Walter



May 19, 2011

People who _suffer_ seek out relief from *experts* (real or alleged) whom they *assume* to have greater information than they have themselves. Charlatans manipulate this informational divide to persuade the sufferer of their expertise thereby taking *advantage* of the patient’s weaker position- of being ill, of not being well informed, and of being psychologically encumbered by their present suffering and/or another long-standing condition.

It seems to me that this gets to the very heart of my gripe with pseudo-science: those in a position of power – ill-gotten though it may be- prey upon the weak. Their advantage is gained through illegitimate means (spurious credentials, phoney research, self-aggrandising pr) to gain the *trust* of the unsuspecting patient: thus, trust is built upon prevarication. It’s worse than the so-called “law of the jungle”: at least predators don’t go about gaining your allegiance first.

If you review the many conditions that woo-meisters “treat” you’ll find chronic, frustrating, cyclic, *difficult* conditions that SBM acknowledges as such. Woo promises cures: again, taking advantage of those who trust in them and their “expertise”. Horribly, when pseudo-scientists are called out, their strongest defenders are usually their followers.

If you read AoA, you’ll find many upsetting, heart-rending tales of how parents proceed through a hellish day-to-day existence (there’s one called “Two Minutes” now). Many commenters here @ RI describe their trying symptoms. I hear callers to a radio show outline their miseries and frustrations with hard-to-treat illnesses. It’s hard for me to read or listen because I do have sympathy for them but also I have very little hope for them getting real help from whom they seek it.

135. Chance Gearheart, EMT-P



May 19, 2011


Here’s what I don’t understand as someone who actually suffers from mental illness (Clinical Depression/ADHD) and has since he was a child...

If Morgellons really is, as research suggests, a psychosomatic disorder, and NOT an infectious disease, why aren’t it’s sufferers rejoycing at that? Why do they want to label themselves as crazy and seek false hope from praticioners of woo and dubiousity, when in reality there’s nothing close to that going on.

The demonization of people who actually seek help for their mental illness, expecially by the woomeisters utterly sickens me. Mental illness is just that – it’s an illness. It’s treatable, just like anything else. Why, of all things, would someone want to deny themselves something shown to be an effective treatment?

136. Denice Walter



136. Dangerous Bacon 

May 19, 2011

As indicated by the comments of at least one poster here, there's a parallel between belief in Morgellons and belief in vaccines-cause-autism.

"If you can't tell me what causes autism/my skin sensations (or I don't like your explanation), then you haven't proved that my theory(ies) are wrong, no matter how bizarre/unsupported by evidence/repeatedly refuted by facts/loony they are!"



137. Carlton

May 20, 2011

Hi

Just a short message. More later. I belong to all sorts of forums trying to figure this out. No one yet has tried to convince me that I have Morgellons. I have had many who believe they have Morgellons because of bird mites. So many have suggested it was a bug bite. Still have not decided on that part. Symptoms way too many before the bugs invited themselves and I know of longer term Morgellons people who don't have any bugs. Knock on wood.

Thanks to those who are kind and concerned. I do consider all options. One of the forums had a link to here and I followed it. No one asked me to.

On the AIDS thing. I need to go look into that to see if you are right. The person whom I gained info on has a son who is friends with the Drs. son whom got AIDS acknowledged. Maybe the message is screwy. I will be back to let people know if I was right or the person who says my info is wrong.

I had a great amount of Morgellons symptoms over an eight year period before the bugs hit.

Last of all. Why I started posting was it bothered me that some here and even the writer seem to make some jabs at sick people. Let's say you are right and we are all mentally ill. How come someone would come here making rude and cutting remarks. Some crazy people are dangerous. Even more so it is mean and cruel to make cutting remarks of someone who is sick. Those people need to have a heart. I wonder if they make fun of cancer patients? Maybe they think crazy people deserve to be tormented. It's all very sad.

More later once I do my homework on the AIDS situation.



138. Chris

May 20, 2011

As a fellow sufferer from allergies, I sympathize.

Definitely got to a legit allergist and be tested. While you will suffer greatly for a wee bit, it helps to learn what to avoid (the skin prick for alder pollen was very pronounced, I now know why my face swelled up in spring!).

Because of the test I got allergy shots for a couple of years, and they may have actually helped. Most importantly, I have had prescription antihistamines that I use every spring time to avoid my face from swelling up. But I only use them during daylight hours, in the evening I use Benadryl at bedtime to combat the itchies and get some sleep.

I really only need the “big guns” in spring when certain trees are in bloom. My other major contact allergy is nickel, which I manage by avoidance.



139. Chris
May 20, 2011

I forgot to mention my comment was directed towards Kelly.



140. Vicki
May 20, 2011

Carlton–

It’s only a “jab at sick people” if you think physical illnesses, including those caused by insects or parasites, are legitimate and mental illnesses are a personal flaw. It may be that part of what’s bothering you is either a problem of brain chemistry, or a learned habit (for example, insect bites leading to itching which then feeds on itself because scratching irritates the skin). Neither of those would mean you were a bad person, any more than those gnats make you a bad person.

Yes, some crazy people are dangerous. So are some non-crazy people. That’s not why we shouldn’t make fun of people with mental illnesses. We shouldn’t—and I try not to—both because it can push people away from treatment, and because it’s a generally nasty thing to do.

I have a number of friends who could be described as “crazy”: they are living with things including PTSD, anxiety, depression, and bipolar disorder. Some of them are using medication; some are using talk therapy; some are using both; one has arranged her life in various ways to help her balance the mood swings, make sure someone will remind her to have dinner in certain moods, and so on. Sometimes I need to remember that my friends have those problems; for example, to avoid certain triggers for the people with PTSD. It’s not different *in kind* from knowing that someone else can’t go certain places because they can’t climb stairs, or someone wants to talk on IM rather than by phone because of hearing problems. Nothing whatever would be gained by telling someone who is successfully treating his bipolar disorder “you’re not crazy, you don’t need those pills.”



141. JayK
May 20, 2011

I'll admit it, I make fun of trolls. People who come here with real questions and intellectual honesty don't deserve to be made fun of, though.

For someone like CTBarb above, there is no reason to believe they have "Morgellons" or anything else. They are here to throw up and leave a mess on the carpet. Personally, I find it very cathartic to tease them or mimic them, rather than get frustrated by their drive-by attacks.

The medical world of allergies is increasing, this has been pointed out most recently with lactose intolerance on the rise across the world in genetic strains that have not been mixed with other genetic strains of humans that have historically been prone to lactose intolerance. This new fascination with real allergies and allergic reactions should not allow for those with psychological symptoms to avoid proper diagnosis that might include delusional parasitosis or any other delusional/schizophrenic disorder. Having a psychological disorder doesn't make one "crazy" and there shouldn't be a cultural stigma against these diagnosis, BUT there is. People can chose to follow this social/cultural stigma and keep insisting that they have some sort of physical malady that no one else can see or detect, or they can get real help through a psychologist for a mental condition.

Or we can blame it all on the sky dust from chemtrails creating the reavers amongst us.



142. lilady
May 20, 2011

@ Carlton: You mention some valid arguments about treating people who have mental disorders, but fail to see the larger picture. Perhaps posters on this site have become a bit jaded when it comes to junk science and its impact on gullible people with diagnoses of made-up disorders which come from the internet.

Have you been following the political debates about the U.S. Budget? See, we actual are trillions of dollars in debt...its not as if we have budget surpluses and can afford to waste \$1,000,000 on a CDC study to disprove Margollen's disease. We can allocate scant research resources that should be put toward research into real diseases such as cancer and other real debilitating diseases. Recently, hundreds of millions of dollars have been spent to disprove the junk science of "chronic" Lyme disease and the vaccine-autism link, while other research has been stymied from going forward due to lack of funding.

I for one, am sick and tired of spending my tax dollars just because of phone/letter writing campaign to politicians for additional research dollars for yet again additional studies into pseudoscience.

Please stop parroting and posting inaccurate research about AIDs and starting doing research on your own...the public library is your friend...if you cannot tell what

internet sites are reliable for your research. (hint) The Cleveland Clinic website is a good beginning.



143. Scott Cunningham
May 20, 2011

@Carlton

[W]e shouldn't make fun of people with mental illnesses. We shouldn't—and I try not to—both because it can push people away from treatment, and because it's a generally nasty thing to do.

That's why I always offer my own story about delusional parasitosis (above @52). Nobody wants to hear that their condition may be psychosomatic. I've been there. I've had delusional parasitosis, and my doctors, unable to diagnose something, kept asking me if I was smoking crack. Not just "it's all in your head," but "are you smoking crack?" So yes, I resisted their suggestion it was delusional, and got sucked deeper into my own misreading of the situation.

In my case, lack of sleep and abundant violence down the hall probably stressed me out to the point of paying obsessive attention to minor skin irritants, and voila, delusional parasitosis. If you're always itchy, it might be psychosomatic. It's worth checking that angle out.



144. Hyperion
May 20, 2011

Given that "Morgellon's" does not have the sort of diagnostic validity that exist with legitimately documented conditions, it's probably likely that there are a mix of people who've been led to believe that it is a cause of their issues, maybe some with delusional parasitosis, maybe a few with allergies or vascular conditions or peripheral neural problems, etc.

One thing that I wonder, based on some of these comments, is how people with psychiatric conditions fair in terms of getting help for unrelated medical problems. For example, Kelly posted a comment about her problems, it was fairly clear and coherent and several other commenters identified aspects that they felt indicated an allergic reaction.

Now, sometimes patients with psychiatric conditions can have difficulty with communications. I know that ADHD makes keeping my thoughts focused and concise for short office visits very difficult, even with meds. I wouldn't be surprised if patients with schizophrenia, bipolar disorder, or many other conditions would have even greater difficulty. There's also the question of whether psychiatric conditions would make it difficult for a patient to accurately observe, interpret, and/or remember their symptoms accurately.

So take Kelly's well-worded comment about the problems that she has experienced. Suppose that a patient with comorbid schizophrenia were to have a similar

experience. How would they interpret what was happening, and how would they describe it to their physician? Would it resemble that of someone who believed that they had “Morgellon’s” disease?

I guess the potential for that sort of situation makes me wonder whether there is a need for better policies and guidelines for physicians to maintain a dialogue with the treating psychiatrist involved. The patient’s psychiatrist is probably in the best position to determine to what extent the complaints are related to psychiatric problems, and to what extent there are symptoms that do not appear to be psychiatric in origin. The psychiatrist might also be in a position to better explain the patient’s complaints to the other physician in a more comprehensible manner.

Of course, implementing that without being able to create a 25-hour day might be difficult. Those sorts of consultations take up time, and I also don’t know whether they would be billable or whether it might be worth setting up a separate CPT code for that sort of thing.



145. herr doktor bimler
May 20, 2011

Hilarity in what appears to be a real journal, *Clinical, Cosmetic and Investigational Dermatology* (published by Dove Press, who have a [reasonable reputation](#) for genuine peer review):

“Morgellons disease: Analysis of a population with clinically confirmed microscopic subcutaneous fibers of unknown etiology”.

The paper contains the interesting claim that

Biopsies performed on Morgellons disease patients have focused on fibrous material projecting from inflamed epidermal tissue, and this material is often labeled as “textile fibers” on pathologic examination.⁷ However, a more thorough analysis of the fibers performed by the Federal Bureau of Investigation forensics laboratory has revealed that the fibers do not resemble textiles or any other manmade substance. In fact, the fibers are virtually indestructible by heat or chemical means, making analysis difficult by conventional methods.⁶

Naturally I looked down to Citation 6, and found
6. Wymore R. Personal communication. May 4, 2009.

If there is NO WAY of destroying these fibres then they will slowly take over the entire biosphere and we will ALL DIE!



146. Sir Eccles
May 21, 2011

@145 – And then you call up the FBI and ask about “Wymore” and they say they have never heard of him, all part of the conspiracy!!!!!!!!!!!!



147. still not itchy
May 21, 2011

@ patchup re: 57, 55, 77. I'd missed these posts, but I'm not sure they need any response. You're largely disputing things I never said, and littering your rant with unreasonable presumptions. I'll just leave you to speak for yourself:

“stillamorgie er... notitchy, again

...

As with your buddies in the cfs/me/fibro/mcs camp, nobody doubts that your pain is real. Nobody thinks you're not ill, just that your own stigma about mental illnesses and somatisation disorders is preventing you from being well and living a normal life. If you truly wanted to fully participate in society, if you really wanted to be like everyone else, you'd say “Fuck the label, I'll try anything!”. Instead you thrive on being professional victims, on demonising mental illnesses while raving about mysterious fibres and swirling urine, and hairs that move independently. I vote that all of these somatisation disorder sufferers who refuse treatment that would help, be labelled as suffering from ‘Cop-out Disorder’.”



148. adelady
May 21, 2011

Speaking as one who has occasional crawling, itching problems with my hands, might I suggest that some sufferers should be referred for genetic testing.

Charcot-Marie-Tooth disease can be carried in families for generations with no signs of the characteristic weakness in feet and hands – but the ghastly insects-crawling-all-over sensation might be the only neurological symptom that an apparently normal person will display. (Of course, if they get a positive result, they might put it all together remembering that they've always had problems opening jars or spraining ankles for no reason.)

Allergy tests and dermatological biopsies won't help if CMT or other neuropathy is the cause.



149. Anon
May 21, 2011

I do not have this condition, but I have a family member that has it. I have been to controversial conferences and met the patients (and wonderful people) that are afflicted with this disease. I also met Will who wrote the article in *The Guardian* when he was in Austin.

It is not imaginary, unless you want to claim that I share delusions with a sibling and my mother. The fibers do not appear to be organic, nor do they burn at very high temperatures. Yes, I have tried burning the fibers on my own with a gas stove, and they do not burn. Patients have very characteristic lesions and the fibers you typically see are bright blue (but there are red, black, and white ones I believe). The lesions are painful to those who have them. They can appear in areas that one can not scratch (back), and dermatologists can't do anything about them. The fibers can't be matched to anything in a database, but OSU has been trying match it to something for some time. They are going to try to sequence the fibers if I remember right, but I doubt these things have DNA or are a carbon-based life form. In fact, it may not even be a life form. It is of my opinion that it might be environmental and patients with it either have impaired detoxification, an immune dysfunction syndrome, or perhaps both.

I've met patients at a conference and seen the characteristic fibers under a microscope. It doesn't take a radiologist to differentiate between a hair, a clothing fiber, or these distinct Morgellon's fibers. In fact, it's quite easy. The hard part is identifying what the fiber is. The fibers are macroscopic if you have really good eyes, but most need a magnifying glass or handheld microscope to visualize them.

Perhaps looking at pro-inflammatory cytokines and immune function should be the first step in investigating something so strange and novel, but science has a history of jumping to psychiatric labels in new, strange illnesses before doing real, critical analysis.

It's sad to me that doctor's and researchers don't learn from all the mistakes we made in history (tons) and keep an open about something that truly may be novel, but I guess it's true when they say history repeats itself. It seems to me that they slapped a psychiatric label on this thing from day 1. There seems to be organic or situational psychiatric neuropsychiatric co-morbidity in many or most patients. However, the presence of psychiatric problems does not rule out other organic disease.

“Certainly, medical history is one of myriad cycles of disbelief followed by the begrudging acceptance of scientific truths. In that history, scientific facts long considered heresy are ultimately embraced but only when the highest authorities in the land get on board, a process that sometimes takes generations. Throughout the last century, for instance, neurological diseases, which have been short on infectious causes, so far, but long on symptoms, have been targets of disbelief. In the early 1900s, multiple sclerosis was known as the “faker's disease.” New technologies, such as the debut in 1985 of magnetic resonance imaging, which visualized lesions in the brains of MS sufferers, also have helped to legitimize diseases like Parkinson's, ALS and Alzheimer's.”

-Hillary Johnson



150. herr doktor bimler
May 21, 2011

And then you call up the FBI and ask about “Wymore”

I do not trust ‘personal communications’ from someone whose name belongs in a Knock Knock joke.



151. mary Kelly
May 22, 2011

It is real. It is rotifers (reason biopsies do not show anything ” is unless preserved they contract into a completely unidentifiable lump”), fungal mycelium (I think parasitic fungi), and pfiesteria...all in one miserable human who is shunned and laughed at. I had this 4 years before I knew about morgellons (so how did I suddenly go online and get a delusion after 4 years of symptoms, I had a rash and bites from an unknown source. I did not put the cognitive and other symptoms until later. The above theory explains everything. Did you know when a rotifer comes out of it’s dried form it takes a piece of DNA from it’s surroundings. Textile fibers commonly have a fungus that is why they may be attracted to open wounds, that is why the investigation found these.

http://books.google.com/books?id=aj2ZMSekmHEC&pg=PA231&lpg=PA231&dq=iodine+lugol+rotifer&source=bl&ots=5MJb5I0qCk&sig=WHUeX4DBKtHDyPyNfMW6NQDg_lg&hl=en&ei=uF



152. The Analyst
May 22, 2011

Still more evidence that Morgellons disease is most likely delusional parasitosis

A true skeptic’s headline would say, “More evidence that Morgellons syndrome may be delusional parasitosis.”

The sheep go bahhhhh.



153. Antaeus Feldspar
May 22, 2011

A true skeptic’s headline would say, “More evidence that Morgellons syndrome may be delusional parasitosis.”

So your idea is that “true skeptics” are absolutely forbidden to use Occam’s Razor? Really? They can’t look at the fact that the hallmark symptom which distinguishes Morgellons from all those less exciting possibilities (the mysterious fibers with no prosaic explanation) has never been verified to occur, and draw any conclusions from that fact?

Tell me, in your world, does the fact that some people have come up with cockamamie theories about the Apollo moon landings being faked mean that “true skeptics” can make no statement stronger than “the Apollo astronauts **may have** walked on the moon”?



154. Doc Rocketscience
May 22, 2011

Seriously, dude, what the hell do you “analyze”?

‘Cause you suck at it.

Just sayin’.



155. The Analyst
May 22, 2011

So your idea is that “true skeptics” are absolutely forbidden to use Occam’s Razor? Really? They can’t look at the fact that the hallmark symptom which distinguishes Morgellons from all those less exciting possibilities (the mysterious fibers with no prosaic explanation) has never been verified to occur, and draw any conclusions from that fact?

Please examine history. I don’t need to waste my time when [Anon’s post @149](#) describes the situation well.



156. novalox
May 22, 2011

Yet more evasion and an ad hom from analyst, but why should we be surprised by such a dishonest poster.



157. herr doktor bimler
May 22, 2011

They can appear in areas that one can not scratch (back),

If you cannot scratch your own back then I recommend a visit to a physiotherapist to do something about that flexibility problem.



158. lilady
May 22, 2011

Or, maybe those who suffer with Morgellon's disease have regular meetings to do circle scratchings; works very well for chimps in the wild and in zoos.



159. herr doktor bimler
May 22, 2011

when Anon's post @149 describes the situation well.
ORLY??

"New technologies, such as the debut in 1985 of magnetic resonance imaging, which visualized lesions in the brains of MS sufferers, also have helped to legitimize diseases like Parkinson's, ALS and Alzheimer's."
-Hillary Johnson

I have no idea who Hillary Johnson is, but the suggestion that ALS or Parkinson's or Alzheimer's diseases were considered illegitimate prior to 1985 does not inspire confidence in him or her as a source.

In the early 1900s, multiple sclerosis was known as the "faker's disease."

Gonna have to say "Bullshit". That claim is echoed back and forth between multiple websites (mainly in the CFS subculture) but oddly enough, none of them provide a citation to the turn-of-the-century publications where "faker's disease" occurs.

Since the distinctive spinal plaques of MS (the 'sclerosis' part) were central in Charcot's 1868 description, its reality has never been in doubt.



160. TBruce
May 22, 2011

That's funny, I went to med school in the 70's and I swear that we learned about ALS, Parkinson's and Alzheimer's back then. We even examined patients with these diagnoses. Now Ms Johnson tells me that these diagnoses were not "legitimate". What a rip! I want my money back!

Oh yes, another difference between these neurologic diseases and Morgellons:

All of the neurologic diseases have characteristic and diagnostic histopathology – only available (practically speaking) at autopsy, unfortunately. However, the pathology is there, and has been recognized for over 100 years.

Morgellons, as the article states, does not have a characteristic histopathology. Its proponents are unable (or unwilling) to provide such evidence. If it's there, it should be easy to produce – being that it's in the skin and all.



161. Doc Rocketscience
May 22, 2011

T.A. – Anon, “Hillary Johnson”*, and now you, are all trying to pull a Galileo Gambit. Sure, in any field, there are scientists who've been wrong, and who ignored – and even derided – theories that later turned out to be correct. But, what Gambiters conveniently like to neglect is that many more scientists have been *right*, and have ignored and derided theories that later *continued to be nonsense*.

As they say in the financial sector: “Past performance does not guarantee future results.”

*I'm guessing this Hillary Johnson runs [this](#) website on Chronic Fatigue Syndrome. Personal anecdote on CFS: my mother suffered from CFS/Epstein-Barr for years...except that she didn't. Turns out her fatigue and immune system problems were more likely the result of an undiagnosed heart condition: she had one bad valve and a badly enlarged heart due, most likely, to a bout of Scarlet fever when she was 5. Sadly, she died in recovery from valve replacement surgery at age 50, after chasing a CSF treatment for some 15 years.



162. lilady
May 22, 2011


Hillary Johnson wrote the forward section of the book “Cure Unknown-Inside the Lyme Epidemic”...the book describes “Chronic” Lyme Disease as a “real” chronic infection. Johnson's complete forward is available on the web at:

Oslersweb.com the Lyme epidemic.

Hillary Johnson is also the author of a book on CFS.

Hmm, could it be that Hillary Johnson is doing research for authoring the definitive text on Morgellon's Disease?



163. herr doktor bimler 
May 22, 2011

Mary Kelly @ 151: Rotifers are indeed fascinating little beasties, but the book you are referring us to is about “freshwater invertebrates”. The key word here is “freshwater”. There are certain differences between the freshwater environment and your skin.


pfiesteria

This is an interesting hypothesis but it leads to the prediction that Morgellons can be avoided by staying away from estuary water where dinoflagellates might be encountered.

164. Craig 
May 23, 2011

Ok, So if Morgellons is delusional why is it that the CDC investigation (thru kaiser) is yet to release the results? Originally they said the report would be released in November of 2009, but when that date came they changed that. At one point there website stated that they are trying to find what the common cause of infection was... seems odd to me that its taken 2 years to compile results if in fact the results are just delusional?! I wonder also why it is theres now published medical journals with testable symptoms for morgellons? Seems european Medicine is always ahead of ours and interestingly enough Many DRs there are starting to accept morgellons as more than delusional, and have found different parasites (not exactly bugs maybe, but same difference). I used to think that all these morgellon people were nuts, my best friend and his wife both have/had it, and i always though it was psychological..for like 4 years I thought that, then i got it! I dont think they are delusional anymore. Why is it so many morgellon sufferers test positive for lyme disease?

I think all of you that are making these rude and insensitive comments take a second to look more into this, maybe even (god forbid) meet someone with this disease before opening your mouths. ANd for the Drs that were making rude comments and insults...shame on you. I kind of thought you were supposed to be better than that...

165. lilady 
May 23, 2011

@ Craig: “I wonder also why theres published medical journals with testable symptoms for morgellons?”...Citations please.

“Why is that morgollens sufferers test positive for lyme disease?” (hint) Testing positive for Lyme disease is also present in patients who have Rheumatoid and Psoriatic Arthritis, Syphilis, certain health bacteria in the mouths and a whole host of other disorders and infectious diseases. ELISA and IFA tests for Lyme disease yield high false positive test results due to their broad sensitivity and rather low specificity. The bacterium that causes Lyme disease can be visualized under the microscope when the expanding rash is biopsied. Have you any information about biopsies that show parasites that are present in biopsies? Any microscopic slides will do with a report from a pathologist...multi-colored threads don’t count.

Be more specific now Craig, by providing peer review journal articles...or are you just a crank who engages in science bashing.



166. Calli Arcale
May 23, 2011

Craig:

Ok, So if Morgellons is delusional why is it that the CDC investigation (thru kaiser) is yet to release the results?

This is the government we're talking about. Efficiency isn't exactly their strong suit.



167. Mu
May 23, 2011

anon, have you ever thought about glass fibers as cause of your itch? One thread years ago on the old WCU had "fibers that don't burn" with an excellent description of a SEM of said fibers, down to the 15 micrometer diameter, perfect for glass fiber. If your whole family suffers from that I'd really check my environment for some flaking polyester-fiberglass (old shower, boat, corrugated clear roofing etc).



168. Anon
May 23, 2011

anon, have you ever thought about glass fibers as cause of your itch? One thread years ago on the old WCU had "fibers that don't burn" with an excellent description of a SEM of said fibers, down to the 15 micrometer diameter, perfect for glass fiber. If your whole family suffers from that I'd really check my environment for some flaking polyester-fiberglass (old shower, boat, corrugated clear roofing etc).

First, I don't have an itch. I'm probably the least itchiest person you could meet. A pet peeve of mine is when people ask me to scratch their back for them.

The whole family does not suffer. Just one member.

I guess anything could be possible, but if they were glass fibers, I think OSU or a forensic lab would have figured that out by now. They don't match anything in the database, and I would assume glass fibers would be in there. I'm not sure how difficult it is to match the type of fiber you are talking about. But even if there wasn't a direct match for the controls, they were usually as close as you can get to identifying what it is. But if I remember right, I believe OSU sent in polyester fibers as a

control.

OSU sent in tons of controls (fibers of various sources) to test the competency of the lab, and they appear to be competent, so I don't think that's the issue.

But the fact that painful lesions and fibers are only one of many symptoms, I don't think the fibers you speak of make logical sense. However, I'm not saying it's not possible. Nobody really knows at this point (but some like to claim that they know).



169. Vicki
May 23, 2011

Another thought for anon–

Can your family member who has the problem arrange to spend a few weeks, or even a few days, away from home? Take time away from work or school, sleep somewhere other than their home, and avoid their usual haunts. That doesn't mean avoiding friends: it means that if they usually hang out with the person at one bar or mall, go to a different one. Don't drive/ride in their usual car.

That would help find out whether this is a reaction to something in their environment (such as Mu's suggestion of fiberglass). If it is, that's a place to start in identifying and/or getting away from it. Maybe they need a really thorough house cleaning, or even to move. Maybe it's time to look for a new job, or see if they can get transferred to a different location.

No guarantees, of course: it might be something ubiquitous, or it might not be that sort of reaction at all. But if they've been suffering for years, it's likely worth trying if they haven't already.



170. Dr Richard and Trisha Springstead
May 23, 2011

We understand your skepticism, but unfortunately we have seen many of these patients in Florida. In particular we have a young woman that Recieved retroactive SSI and Medicare in Ocala Florida. The judge, lawyer, patient, myself and my wife must have all been delusional, because the judge said "Morgellons" 3 times. My Wife and I have seen this and unfortunately it is very real. Calling people who are perfectly coherent, delusional is really "Doing Harm".

If anyone thinks we wanted to see this, we did not. If you would like to view the Court Documents we would gladly provide them. As a physician married to a very kind an brilliant Medical Professional, I at first doubted my wifes sanity. The band is playing on and if you think that this woman did this to herself, you kind sirs are sorely lacking in Compassion.

<http://www.youtube.com/watch?v=l2sP98LPW9Y>

We have many more cases reporting. The name was to be a place holder, it is a humiliating name for a very real disease.

Many Thanks,
Dr Richard W. Springstead
Trisha Springstead RN MS



171. ArtK
May 23, 2011

Dr. Richard, etc.

As has been pointed out in other threads here, legal decisions aren't medical evidence. Your anecdotes are not evidence.

What evidence do you have that these 'threads' are anything but fibers found in the environment? And please, don't cite "lab tests by the FBI."



172. Terrie
May 23, 2011

@169. If you're going to a JUDGE for medical confirmation, YOU are delusional. Judges often have little, if any, scientific training. If a person came in and said "Here is proof that I meet requirements for disability, due to having whachamacallititis. Here's proof of criteria A, B and C." the judge is going to look at criteria A, B and C, and not the validity of whachamacallititis.



173. Mu
May 23, 2011

*the judge said "Morgellons" 3 times
and was in Kansas no more*



174. lilady
May 23, 2011

Dr. Springstead provides us with a You Tube site to view slides made by Mark Darrah...who has been described on various Morgellon Disease websites as the “Director of the Material Science and Engineering Lab at Stony Brook University” and conducting research into the “disease” at Stony Brook University. Darrah himself lays claim to that title and his Stonybrook “research” on the 2008 You Tube video provided by Dr. Springstead.

I checked the Stony Brook site and he isn’t listed on the roster of faculty in that department, nor is he listed as a visiting professor, adjunct professor or post-doc fellow in that department. And, there is no Morgellon’s Disease research project going on in any department of Stony Brook University.

Darrah is listed as a “volunteer” in the Department of Biochemistry and Cell Biology, according to their 2010 Newsletter.

Thanks to blogs devoted to Margollen’s Disease I learn that after the You Tube posting of his “research”, Darrah was banned from using any and all of the equipment at Stony Brook University...I guess they don’t want “bogus researchers” with “bogus University credentials” attributing their “bogus research results” to a “bogus research study” being conducted at the University on a “bogus disease”.

“The judge said ‘Morgellons’ 3 times”, quoth Dr. Springstead. Did the judge also state that the awarding of retroactive SSI and Medicare and the determination of her disability is based on Morgellon’s Disease? If so, I would hope that the good doctor, being an upstanding citizen, would notify Medicare that patient is not disabled, once research proves that it is an imaginary faux disease.

175. Vicki, Chief Assistant to the Assistant Chief
May 23, 2011



Lilady–

To be fair, that Morgellon’s is not a real disease doesn’t mean that this patient doesn’t have real, disabling symptoms. Nor should disability determination depend on the *claimant’s* medical knowledge.

176. lilady
May 23, 2011



Vicki, my point precisely about the patient’s diagnosis. The good doctor’s posting was very ambiguous but strongly inferred that the patient was entitled to SSI and Medicare based on a Morgellon’s diagnosis. I suspect that Dr. Springstead was at the administrative hearing to testify on behalf of the patient...he is a licensed orthopedist...because that is his area of expertise.

I merely pointed out certain facts about the You Tube video he provided...in lieu of actual medical citations.



177. Natalie
May 23, 2011

One late thought for Kelly, regarding allergies. I work in commercial real estate management and this is something that comes up quite a bit.

Commercial HVAC systems draw quite a bit more outside air than home systems, because office buildings are typically built more air-tight than homes. (One difference most people are familiar with is that the windows don't open in office buildings.)

The air in each zone is drawn from one piece of equipment, so it comes from the same spot every day. So the third floor in my building smells like deep frying every afternoon because it's fresh air draws from a spot immediately above the exhaust vents of a restaurant. It's possible that the fresh air intakes for your building are near a tree that flowers in spring or something else you're allergic to. Even if nothing is growing in the HVAC system it might still come in if they don't use fine enough filters. And depending on how sensitive you are, enough might get in even with very good filters.



178. lilady
May 23, 2011

@ Trisha Springstead: Why should we believe anything you post?

I visited your website:

espbotanicals.com

You are the founder of this company that markets magical skin products and anu water...which you report alleviates the symptoms of Morgellon's disease. You also run a MLM business through that site. You have a "Morgellons help" link which cannot be accessed from this country...hmm, run afoul of FDA regulations in the past?

I also saw your posting on the web blog:

What Are People Searching For-Morgellons-a mundane approach; it's a gem.

You are heavily into and devoted to woo medicine, especially the pseudoscience practiced by Hulda Clark. In your rather long, nonsensical posting you attribute Margollen's disease, cancer and every other disease/disorder to parasite infestations. Unfortunately nurses as well as medical doctors plunge into the rabbit hole.



179. herr doktor bimler
May 23, 2011

So if Morgellons is delusional why is it that the CDC investigation (thru kaiser) is yet to release the results?

The political pressure on the CDC, forcing them to conduct an investigation, was to find something real. If they have found something real then releasing the results would make everyone happy. The only incentive for sitting on the results is if they are embarrassingly negative, nothing there, complete waste of money.

I am no epidemiologist but I suspect that no-one in the medical establishment would be penalised for identifying a whole new disease.



180. Dangerous Bacon
May 23, 2011

A poster asked why, if “Morgellons” isn’t real, is the CDC taking so long to issue the report on its investigation? Interestingly, a number of purported “Morgellons” patients have argued that the delay indicates an impending whitewash and government plot to suppress evidence

Maybe we should just see what the report says.

Dr. Richard Springstead and Trisha Springstead RN have a letter to “EPA Florida and Washington” up on a Facebook page in which they denounce “Genocidal dispersants” used in the Gulf, claim people are “dropping like flies” as a result and demand “detox clinics” to treat them.

This is heavy stuff.

Is there good “detox” available for “Morgellons”?



181. lilady
May 23, 2011

If the CDC released the report earlier some conspiracy theorists “might” accuse the researchers of not doing an intensive investigation. If the CDC releases the report at a later date, those same individuals will accuse the researchers of finding real documentation, that they have reviewed and are “cooking” the data...hence the delay.

@ Dangerous Bacon: I'm sure Trisha Springstead has the perfect detox for Morgellon's available on her website (the "Morgellon's help" link that is unavailable in the United States).

I don't think we will be seeing re-posts by the Springsteads.



182. Carlton
May 24, 2011

In my area I am friends with 5 other Morgellons sufferers, I know of 12 in my state, I know of three in my county. Probably a better term would be Hyper toxicity. Which is the original disease that leads to the Morgellons. Morgellons might be a tag along like the Lyme. I talked to 2 Doctors in my state that know and treat people with this disease. Most of my comrades in this mess are nurses. I have met with one personally to go for testing.

I know of 2 people who went through the scabies, then dermatologist, then committed themselves to hospital ward for psychiatric evaluation. The drugs they gave did not stop any of the crawling or biting, but made them not care about the bugs and sores. Every single person at all the forums I belong too have done some or all that combination in their states or countrys they live in. I do not blame anyone who does not believe, but they need to show kindness.

I do appreciate those here who have talked the other side of the coin in kindness. It is sick to knock down a sick person even if you believe they are a basket case. The great majority of fellow sufferers do nothing but search and look for answers. So telling us to do our homework would have to fall back on your lap, because that is all we do. Do you?? We want to get well, you do not care one drop if we are well or right or wrong. You just get your jollies off by stabbing the sick.

Those who come here to defend us who are not sick and you take jabs at them. Did you do your home work?? NO.... You do not know how they got involved in this mess. Sure its okay to reasearch and find out if someone is in it for just the money or prestige, but you throw opinions on why someone is involved like a well used rag doll.

For me its okay if you really do not believe. Yes it makes it frustrating, but some of you can learn from others here to be nice about it and DO Your Own research. It takes alot of time to part the mire and find the truth. I am very slow computer wise and it took me a year to even decide I had low keys Morgellons. For the first four months I did not believe in Morgellons at all. It looked like a crazy conspiracy theory. It was by looking at the studies to know it was real, but the cause is still unknown so hence the conspiracy theroes of the how which makes it all look crazy.

Some day it will get solved and all the conspiracy theroes will die out and it will be medically treated. Maybe the CDC will have success with their findings, but maybe it will fail. I know of people who work for the CDC and some of them really care. Maybe the CDC will have to do other studies. I think most studies take years and retrys before the real findings are in. If any study was simple then why so many studies on one issue. Take Cancer for instance. Not the studies trying to cure it, but the first studies trying to find it and prove it. Wish I was smart enough to come up with a study that was hard to prove.

On the Aids storv I had earlier. I talked with one of the nurse friends who has Morøellons who worked with one of the Dr.s who studied Aids and she is going to help

On the other hand, I have evidence that one of the Dr.s son who help but Aids on the map. So I have not proved myself wrong yet. Still looking though.

For those who have this disease and get upset and post and leave. I do not blame them at all for a hit and run as it was said by someone. Sometimes while researching for the answer we come across things like this article and people commits and suddenly you need to put your findings in to show people but too sick to stick around. Remember I am almost well so I get bouts where I can conduct further on a post then someone who is really ill and has no energy. I am at a forum where 2 people had cancer. They said their cancer was easier to deal with then this disease.

I would rather fight cancer or diabetes then this awful disease. To those who are nice hear; Thank you for letting me sound off. For those who say mean things I wish I could give you a long hug.



183. Beamup
May 24, 2011

@ Carlton:

I don't think anybody here denies that you're suffering, or has any intention of minimizing that. (If they do, shame on them!)

The problem is that the label "Morgellons" is inaccurate, and in fact is harmful to you by diverting attention from finding the REAL problem causing your symptoms. A wrong diagnosis is worse than none.



184. lilady
May 24, 2011

@ Carlton: We "reserve" most of our "jabs" at people who are licensed physicians and nurses whose education and licensing is based on their knowledge of evidence-based science. (See my postings above directed toward the physician and nurse) They have "chosen" to discard the science and in the case of the nurse are making scads of money with a multi-level-marketing scheme by selling worthless creams and water to their marks/gullible naive people. (See my posting # 178)

I also deconstructed the You Tube video offered as evidence by the doctor (See my posting # 174).

Another poster here (Kelly) has some odd seasonal itching and we offered some very interesting advice and I shared my experiences with an odd H 2 histamine response. Kelly knows that she doesn't have Margellon disease.

Please don't not link "chronic" Lyme disease which has been proved through multiple studies to not exist in chronic stages. I worked as a public health nurse and contended with patients who were concerned about this (non)"chronic" disease. I also know of a physician whose license to practice medicine was revoked due to the

risks associated with the long term IV therapy, prescribed by him. Just type in license suspension or license revocation Lyme disease to see examples of doctors whose licenses have been suspended or revoked.

As I stated in an earlier post, I am sick and tired of the use of my tax dollars for scientific studies that debunk the junk science of “chronic” Lyme disease, vaccine safety...and now Morgellon’s disease. Precious limited resources and money that would be better used for research into cancer and diabetes and other “real” diseases and disorders.



185. TBruce
May 24, 2011

Take Cancer for instance. Not the studies trying to cure it, but the first studies trying to find it and prove it. Wish I was smart enough to come up with a study that was hard to prove.

Cancer was recognized, named and documented by [Hippocrates and the ancient Egyptians](#).

On the Aids story I had earlier. I talked with one of the nurse friends who has Morgellons who worked with one of the Dr.s who studied Aids and she is going to help me track down who it was that has the son who is friends with one of the Dr.s son who help but Aids on the map. So I have not proved myself wrong yet. Still looking though.

I think this would be classified as a [FOAF](#)



186. JayK
May 24, 2011

Delusions aren’t necessarily a negative thing, believing there are bugs and/or fibers of unknown origin could be an indication of something else medically wrong. If you’re afraid of the name *delusional parasitosis* then just admit it and move on.



187. Terrie
May 24, 2011

Ever notice how the believers react to the suggestion that a disorder has a psychological component with digs at the mentally ill? Words like “crazy,” “basket case,” and so on. With that kind of contempt for mental illness, no wonder they cling to a made up disease.

188. Ruth Lyons 
May 24, 2011


Morgellons is an infection by quantum dots and will only show by using lighting techniques for the artificial atom to gain and lose charge and blink as the electron falls back into it's hole. the color of the dot is directly related to it's size. soon, the scientists will have produced quantum dots that do not fall back into their hole and will appear as a flourosphore. this truth will be lost which is the end goal for those profitting from this technology. i'm told we are "acceptable risks". it would be more fitting to call this "illusion of parasitosis".
youtube: ruthlyons54.....and please all you hyenas out there.....tear me up with your knowledge!! the question is if 'you' are not infected by this crap, why do you invest so much emotion of judgement?

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May 24, 2011

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191. Beamup 
May 24, 2011

I call Poe on Ruth.


I mean, seriously. *An infection by quantum dots?* Hilarious.

192. Mu 
May 24, 2011

Ruth has her own forum on Lymebuster; she really believes the aliens infected us all via chemtrails of quantum dots.

193. Beamup 
May 24, 2011


Then she's seriously mentally disturbed and needs some real professional help, entirely independent of "Morgellons."

194. Dangerous Bacon 
May 24, 2011

Just ran across another Trisha Springstead web page in which she announces that the cause of Morgellons is Bt sprayed from planes.

If this is true I need to start worrying. Bt is *Bacillus thuringiensis*, used commonly by home/organic gardeners to control caterpillars. I often spray it to kill cabbage loopers on my Brussels sprouts plants. She also warns against GMO foods and "plane emissions" (chemtrails?). I guess there's no avoiding it, whatever it is.


This is peripheral, but while Googling I found a reference to a DAN! doctor whose bio mentions that he has a "special fondness for bison". For some reason this reminded me of the Tom Lehrer remark about the man who practiced animal husbandry "until they caught him at it one day". 😊

195. The Analyst 
May 24, 2011

The political pressure on the CDC, forcing them to conduct an investigation, was to find something real. If they have found something real then releasing the results would make everyone happy. The only incentive for sitting on the results is if they are embarrassingly negative, nothing there, complete waste of money.

Because if you look at history, this is what usually happens. Right?

Nah, the CDC is a reputable organization and throughout history has never try to cover ANYTHING up. 😊

196. the bug guy 
May 24, 2011

Dangerous Bacon, it's even funnier than that. *B.t.* is a very common and widespread soil bacteria.

197. lilady 
May 24, 2011

Ruth Lyons also posted on:

T.T.T.W.T. & N.B.T.T. Margollens Disease

This blog contains the ramblings of its author Andy Coyne; see his petitions to Tony Blair and others about some sort of worldwide conspiracy.

Ruth Lyons comment on this blog is at # 33.

RI is (supposed to be) a blog about science and look at all the crazies that are drawn to it...downright scary.



198. herr doktor bimler 

May 24, 2011

The Analyst @195 — do you still hold that “Anon’s post @149 describes the situation well”? Especially Anon’s repetition of the bizarre idea that Alzheimer’s syndrome, Parkinsons’ Disease and ALS were not seen as legitimate diseases until the 1980s, while MS was regarded as malingering?

199. herr doktor bimler 

May 24, 2011


Nah, the CDC is a reputable organization and throughout history has never try to cover ANYTHING up.

Now I’m genuinely interested. I googled for “CDC + cover-up” but the hits were dominated by shrieking conspiracy-theory sites and I was loath to descend into the whirlpool of madness. What are the non-factitious, now-accepted diseases that you accuse the CDC of knowing about but attempting to conceal?

200. Antaeus Feldspar 

May 24, 2011

Is there a reason my comment from, I believe it was May 23, is still stuck in moderation? It didn’t have any links or bad words that I could tell, so I was surprised it was held up in the first place.


201. The Analyst 

May 25, 2011

Now I’m genuinely interested. I googled for “CDC + cover-up” but the hits were dominated by shrieking conspiracy-theory sites and I was loath to descend into the whirlpool of madness. What are the non-factitious, now-accepted diseases that you accuse the CDC of knowing about but attempting to conceal?

Perhaps you should have looked at the CDC’s website?

<http://www.cdc.gov/tuskegee/timeline.htm>


202. herr doktor bimler 
May 25, 2011

Unless you are telling me that the CDC pretended that there is *no such disease* as syphilis, I can't see the relevance to the status of Morgellons.

203. Narad 
May 25, 2011


If this is true I need to start worrying. Bt is Bacillus thuringiensis, used commonly by home/organic gardeners to control caterpillars.

I'm pretty sure I have a photocopy of an article from the late, pretty-crunchy *Sinsemilla Tips* highly touting BT around here somewhere.

204. Doc Rocketscience 
May 25, 2011

TA, the most appalling thing about the Tuskegee Study wasn't that it was covered up, but rather that it was done out in the open *and no one cared*.

Nice try, though.

205. The Analyst 
May 25, 2011

Unless you are telling me that the CDC pretended that there is no such disease as syphilis, I can't see the relevance to the status of Morgellons.

Each story has a different tale.

Well, CFS was "mass hysteria".

When they realized this “mass hysteria” wasn’t going to randomly disappear, they just kept renaming it and finally gave it an acronym that does not describe the condition so psychiatrists and psychologists could beat it with their psychiatric stick. Now there are doctors that turn this legitimate condition it as a wastebasket diagnosis partly (or is it more accurate to say mostly?) because of CDC misinformation.

AIDS was called psychological and “hysteria” , but that didn’t last long since people saw other people and their friends dying en masse. Then the folks claiming hysteria developed “AIDS hysteria” themselves. Crazy!

But go on. Have faith and trust in the CDC. They have really shown their competence over the years.

206. Doc Rocketscience
May 25, 2011



TA, what I’m sayng is that Orac has already [dealt with](#) what you’re trying to pull. So that’s [2 crank gambits](#) from you in one thread.

207. herr doktor bimler
May 25, 2011



AIDS was called psychological and “hysteria”

Are you **trying** to be completely wrong about everything or does it come naturally?

208. herr doktor bimler
May 25, 2011



SRSly, Analyst, if you think that the CDC were wont to dismiss the symptoms of Karposi’s sarcoma, pneumocystis pneumonia, immunodeficiency and death as *psychological and “hysteria”*, then I can only conclude that you are relying over-much on whale.to as a source of information.

IIRC, the role of the CDC in Chronic Fatigue Syndrome was to investigate it after the Lake Tahoe cases, to decide that Epstein-Barr virus probably wasn’t involved, and to propose a working definition. Then they provided the Fukuda diagnostic criteria, and refuted the HTLV-II retrovirus theory. I see no conspiracy here to conceal a disease (for whatever reason).

To suggest that the CDC *tailored* those diagnostic criteria “so psychiatrists and psychologists could beat [CFS] with their psychiatric stick” is again suggestive of the “*whale.to*” theory.

whale.to theory.



209. PatchUp
May 25, 2011

Oh ANALyst, you keep bringing the laughs. GRIDS was never thought to be psychological, not at any point in it's history. CFS *is* a psych disorder, if it wasn't then woo scams like the Lightning Process wouldn't 'cure' it. It's just like Morg, pure somatisation, but just like the CFS/ME/fibro brigade, you're so invested in your ableist rhetoric against people with mental illnesses that you cannot accept that your problem is psychiatric in origin too, can't be bn established psych condition that's easily treated, no it must be a government conspiracy or rogue nanobots.

Please stop regurgitating the “X was considered psychological until it wasn't!” nonsense that you've picked up from your morgieboards, because it just isn't true. This is a place of science, where citations are needed, where you can't just claim something like “So the guy who discovered AIDS says Morgellons Is real” and get away with it.



210. TBruce
May 25, 2011

AIDS was called psychological and “hysteria” , but that didn't last long since people saw other people and their friends dying en masse. Then the folks claiming hysteria developed “AIDS hysteria” themselves. Crazy!

Yes, you are.



211. The Analyst
May 25, 2011

SRSly, Analyst, if you think that the CDC were wont to dismiss the symptoms of Karposi's sarcoma, pneumocystis pneumonia, immunodeficiency and death as psychological and “hysteria”, then I can only conclude that you are relying over-much on whale.to as a source of information.

I don't even know what whale.to is. I typed it in my search bar, and I guess it's a website.

The fact is, the CDC could not cover up AIDS even if they wanted to. Even people who bought into the early media blasts realized how real it was once their friends

started dying.

If AIDS didn't kill people, and people weren't afraid of the disease killing them as well, you would have not seen such a quick response from the science community.

And the CDC has done nothing good for CFS, but I guess we can be glad that the state of affairs is not as bad as the UK NHS.

And no, the CDC initially dismissed CDC as “mass hysteria” after the Tahoe outbreak, and the doctors that diagnosed this “yuppie flu” were called quacks.

Considering the CDC ignored biological evidence from doctors and experts who dealt with the condition. They were told there was not a single biomarker that could definitively diagnosis a case CFS, and they twisted that information it into this (which is still on their website):

There's no diagnostic laboratory test or biomarker for CFS.

This is intentionally misleading. But I guess they are right. There are no biomarkers. There are many biomarkers. Based on the information they have/had, you don't think this is misleading by any means?

At least Japan got it right in 1987. They recognized the low natural killer cells biomarkers, and called it Low Natural Killer Syndrome (LNKS). But what did we do here? We said, meh, that's probably another disease *not related* to ME/CFS.

Case in point: If you don't think the CDC intentionally spreads misinformation and pulling a Tuskegee is a thing of the past and nothing like it will never happen again (wishful thinking), you must at least agree that they have proved their incompetency over the years. No?



212. The Analyst
May 25, 2011

Excuse my couple typos. In one of them, I said:

There are no biomarkers. There are many biomarkers.

What I meant to say was:

There is no single biomarker. There are many.



213. JayK
May 25, 2011

@TA: A DOI/PMID would have been more valuable than a correction.



214. Carlton
May 25, 2011

Hi everyone

Emotionally too invested. I think everyone here on both sides of the coin are to Emotionally invested. So that is not a good reason to excuse someones ventings on the subject. I am not afraid of mental illness. I wish it were mental illness so I could get well. I know 1 person who is very mentally ill on heavy perscription meds and still has this along with the varity of folks owning this disease. Maybe Hyper Toxcity is the real term we should be using. I lean that way, but see that Morgellons also is real and believe Hyper Toxicity leads to Morgellons. I agree we would get a tiny bit further then others by never using the Morgellons route, but watching others most on other forums talk like they avoid using those words and still get no help.

The only times the majority of them use terms like Morgellons is when they are researching on line and come across article like this or in the forums themselves for support. For those who report this or that causes Morgellons. Well it does add and help bring about the disease. What has not been discovered is what actually happens to cause the illness to completely happen. They do know some of the begaining stages. Like the Chronic fatigue along with intestinal problems along with different other syptoms. Long syptom list so each infected person has some to all depending.

Once a person detox/Methalation pathways break down enough to stop detoxing every day chemicals that a normal body handles. Thats when all the trouble starts. What makes the Methalation pathway break down?? Just my opinion but for me I see it being like a allergy. Some people are more prone to allergies yet every living being can at some point become a sufferer of allergies. So enough pollutions in our air, water, food will cause some people to break down quicker. So yes we all are in trouble and exposed and cleaning things up would be wise, but that does not mean you will ever get this awful disease. But just because your body will resist does not mean it has its work cut out and should be ignored while the situation gets worse bringing down others around you.

Also there is enough pollutions now to make more and more peoples systems break down opening the door for uncommen disease. Delusional diagnosis has been used frivously for other disease. Delusions of Paristosis is a rare disorder. Way to many are reporting this diagnosis and acutally believe it a wroung diagnosis. Are there a few in there that really are delusional. Maybe or probably. But rarely just as the disorder is rare. There are vetenarians who are seeing this in peoples pets. Maybe a reader who knows about this could post some links. If I remember right over 19,000 people who have been diagnosed and delusional parisitosis are registerd with the CDC in the US for Morgellons. Thats too many for a rare disorder. If I remember there really is over 26,000. The news was saying around 19,000 but the CDC site might have a higher number. Have to go check that all out now to refresh my memory.

When comparing research those who have tested their patients. They do have alot in common. They have no intestinal flori, they all test positive for heavy metal toxcity, and all share in common a toxic levels of bacteria and fungus. I know I am missing some of the shared finding here. Off the top of my head is what I am putting here.

I do agree with those that it is not one man made disaster that is causing the disease of Hyper Toxicity. I firmly believe its layers of junk in our environment that is causing more and more problems in folks and it's opened the door for Hyper Toxicity to take place in large numbers and leading to Morgellons.

Also though when folks who volunteered to clean up the oil spill and are now producing the lesions and symptoms of the Hyper Toxicity prove large doses of pollutants can make one ill with this fast. Do they have Morgellons. Probably not. Do they have the Hyper toxicity that we had when we first became ill. Probably. Wish they could get those folks to be in the study for better comparison.

(Just ran across another Trisha Springstead web page in which she announces that the cause of Morgellons is Bt sprayed from planes.)

DBeacon I tried to find your article. I did find a post saying it could be the cause of many problems and she posted someone else's article backed by fact on what they wrote. I did not see anywhere saying that she claims it causes Morgellons. Could you please link me to the article you read. I do know that researchers have found that people who can not detox probably have toxic levels of the Bt sprayed from planes. That does not mean it caused the disease, but a component to help things produce the disease along with the Hyper Toxicity and whatever else one gains when ill with this. Some it is Lyme, some it is Cancer, and or tumors. A lot of us start producing fatty tumors and had no trouble with those before until coming down with symptoms for the Hyper Toxicity.

For me personally I was the type that never got sick. Always had an endless supply of energy. Frustrating because no one could keep up with me. I had a cast iron stomach and could eat anything. I would catch a slight cold once every 2 to 4 years. rarely got the flu, but when I did it usually only lasted a couple of days. Then over a six year period all that changed. Chronic fatigue along with intestinal problems along with colds and flues. Within a few years of going downhill with that I started getting white spots and freckles heavily on the skin along with fatty tumors and slow healing sores. Even my office surgery for the tumors took a year to heal. I rarely go to the Doctor. I hate it. So was even less endeared once I did go to Dr.s for the first outbreak of some sort of bug which was about six or more years when symptoms started. I had no clue what it was but knew I could pick them off the body and put them into zip locks and then to the doctor. He thought it was one thing and treated me for Scabies two times which worked while using, but then came back worse after each treatment. That's when I hit the net looking for my own answers. Still then thought it was just a bug but thought the Doc was not treating for the right one. I even considered a parasite. I also looked into high blood pressure symptoms and other nerve affecting disease as each thing I researched came to the conclusion as not being the right one. During that research time the Doc gave up and diagnosed me as Delusions of Parasitosis. After researching that I knew that was not it. I have been researching for two years before coming to some very slow decisions on what is going on.

What I did do was at all the forums found with same symptoms; the person whose symptoms and situation closely resembled mine and made sure they were completely well and started following their path to recovery. So far that is working. Not completely well yet, but a long way from the hell it used to be. I really believe I will get the rest of the way well and that my left over bit to conquer (sp) is the broken down Methylation pathway.



215. herr doktor bimler
May 25, 2011

The Analyst, obviously I don't agree with your comments, but I do appreciate the fact that you are replying to queries. Thank you for that.



216. Antaeus Feldspar

May 25, 2011

The fact is, the CDC could not cover up AIDS even if they wanted to. Even people who bought into the early media blasts realized how real it was once their friends started dying.

Then it seems that AIDS is nothing more than a red herring you're dragging across the trail, to obscure the fact that the claim *you* said you could back up, of the CDC 'covering up' diseases, you can't in fact back up at all.

"That guy! He's so dumb! He's so dumb, you should hear what he answered when someone asked him what two plus two was! He answered five!!"

"Uh, no, he didn't. I was there when he was asked that question, and he didn't say five. He said four, very clearly."

"Pffft. Like he actually should be praised for getting such an obvious question right? I mean, who *doesn't* know the answer to two plus two??"

If you can back up your claim, then go ahead and back it up. Don't pretend you can back it up and then change the subject, hoping no one will notice. You'll only embarrass yourself that way.



217. Dangerous Bacon

May 25, 2011

Got another line on the government's Morgellons conspiracy today.

I found a product being sold in a garden center (ostensibly for promoting beneficial soil microbiology) that according to the label contains 8 million colony-forming units of Bt per ml!

That's 320 million CFUs per bottle!! The government doesn't have to spray it from planes, it has America's gardeners doing its dirty work!!!

We are unwitting pawns in this epidemic!!!



218. misty

June 19, 2011

Dear All

Dear all,

Either something called Morgellons Syndrome exists objectively or it does not. If it does, and if it is a new clinical epiphenomenon, and is one that causes a great deal of suffering, and which furthermore seems to be spreading throughout the world, it matters.

If, as is hypothesised by some, it is the result of a laboratory experiment, (C3 level or above), being accidentally released into the environment, it matters.

If it is a slow growing infection (comprised of cloned bacteria and protozoa, inter alia), it matters. Apparently, it is only after some years, (absent therapeutic intervention), that myiasis may be visible.

According to one scientist and doctor, the fibers attach themselves and grow along the peripheral nerves, (initially).

Certainly, there would seem to be a preponderance of bizarre cranial nerve disruption reported. Itch is the least of the problems, in some ways.

Look, you medics enjoy, (and deserve), what the classical philosophers would term eudaimonia. You've just eaten a good dinner, drank some first class wine, all manner of things are and shall be well.

Please remember why, as a child, you decided to go into medicine. Medical school was hard. You may still dream that you failed. You passed. Please do not fail the sick whose illness cannot be elicited by normal tests.

Check the skin and scalp out for chitin. You would need the substance and the uv light.

PCR for the protozoa.

Antibiotics often apparently help in the suppression.

If you do not help, charlatans will manufacture and prescribe possibly deadly potions.

Lymebusters may have given you a sore head.

Check out what is happening on Morgellons Disease Research, and weep bitter tears.



219. Narad
June 19, 2011

Either something called Morgellons Syndrome exists objectively or it does not. If it does, and if it is a new clinical epiphenomenon, and is one that causes a great deal of suffering, and which furthermore seems to be spreading throughout the world, it matters.

Tony has a girlfriend?

220.  novalox
June 19, 2011

@misty

Citations for your assertions, please.

Also, necromancy much?

221.  Misty
June 20, 2011

Dear Narad and novalox, and All,

Someone by the name of Gordon Stamp is quite openly advertising the unlicensed manufacturing and prescribing of a potion. It is sold in powder form, reconstituted by water.

Morgellons Disease Research site.

Someone called 'Posey' is applying this to her skin, and she says he (Gordon)lost his nursing license in 2009, in MN. The record of the nursing board is on the internet.

This potion costs \$200 a pound. One pound of the powder lasts 3 months.

Apparently 300 desperate individuals are buying the powder.

Hitherto, Gordon has refused to state the ingredients.

Posey now (very recently) states it is made up of 'enzymes'.

Check out the totality of what Vitaly Citovsky (Professor at Stony Brook University, New York), states he found in the lesions of such patients, (over and above the *aerobacterium elicited by PCR*)

agrobacterium created by PCR).

Check out what Cliff Mickelson and attendant scientist openly declared, (but warned sufferers not to apply), would dissolve the callus. This is a rock hard substance, mimicking human skin, underneath which the fibers and insect life grows. (This is all honestly true). As doctors, you could ‘feel’ the hard skin. Please be careful not to ‘catch’ this condition.

For the moment, think just what this powder may be. It is having ‘amazing’ effects on the skin. I consider it to be highly dangerous.

I am from a medical family.

I have usually found surgeons decisive and intelligent, and quick to act.

I have furthermore met both physicians and surgeons who are willing to believe that the highly unlikely may in fact perhaps be true.

The springtails have been found, (among other things), by Professor Omar Amin. He attributes the aetiology to dental work, although he may be partially wrong about that. He calls this de novo condition neurocutaneous syndrome, and started writing about it circa 2000.

Those sick with this condition seem to think buying the aforementioned powder is a logical step because the doctors refuse to help.

I do not think it is logical because, although the torment is dreadful, a person will not die from it.

Although, one of Omar Amin’s patients did die, but he was rescued from a homeless and vagrant condition.

It matters if this condition is contagious.

One surgeon, so desperate because his wife has ‘lesions’ openly contacted a site in which a scientist (apparently) engaged in whistleblowing about the lab.

Actually, I do not see what else would explain it. If true, it is not going to go away.

Please, grasp the nettle, and really examine the patients with the objective tests that will elicit the problem.

Any other action will mean that chaos is come again.

Thanks for the opportunity to share my side of things.

222. Joe Keleher



August 19, 2011

I am one among few who have recovered from the Morgellons Symptoms (see http://members.cox.net/llyee2/NCS_article_by_joe.pdf). One thing is for certain. If you had these symptoms you would not be calling it delusional. It is more horrific than any Steven King novel and sickening that anyone would take pokes at those still suffering. Of the sufferers I have communicated with, over half have considered suicide. In reviewing the historic documentation of this symptoms set, there appears to be connections to mercury exposure. I believe the cause and progression of symptoms is due to the presence of internal chemistry (such as dental adhesive documented in connection to these symptoms by Dr. Omar Amin- 2001 through present as well as meth, cocaine and other agents) causing a change from inorganic mercury (such as found in amalgam fillings) to organic mercury; organic can and does move beyond the blood/brain barrier while inorganic does not. The increase of mercury in the CNS may cause these symptoms. Mercury in the CNS of a mother is passed to the unborn at levels of 5 to 10 times the rate (and no doubt the reason the earliest cases in Languedoc region of France document it as a condition found in children and newborn).The overlap between symptoms of Morgellons, meth addicts, and medicinal mercury (documented pre-1940)is undeniable. People sick with this are truly sick. Let's try to help by finding answers instead of adding to the confusion. Hopeful, Joe Keleher



223. herr doktor bimler
August 19, 2011

The overlap between symptoms of Morgellons, meth addicts, and medicinal mercury (documented pre-1940)is undeniable

And yet I deny it!



224. Antaeus Feldspar
August 20, 2011

One thing is for certain. If you had these symptoms you would not be calling it delusional.


Which proves nothing, however. A person who is having delusions does not recognize them as delusions, practically by definition.

As for the connection between Morgellons and those often experienced by addicts of meth, cocaine, etc., delusional parasitosis is a well-known symptom of such addictions (the famous “cocaine bugs.”) Calling attention to the undeniable similarities between the symptoms of Morgellons and those of a population prone to delusional parasitosis doesn't do much to rebut the mainstream view that Morgellons *is* delusional parasitosis.




225. ryan dacosse
September 1, 2011

Your an over educated asshole who just like to here himself talk. howe can you state these OPINIONS so matter of fact? have you ever met someone with morgellons.. looked them in the eye? studded whats coming out under a microscope? People like you make it seem hopeless. Fuck you.

226. [Joe Keleher](#) 
September 7, 2011

See <http://morgellonspgpr.wordpress.com/2009/11/02/morgellons-rethinking-delusion-of-parasitosis/> . It might interest some. Thanks, Joe

227. [W. Kevin Vicklund](#) 
September 7, 2011

For those that want the summary of Joe’s link, it’s the usual misunderstanding of what the “Delusion” in Delusion of Parasitosis is referring to (hint: the symptoms are real, the supposed cause is the delusion). Nothing new.

228. Andrew 
September 7, 2011

Rest assured, Ryan, that no one will ever accuse you of being over-educated. If you cared about people suffering from “Morgellons” you’d try to keep them from being defrauded by scam artists and quacks.

229. Loretta 
September 16, 2011


I see your site meter below Wow! the subject of Morgellons seems to be very popular. But after scanning your site, I’ve decided you don’t know what you are talking about. My sister has Morgellons and it has made her life a living HELL. I can think of a disease that was dismissed before, AIDS. Or how about the testing of syphilis on our men or the testing of nuclear weapons with our soldiers at ground zero so they would know the effects on them. Or microbes to eat oil (Oh look, something new out of the depths of the Gulf of Mexico. Scientist didn’t know this existed either, do they tell the microbes “you are a delusion”.)

http://www.msnbc.msn.com/id/38834330/ns/disaster_in_the_gulf/t/new-microbe-discovered-eating-gulf-oil-spill/

You can’t tell me that all things have been discovered and that what we think we know is all there is to know.

People use to think the earth was flat too. Just saving until someone actualv researches this with an open mind. it is vour delusion that it don’t exist. There are so

many things we don't even know about. How can you tell all these people it is just in their heads? I certainly hope you or your loved ones never go thru this. I don't know what it is from but I do know my sister is not delusional.

230. [Anton P. Nym](#) 
September 16, 2011

“People use to think the earth was flat too.”


No, they didn't... not since the days of Ancient Greece, anyway.

“How can you tell all these people it is just in their heads?”

We're not. The symptoms are real... it's the supposed cause that's the delusion, just as there aren't really spiders crawling under an addict's skin. (Not that “Morgellons” sufferers are suffering withdrawal... they're just, if “just” isn't too much an understatement, experiencing a similar malfunction in their nerves and are similarly looking for an external cause. The supposed parasites discovered all seem to be nylon fibres or similar textile remnants when studied by most experts.)

I'd also object that plenty of open-minded people *have* taken a look and seen no cryptozootic parasites on sufferers... and I think some of them would justifiably take offense at being deemed closed-minded.

— Steve

231. [Mephistopheles O'Brien](#) 
September 16, 2011

Loretta,

Please go back and re-read. I don't think anyone has argued that your sister does not have physical symptoms. I don't think anyone has argued that her symptoms may not be severe. However, there is negligible evidence that Morgellons is caused by an actual parasite infestation and significant evidence that there are no parasites present. Someone who tells you otherwise either a) has information that needs to be shared widely; b) is lying; or c) is deluded.

If you have reliable evidence on the cause of Morgellons please share.



232. Narad 
September 16, 2011

I don't know what it is from but I do know my sister is not delusional.

Your sister doesn't happen to look exactly the same as you do and always wear your clothes, does she?

233. TBruce 
September 16, 2011

Microbiologists and pathologists have been waiting for identification of the “Morgellons parasite”. I suspect that we will have a very long wait.

234. herbi 
September 16, 2011

so do 2 year old suffer from delusions then? I guess so as that seems to be the first reported case of a 2 year growing fibers under the babies skin.

i'm not privy to alot of the conjecture online but i just read an article about these subcutaneous fibers being resistant to heat to 1800 degrees and do not melt. I don't know of any clothing fiber resistant to that high of a temperature. these fibers are also found internally. perhaps some how mutated or the body replicated them in the organs. (this was from a case I read online from a 57 year old lady.. fibers removed from her body withstood heat to 1800degrees and also removed from internal organs).

I'm not a medical professional. maybe i read it wrong. but to me, i believe it. i do not thinkm its a delusion. it seems way to man made. it seems very similar to star jelly. (this jelly that rained from the sky in the late 80s and still today). yea i know, it sounds crazy but it happened.. these star jellies are made up of cellulose and other organic material. they also found fibers that coincidentally look exactly like some of these fibers from Morgellons under a microscope.

who knows tho. people are suffering. that's all i care about. I will never ever tell someone its all in their heads. i know the article is not saying they are crazy but some delusion is creating these lesions. yea its possible but i find it hard to believe that a 2 year old can manifest these symptoms? also the people who suffer from it seem normal and mentally sound. who knows though.

man has done some great things. but we've done some awful things. everything man has done has come at a cost of something.. even the most beautiful things man has created has had some form of negative impact in some way.

like Lyme disease mysteriously appeared out of no where in the early 80s across from Plum Island on the long Island sound in CT. I too feel that Morgellons is man

made too. It is way too coincidental that a Nazi scientist working at plum island in the 1960s using ticks to develop bio weapons to transmit disease – and for lyme disease to all of a sudden appear a decade later just across the long island sound to where this “weapon” was created. to have people growing these polyethelene silicon fibers sounds all too man made to me!

furthermore time and time again these fibers have been tested and still can not determine what the cause of them are. so all of a sudden the people who suffer from this delusion, also only where red, black or blue clothing? b/c as you state its the clothing fibers that enter the lesion and skin grows around and over it. this doesn't make sense that the only fibers you typically see are of these colors. yea black and blue are common clothing colors but then we should also see ALL colors of clothing in these fibers. and aagain, clothing fibers will burn. these fibers are silicone or polyethelene resistant to temperatures above 1800 degrees!

now maybe some of these cases are delusions. but I think most are a clear sign of a new disease unknown to man. who knows, maybe all the additives we add to our food, all the chemicals and preservatives used our body now tries to grow them itself. maybe our dna has changed with all the chemicals we encounter day in and day out..



235. [Joe Keleher](#)
September 17, 2011

“For those that want the summary of Joe’s link, it’s the usual misunderstanding of what the “Delusion” in Delusion of Parasitosis is referring to (hint: the symptoms are real, the supposed cause is the delusion). Nothing new.”

Kevin, You seem to know much about something, but I’m not quite certain what that something is. It certainly isn’t the article I wrote “Rethinking DOP”. I understand what the delusion in DOP stands for. As I believe the cause of Morgellons Symptoms relates to toxicity, I certainly don’t present, “the supposed cause is the delusion”.


You’re welcome to interpret more of what I’ve written on the subject of Morgellons Disease at: http://members.cox.net/lyee2/NCS_article_by_joe.pdf (my personal acct of having symptom and recovery) or <http://morgellonspgpr.wordpress.com/category/joseph-keleher/> (several pieces I’ve written including DOP related) or visit my blog: morgellonsjoe.blogspot.com (hoping to assist those who believe Morgellons is associated with toxicity).

Thanks, Joe



236. Patrice
December 11, 2011

I have this problem for 3 years and half, after 3 years of research, I assume it’s Lyme with babesiosis and chlamedya pneumonia, if there is additionnal parasite it’s because of lyme disease. What help me the most is salt and vit C & D. Salt doesn’t cure a DOP so those who think it’s DOP are really wrong or they approve that this problem has been elaborated in a laboratorv.


237. [Prometheus](#) 
December 11, 2011

Patrice (#236):

*“What help [sic] me the most is salt and vit C & D. **Salt doesn’t cure a DOP [delusion of parisitosis]** so those who think it’s DOP are really wrong or they approuve [sic] that this problem has been elaborated in a laboratory [???.]” [emphasis added]*

The *first* thing that came to me when I read this passage was “placebo”. Does anyone doubt that a placebo (like salt and a few vitamins) would “treat” a misinterpretation of physical symptoms?


Prometheus

238. [erika dahlgren](#) 
December 17, 2011

Always the same story when a new disease is found. Did’t the doctors think that ADHD also was something just made up or a psychological illness?

All i can say is that my mother who have lived with this morgellon disease for 10 years is not insane...this is a real problem and where it comes from? Maby from chemitrail.

/Sweden

239. [Mephistopheles O'Brien](#) 
December 17, 2011

erika dahlgren – I don’t doubt your mother experiences symptoms. If you have some sort of evidence showing that the cause is parasitic, chemical, or what have you, please share.

240. [Prometheus](#)

December 17, 2011

Erika Dahlgren (#238):

“...this is a real problem and where it comes from? Maby from chemitrail.”

A perfect example of Poe’s Law – or maybe someone who’s trying to spoof the Morgellons disease proponents. Or it could be an example of crank magnetism – people who are gullible enough to believe in “chemtrails” shouldn’t have any difficulty believing in Morgellons.

Prometheus

241. [Kit](#)

January 9, 2012

i have morgellon’s. Until you have this .. you have no clue of the pain associated with the daily struggle. The skin condition doesn’t come from itching. The sores come 1st from the bites more like open wounds then the itching is secondary. Blood stains on my clothes from the bites not from the itching. Long hairs tiny hairs that aren’t yours placed where eyelashes fall out where your hairs fall out on your head or any other place on your body. Find it hysterical that dr.’s always say it’s psychological when they can’t figure it out. Just say “we don’t know” Anybody who knows of this disease knows it’s not a parasite it’s an systematic autoimmune disease & the sores are just a symptom there are over 100’s of diff symptoms. How can a study be done on just the skin when nothing else was brought into the mix? Nurses, Lawyers, even other Dr’s who have this disease all of the sudden just like that became DOP right? How is it entire families get it at the same time? People who are respected in their professions who then can’t function from the many other symptoms. There aren’t parasites there are fibers. Just because it’s newly discovered & you don’t have to live with it doesn’t mean it’s not real.... it just means “you don’t know”

242. [Kit](#)

January 9, 2012

i have morgellon’s. Until you have this .. you have no clue of the pain associated with the daily struggle. The skin condition doesn’t come from itching. The sores come 1st from the bites more like open wounds then the itching is secondary. Blood stains on my clothes from the bites not from the itching. Long hairs tiny hairs that aren’t yours placed where eyelashes fall out where your hairs fall out on your head or any other place on your body. Find it hysterical that dr.’s always say it’s psychological when they can’t figure it out. Just say “we don’t know” Anybody who knows of this disease knows it’s not a parasite it’s an systematic autoimmune disease & the sores are just a svmptom there are over 100’s of diff svmptoms. How can a study be done on iust the skin when nothing else was brought into the mix?

because of the cases are just a symptom there are over 100's of other symptoms. How can a study be done on just the skin when nothing else was brought into the mind. Nurses, Lawyers, even other Dr's who have this disease all of the sudden just like that became DOP right? How is it entire families get it at the same time? People who are respected in their professions who then can't function from the many other symptoms. There aren't parasites there are fibers. Just because it's newly discovered & you don't have to live with it doesn't mean it's not real.... it just means "you don't know"



243. Kit

January 9, 2012

Ummm check this out I stand corrected apparently there IS an actual parasite they have identified one Morgellon's parasite found ... seems it's beyond what a typical microscope could actually view... go figure!

<http://morgellonsresearchgroup.com/significant-finding-update/> think you need to apologize to those whom you said were DOP...afterall now your theory is blown out of the water! Thank goodness for people who actually look to find an answer rather than those trying to disprove what actually exists....



244. Antaeus Feldspar

January 9, 2012

Kit, even if the evidence at that page was exactly as portrayed on the page (not something we can take for granted) and even if the "organism" there was indeed a previously unknown parasite (not something we can assume) ... it wouldn't mean that there were no cases of delusional parasitosis. I know, I know, it's not what you want to hear, but it's still there.



245. Narad

January 9, 2012

seems it's beyond what a typical microscope could actually view... go figure!

150x doesn't exactly seem to be beyond the capabilities of a typical microscope. Go figure.



246. ArtK

January 9, 2012

Considering that the poster at that link was looking for "... a connection with "fallout" from the aerial persistent contrails, by then being called Chemtrails", we probably need to take the rest of the content with a grain of salt — while wearing our tinfoil hats

probably need to take the rest of the content from a grain of salt. I'm not wearing out either hand.

The “cocoon” looks like lint to me.



247. [W. Kevin Vicklund](#)
January 9, 2012

Yep, looks like lint as seen under a normal microscope.



248. [Science Mom](#)
January 9, 2012

Ummm check this out I stand corrected apparently there IS an actual parasite they have identified one Morgellon’s parasite found ... seems it’s beyond what a typical microscope could actually view... go figure!

That’s what my children use for a play microscope...go figure!



249. [TBruce](#)
January 9, 2012

I’m not impressed by this “parasite”. The fibers look like they came from fabric i.e. lint. The “parasite” looks to me like a seed. There is a vague resemblance to a larval arthropod, but there isn’t the segmentation I would expect. So which is more likely, an animal anatomically unique and not known to science, or a tiny seed caught up in a ball of lint?



250. [LW](#)
January 9, 2012

Kit, paragraphs are your friend. It’s hard to read a wall of text like that. But here are some comments on your comment @244:

The skin condition doesn’t come from itching. The sores come 1st from the bites more like open wounds then the itching is secondary. Blood stains on my clothes from the bites not from the itching.

So, this is a true parasite situation; something is actually biting you severely enough to draw blood.

Long hairs tiny hairs that aren't yours placed where eyelashes fall out where your hairs fall out on your head or any other place on your body.

Punctuation is also your friend. I'm not entirely certain what this series of words means, except maybe that your own hair and eyelashes fall out but in examining the fallen hairs, you find additional hairs, some long and some "tiny" that don't belong to you.

Kit, please think seriously about this. Is it your contention that the parasites that bite you have *long hair*? Because any parasite big enough to have *long hair* is definitely big enough to see.

Find it hysterical that dr.'s always say it's psychological when they can't figure it out. Just say "we don't know"

If you tell a doctor that you have parasites big enough to have long hair and to produce bites like "open wounds", but which are invisible to the naked eye ... do you not see why a doctor would doubt the existence of these parasites?

Anybody who knows of this disease knows it's not a parasite it's an systematic autoimmune disease & the sores are just a symptom there are over 100's of diff symptoms. How can a study be done on just the skin when nothing else was brought into the mix?

But — wait — how can an autoimmune disease produce *bites*? Or *long hairs*? If you tell a doctor first about the bites and long hairs, and then about your autoimmune disease, do you not see that the doctor is going to doubt your interpretation of your symptoms?

Nurses, Lawyers, even other Dr's who have this disease all of the sudden just like that became DOP right? How is it entire families get it at the same time?

How could they all of a sudden develop an autoimmune disease? So far as I know, delusions are more contagious than autoimmune diseases.

There aren't parasites there are fibers.

Do the fibers bite? Do they turn into long hairs? Are they generated by the body as part of the autoimmune response? What is their connection to the bites, long hairs, and autoimmune disease?

Please, Kit, look at your own statements and try to put them together. Because I can't.



251. evilDoug 
January 9, 2012

Ooooh! Woo with pikshurs!
I think that specimen is *Detrius umbilicus*.

I guess Larry got to “process” the sample because he has a microscope. Now I admit that *my* stereo ‘scope has a max mag of only 60, but I have lenses for up to 1500x for my compound microscope. Maybe I should volunteer. Maybe he should have included some RBCs to give Kit a sense of scale.

That thing certainly looks like a seed to me. The left end in the first image looks a lot like a hilum (“scar” from a seed stalk). Everything else looks like ordinary textile fibres of assorted types, and of colors unknown in nature.


There’s a red one
And a blue one
And a green one
And a yellow one ...

Note what look like yarns (threads) of a fabric in the background of the first image.

I would expect any sort of “cocoon” to show much greater ordering than the ball of fluff. Larry notes that it fluoresces under long-wave UV – totally consistent with textile fibres with fluorescent brightening agents (“optical brighteners”) found in almost all laundry detergents. He would know about that – wouldn’t he? His comment about it look looking like “A tangle of miniature monofilament fishing line” is about the only thing he says that actually sounds reasonable. I’m guessing a little wad of synthetic fibres – probably polyester.

Larry, ya got a couple of choices: Embed the whole lot and section it for a closer look, or pick out the fibres one by one and analyze them. If you can’t analyze the fibres, send them off to a good forensic science lab, where fibre ident is a common thing to do. I’d definitely section the big thingy, after doing some very careful external examination. You never know – it might have little tiny titanium intestines.

If Larry is typical of those in the Morgellons Research Group, I won’t be holding my breath awaiting the Grand Revelation.

252. Calli Arcale 
January 9, 2012

And even if it *were* an actual bug (though I agree it looks more plantlike to me), how would finding it show that it causes *any* cases of Morgellons? Do you have any idea how many arthropods are living on your body right at this very moment under totally normal conditions, non-pathologically? Seriously. Demodex folliculorum lives on people under normal circumstances, and typically is not pathologic; it’s what’s called a commensal parasite, meaning it has to live on us to survive but it doesn’t do us any harm (normally; there are exceptions). I’d be shocked if no arthropods were ever discovered on a Morgellons sufferer. The question is whether there’s any evidence they’re doing anything harmful to the patient. Same with the fibers. Do you have any idea how hugely common it is to find fibers on any arbitrary part of a human being? Cloth is such a ubiquitous part of our immediate environment, it would be more surprising to *not* find fibers than it would be to

any arbitrary part of a human being? Cloth is such a gigantic part of our immediate environment, it would be more surprising to find tiny fibers than it would be to find them. There's a reason fiber evidence is so important in so many forensic investigations. So to convince anyone that Morgellons produces fibers, you have to do more than show us a picture of fibers — you have to demonstrate that they cause Morgellons or are produced by the condition, rather than being something that's stuck on everybody but which you're only noticing on the people where you're looking for it — Morgellon's patients.



253. Narad
January 10, 2012

I'm not entirely certain what this series of words means, except maybe that your own hair and eyelashes fall out but in examining the fallen hairs, you find additional hairs, some long and some "tiny" that don't belong to you.

I more read it to suggest that the "morgies" actually replace normal hair.



254. LW
January 10, 2012

"the 'morgies' actually replace normal hair"

Hmm, I guess so. But if it grows on you, then it's your hair, I'd think. If it looks different from other hair ... well, frankly, I know a fair number of people who have found that their hairs slowly fell out and were replaced — if at all — by hair that was different in color and texture from the original. It's a recognized part of aging. Hairs that fall out due to illness may be replaced with hair of a different color and texture as well.

The only way you could really prove that long hair that grows on you isn't really yours would be to show that it isn't really hair, having a different microscopic structure or something. I've never seen a Morgellons sufferer even claim to have that kind of proof.

But there's still a problem of consistency: if Morgellons is the result of parasite infestation, or an autoimmune disease, how does it cause you to grow long hair that isn't yours?



255. Tanya
February 16, 2012


Hey Kit, I see you've met the vultures. I'm a fellow Morgy, although fortunately I don't get the skin symptoms like you do. Lots of fibers and a bit of itching when I'm due for a bath, but my main issues are with fatigue and chronic pain. I'm managing pretty well, showing steady improvement and I'm soon going to make a video or write an article about everything I'm doing to mitigate the symptoms. Should be up on my blog in the next couple of weeks which you can access by clicking my

or write an article about everything I'm doing to mitigate the symptoms. Should be up on my blog in the next couple of weeks, which you can access by checking my name.

Apparently Orac is obsessed with the notion that Morgellons is a delusion, as he posted another entry, same title as this article but with (2012 edition) tacked onto the end. Google it and check out the comment section. The way I was treated by the commenters here (one of whom has a PhD and is an associate Dean of a university, but still wasn't bright enough to pick on a Morgellons sufferer anonymously!) inspired me to make a video "MorgVlog #1: PLEASE! Show Some Compassion Toward Morgellons Sufferer's!" it's up on YouTube now and I'll also be posting it on my blog. Hope you'll check it out. Good luck and steer clear of the dingdong squad whose hangout appears to be the comments section on scienceblogs!

256.  Gray Falcon
February 16, 2012

Tanya, you made claims that Morgellons is caused by nanites inside of everybody's body, placed there by some nebulous global conspiracy, and as evidence, offered a video of your finger. We can offer compassion, but we're not going to believe everything you say.

257.  Lawrence
February 16, 2012

Once again, there aren't enough people in positions of power to work full time on all of these various international conspiracies – probably why we don't get good ones anymore, they are all half-assing it, because of their commitments to the Bildeburgers, Illuminati, NWO, other branches of the Masons, the Zionists, etc, etc, etc....

Who can possibly keep them all straight.

258.  [Tanya](#)
February 16, 2012

@Gray Falcon Seems some of you on here are awfully slow on the uptake. Maybe the Morgellons is getting to you, too?

It's not the fact that you don't agree with everything I have to say, which I've actually explained several times, it is the lack of compassion toward the mentally ill, or people you claim to believe are mentally ill, that I take issue with. As I have stated before, not all Morgellons sufferers believe, like I do, that Morgellons is the product of manmade nanotech, but we are all being treated this way.

If Kit shares my views on the origin of Morgellons, she certainly never mentions it here. What I see is a gang of heartless know-it-alls trying to make an individual who is clearly in a lot of pain (whether or not the source of the pain is psychological) feel stupid. I see no empathy or respect, and it's disgusting!

Again, watch my video “MorgVlog #1: PLEASE! Show Some Compassion Toward Morgellons Sufferer's!”. I explain very clearly that I don't expect everyone to blindly accept everything I say, in fact, that's the last thing I want! To my knowledge, Victoria, who I mention in that video, doesn't think Morgellons is nano, either.



259. Gray Falcon
February 16, 2012

Tanya, you accuse everyone who asks you for evidence of either being deluded or part of the conspiracy. Don't demand compassion when you have no kindness to give.



260. Beware
February 16, 2012

Kit: Watch out for slick Youtube videos from supposed Morgellons sufferers; they're likely to be propaganda created by the government (the government takes down all the videos that tell the truth).



261. Narad
February 16, 2012

Seems some of you on here are awfully slow on the uptake.

“Slow on the uptake”? You're the one pretending to have a conversation with a five-week-old comment.



262. [Tanya](#)
February 16, 2012

Gray Falcon, Other than to ask alison whether she was trying to deter people from viewing Carnicom's website, which I corrected myself about right away, I don't see how anything I said could have been construed as accusing anyone of being “deluded or part of the conspiracy”

see how anything I said could have been construed as accusing anyone of being “deluded or part of the conspiracy” .

Considering the rudeness and condescension I encountered here, I think I was EXCEEDINGLY respectful to many of the commenters. As you are well aware, I have no issues with people asking for evidence (although that certainly doesn’t oblige me to go on a fact-finding mission for them). Look at the comments. Look at the many jokes at my expense, the complete lack of empathy shown toward someone whom many of the posters claim to believe is severely mentally ill. Where did KIT ever accuse anyone of anything?!

Stop trying to save face and admit you were wrong. That many of the commenters saw someone they thought was vulnerable, assumed wouldn’t fight back, and decided to have a little fun at her expense. Admit that it is irresponsible and downright pathetic to treat someone who has said she has emotional problems and has struggled with thoughts of suicide in this manner.

“Don’t demand compassion when you have no kindness to give.”

I uploaded an image just for you on my photobucket account, username: stopgeoengineering, entitled, “No kindness to give”. Why don’t you go ask the family of that little boy whether they think I have “no kindness to give”? Why don’t you ask my family, whose lives I continually fight for, despite all this negativity and persecution, and despite being seriously ill whether they think I have “no kindness to give”? In my video I defend complete strangers and here I stick up for Kit, another complete stranger. Why don’t you ask them whether they think I have “no kindness to give”?

I have some kindness to give you, too, but I don’t think it’d make it past the mods!



263. Andrew
February 16, 2012

“I don’t see how anything I said could have been construed as accusing anyone of being “deluded or part of the conspiracy”.”

You wrote:

“most people are in a drug/tv-trance-induced stupor”

You lied about what’s on Carnicon’s site and accused Allison of trying to discourage people from looking at that site.

You wrote: “You guys are dangerously sure of yourselves and far too trusting. Ignorance must be bliss. ”

You wrote: “You children need to grow up, stop defending YOUR delusions, get over your petty differences and get out there and FIGHT for your loved ones, who are all under biological attack! WAKE UP!”

Shall I go on, or are you starting to remember what you wrote.



264. Narad
February 16, 2012

I don't see how anything I said could have been construed as accusing anyone of being "deluded or part of the conspiracy".

WHAT? Let's see, you've referred to people as "fluoride zombies," "pathetic followers," unwilling to "WAKE UP!," "terrifie[d]" of Tanya's twoof, "not thinking," "condescending know-it-alls" the majority of whom "are only like that because they've been programmed and drugged from birth so they can't think for themselves," unable "to grasp any of this," "in a drug/tv-trance-induced stupor," implicitly not "good people who value human life and freedom," and "too lazy and complacent."

As for this,

Other than to ask alison whether she was trying to deter people from viewing Carnicom's website, which I corrected myself about right away,

which refers to this,

I'm a little confused Alison. Are you sure you're referring to Carnicom's website? "cycling, tax relief, alien photos & area 51...". I don't see any of that on his site, which is dedicated to geoengineering and Morgellon's research. You wouldn't be trying to deter people from checking it out, would you?

...I seem to have missed the "correction."



265. Fred
February 16, 2012

Tanya, mental health issues or not, it does not give you the right to treat people as you wish. You act like you want to argue, as if you like to fight. You keep coming back for more and claim foul when anyone steps on your feelings. You are losing your arguments based on facts, and now you are using the excuse of being mentally ill to gain sympathy.

I'm a patient too. I know (knew) the game. If you really want help, I suggest you start listening, because you are not going to find better advice and information elsewhere. Seriously, these beliefs you have are delusions, they are not based on reality.

If you want to remain delusional, mentally ill as you call it, then do so, but as I said, it does not give the right to treat others in this manner.



266. [Tanya](#) 
February 16, 2012

I thought I corrected myself. I remember writing a post explaining that it was me who posted the wrong link, and apparently I either didn't submit it or it didn't get past moderation (I have repeatedly had that problem on this site which is why I don't post links). Regardless, I was not accusing Alison (who appears to have run off with her tail between her legs after being called out) or anyone else of being part of any conspiracy, nor did I accuse anyone of being delusional. Impaired, maybe. Delusional, no.

“You lied about what’s on Carnicon’s site and accused Allison of trying to discourage people from looking at that site.”

Sweetie, there is a difference between lies and typos.

I absolutely remember saying all of those things you two point out, and if you look back over the posts you will see that I did not say anything of that nature prior to being disrespected and even made my best effort to hold my tongue well after the mud-slinging began. Those comments were only directed at the people who were rude to me first. I don't see anything unkind about giving a-holes a taste of their own medicine, that's called having self-respect and refusing to be a doormat.

Furthermore, I was not under the impression that I was speaking to mentally-ill, emotionally vulnerable individuals, whereas those who decided it would be fun to berate me made it clear that they were under that very impression about me.

Continue to try to justify your irresponsible, pathetic, juvenile and heartless behaviour. It's not making you look any better, although one has to question why some of you are so determined to make me look bad.

267. [Narad](#) 
February 16, 2012

I don't see anything unkind about giving a-holes a taste of their own medicine, that's called having self-respect and refusing to be a doormat.

No, it's called being really pissy about not having one's demands for recognition met the way one wants them to be. Let's recall why people are showing you quotes from your own comments:

I don't see how anything I said could have been construed as accusing anyone of being “deluded or part of the conspiracy”.

Rather than acknowledging any of what you posted and that, well, yeah, if it *was* construed that way, maybe there's a way *how* it could have been construed as such, and maybe the way to figure that out is **sitting right in front of my nose**, instead one gets an immediate pivot to, oh, but it was *deserved*.



268. [Tanya](#) 
February 16, 2012

Fred, see my previous comment, as it applies to you, too. I am not treating anyone with disrespect. If you are a jerk, however, don't expect me to be nice. I'm a sweet, kind and loving person but I'm not a punching bag for bored self-proclaimed intellectuals.

Me standing my ground here has nothing to do with my hurt feelings. I've been through a lot, and the childish utterances of a few nerds are no skin off my nose. I stand in defense of all Morgellons sufferers who are the brunt of the kind mistreatment I have received here.

“If you really want help, I suggest you start listening, because you are not going to find better advice and information elsewhere.”

Seriously, Fred, have you **listened** to yourself? You keep ragging on me because I don't “listen to doctors”, now you are advising me to listen to a bunch of strangers on the internet who are totally cool with picking on someone they themselves have admitted they believe has serious mental issues? Wow! Just...wow.

As I've said, by listening to myself, first and foremost, my health continues to improve steadily, so I think I'll stick to that, thank you very much!

269. [Tanya](#) 
February 16, 2012

Narad: Ok, whatever you have to tell yourself to justify your shameful behaviour so you can sleep at night, hon'. Lol, someone seems a little “pissy” himself.

270. [Narad](#) 
February 16, 2012

Ok, whatever you have to tell yourself to justify your shameful behaviour so you can sleep at night, hon'.

It's unclear to me what you think is being “justified.” You are to all appearances quite indignant that your finger-filming psychic crutch isn't getting the respect that you insist it deserves because of “fluoride zombies,” etc. As I said some time ago, if this trip works well enough for you, then so it goes. Don't expect to be able to demand it be indulged when you take it on the road, though, “hon'.”

271. [Jon H](#) 
February 16, 2012

February 10, 2012

“Show Some Compassion Toward Morgellons Sufferer’s!”

Yeah. For example, when a Morgellon’s sufferer is away from their desk at work, don’t shake out a dust mop over their desk.

And definitely don’t make a dust trail from the sufferer’s desk to the other side of the office.

And definitely don’t confront the sufferer about the dust trail, telling them to get their Morgellon’s shit under control and stop leaving trails.



272. Andrew
February 16, 2012

“Sweetie, there is a difference between lies and typos.”

There certainly is. You didn’t misspell a word – you made a deliberately false accusation. If you’re not embarrassed about having done so, so much the worse for you.



273. [Tanya](#)
February 16, 2012

It’s unclear to me what you think is being “justified.”

Must be even slower on the uptake than I thought. Look at the tone of your posts. AGAIN, it is NOT that you don’t indulge my “delusions”, it is the way in which you express your opinion that I am delusional.

You repeatedly accuse me of being a disinformation operative, and make many presumptuous, condescending and rude statements, even making fun of me for mispronouncing Morgellons (which, as far as I know, is impossible since it’s just a word being used for a syndrome that hasn’t yet been officially named, and, btw, who the hell cares anyways except someone trying desperately to make me look bad?!).

If your mother or daughter were delusional, and you saw people treating them as you have treated me, how would you feel? As I stated in my video, I AM someone’s mother, and I AM someone’s daughter, and I bleed just like you.

I am not asking anyone to “indulge” anything they believe to be a delusion, but there is this thing called sensitivity.

I knew someone who really was delusional. At one point she even believed she was pregnant by an extra-terrestrial. This was in highschool and everyone showed her

the utmost caring and respect. Nobody made fun of her, nor did they repeatedly tell her how deluded she was, knowing the distress this could cause. Most of these people were teenagers. You are an adult (I would assume) and don't even have the common sense or decency to show a little empathy to someone who is obviously not well, delusional or not. Don't you get that?



274. [Tanya](#)
February 16, 2012

“There certainly is. You didn't misspell a word – you made a deliberately false accusation. If you're not embarrassed about having done so, so much the worse for you.”

Umm, actually, Andrew, in my original post I mis-spelled Carnicom's url to end in .com, rather than .org, and although I did jump to conclusions, it's not as though I felt particularly bad about it, as Alison's tone with me was already condescending, however much she may have underestimated my ability to recognize that, and was accusing me of “spinning” (which I interpret as fabricating) a conspiracy, ie., lying, PRIOR to making any comment about her potentially trying to deter visitors. Again, I am nice to people to the extent that they are nice to me. Being kind doesn't mean being a doormat or a kiss-ass.



275. [Andrew](#)
February 16, 2012

You claimed that Alison was lying when she truthfully reported what she saw at the website you asked her to go to, rather than noticing and correcting your own mistake.

Rather than apologizing, you now claim that it's Alison's fault for being condescending when reporting (correctly) that you sent her to a ridiculous website.

“it's not as though I felt particularly bad about it”

Obviously



276. [Antaeus Feldspar](#)
February 16, 2012

Stop trying to save face and admit you were wrong. That many of the commenters saw someone they thought was vulnerable, assumed wouldn't fight back, and decided to have a little fun at her expense. Admit that it is irresponsible and downright pathetic to treat someone who has said she has

emotional problems and has struggled with thoughts of suicide in this manner.

And somehow accusing us of being “irresponsible and downright pathetic” is still “respectful,” in Tanya’s world.

You can’t have it both ways, Tanya. If you’re the horribly fragile pitiable helpless waif who could never survive the hideous crushing impact of people not agreeing with her, you shouldn’t be here. If you insist on coming to a place where people *do* debate these things, and are – *gasp!* – *scornful* of absurd conspiracy theories like “Morgellons = gub’mint nanoworms” then you shouldn’t whine about not being handled with kid gloves.



277. [Tanya](#)
February 17, 2012

I repeat, I did not come here expecting support, I came here to raise awareness and right now, I am trying to make the point that, whether I believe I am delusional, if YOU believe I am, and are NOT a “irresponsible and downright pathetic” individual, you would be showing some sensitivity.

What if I was really as mentally unstable as you make me out to be, and I found these comments so upsetting I killed myself? It happens. I have shared that I’ve been suicidal in the past. Would you feel no remorse at all?

Just because everyone else on here does it doesn’t make it okay. I don’t ask to be treated with kid gloves, but it is not difficult to make your views known while still being respectful.

When I came here, my initial post expressed some opinions that you clearly disagree with and that I knew was contrary to what both the author of the article, and many of the other commenters believed. Did I belittle Orac for expressing his views? Did I attack anyone of the previous commenters who I knew would not see eye-to-eye with me?

What did Kit do? She doesn’t believe “Morgellons = gub’mint nanoworms”. Yet instead of showing compassion, all I see is people trying to make a sick woman feel like an idiot. What about Victoria, of the DailyMail article, who devotes so much of her time to helping other Morgellons sufferers get better? I have never seen her speak of conspiracies, yet she is also subject to ongoing verbal abuse and harassment over the internet.

Go look at some of the comments on the hundreds of recent articles reporting on the CDC study. Regardless of whether Morgellons patients believe Morgellons is part of a conspiracy (and, as stated before, I think most don’t know what the hell it is), there are IDIOTS out there who think it’s cool to make cruel jokes at the expense of Morgellons sufferers, and that’s not okay and I will stand up to them.

Nobody seems to want to answer my questions about how they would feel if their mother or daughter was delusional and you saw them being treated as I am being treated here? Hmm, I wonder what some of your mothers would have to say if they could read these comments. Tsk, tsk!



278. [Narad](#) 
February 17, 2012

Must be even slower on the uptake than I thought. Look at the tone of your posts.

I suggest that you look at the tone of yours.

AGAIN, it is NOT that you don't indulge my "delusions", it is the way in which you express your opinion that I am delusional.

Show me where I have suggested that you are delusional.

You repeatedly accuse me of being a disinformation operative,

If you don't understand this reference, you don't understand your fellow travelers.

and make many presumptuous, condescending and rude statements, even making fun of me for mispronouncing Morgellons (which, as far as I know, is impossible since it's just a word being used for a syndrome that hasn't yet been officially named, and, btw, who the hell cares anyways except someone trying desperately to make me look bad?!).

I pointed out a piece examining the etymology of the word, which, if you do not dispute the attestations, clearly indicates a hard 'g'.

If your mother or daughter were delusional, and you saw people treating them as you have treated me, how would you feel?

If you think that I have not seen frank delusion up close and personal, you are sorely mistaken. You ain't it. And if I haven't made it perfectly clear already, I think you're a Morgellons dilettante.

I am not asking anyone to "indulge" anything they believe to be a delusion, but there is this thing called sensitivity.

"Sensitivity," apparently, being something that you feel entitled to on demand but dispense at your leisure, in the extant case purely for show to someone who hasn't been around for weeks. Narcissistic ally-seeking, in short.

There are no doubt reasons underlying the construction of this defensive edifice. But if you don't like people suggesting that there may be better property available down the road, you're the one with the moat and drawbridge.

279. [Tanya](#) 
February 17, 2012

Lol, oh, so you actually think I'm making this all up. I thought all the disinfo agent accusations were just you being mean. So I'm not one of the real "delusional Morgellons patients" (and you know this for sure because you KNOW 150% that Morgellons is a delusion and I am clearly too lucid to be delusional), so its okay to be a dipshit. Ahhh, now I see.

Anyone else want to use this excuse?

"Narcissistic ally-seeking, in short."

LOOK AROUND!!! Why on EARTH would a Morgellons sufferer come HERE seeking an ALLY??? Dude, I know places where I can find plenty of allies, and I knew when I posted here that this wasn't one of them. I am well aware of the kind of topics discussed here and the level of arrogance shown to anyone who doesn't think like the hive.

"There are no doubt reasons underlying the construction of this defensive edifice."

Yes, I am doing this to try to get people to THINK about how their words could affect others, specifically Morgellons sufferers, but if believing I am a disinfo agent or someone who just gets off on being a fraud (without actually soliciting any donations or peddling any products, kind of a crappy fraud!) helps you feel okay about your behaviour, do what you gotta do!

Anyways, I'm off to hit Cliff and Alex up for a raise. You'd think a hardworking agent like me would at least be able to afford a higher res. camera and some bleach for her fricken' roots, lol!



280. [Tanya](#)
February 17, 2012

(sorry if this is a double post, the last one didn't go through I think cause I used a swear-word...oops)

Narad:

Lol, oh, so you actually think I'm making this all up. I thought all the disinfo agent accusations were just you being mean. So I'm not one of the real "delusional Morgellons patients" (and you know this for sure because you KNOW 150% that Morgellons is a delusion and I am clearly too lucid to be delusional), so its okay to be an a-hole. Ahhh, now I see.

Anyone else want to use this excuse?

"Narcissistic ally-seeking, in short."

LOOK AROUND!!! Why on EARTH would a Morgellons sufferer come HERE seeking an ALLY??? Dude, I know places where I can find plenty of allies, and I knew when I posted here that this wasn't one of them. I am well aware of the kind of topics discussed here and the level of arrogance shown to anyone who doesn't

knew when I posted here that this wasn't one of them. I am well aware of the kind of topics discussed here and the level of arrogance shown to anyone who doesn't think like the hive.

“There are no doubt reasons underlying the construction of this defensive edifice.”

Yes, I am doing this to try to get people to THINK about how their words could affect others, specifically Morgellons sufferers, but if believing I am a disinfo agent or someone who just gets off on being a fraud (without actually soliciting any donations or peddling any products, kind of a crappy fraud!) helps you feel okay about your behaviour, do what you gotta do!

Anyways, I'm off to hit Cliff and Alex up for a raise. You'd think a hardworking agent like me would at least be able to afford a higher res. camera and some bleach for her fricken' roots, lol!



281. Militant Agnostic
February 17, 2012

Andrew @275

Rather than apologizing, you now claim that it's Alison's fault for being condescending when reporting (correctly) that you sent her to a ridiculous website.

Actually, Tanya's nym links to an equally ridiculous website with front page links to David Icke and Alex Jones.

On this or on one of the Emily threads someone mentioned the absence of contrails/chemtrails during the immediate post 9/11 period* and the effect on temperature. This led me riff on Robert Anton Wilson (Illuminatus Trilogy) and wonder whether history is driven not by warring secret societies, but by warring conspiracy theories. In this scenario, the 9/11 attacks were of the chemtrail CTers who sought to ground all aviation and thereby prevent the spraying of mind control chemicals. They hoped that this interruption would allow the sheeple to awaken and realize the nefarious plans of the NWO.

*My father was fly fishing in the Northwest Territories at the time and they realized that something serious had happened long before they were informed by the fishing lodge owner, because they noticed the disappearance of contrails from the sky. The numerous overseas flights that would have passed over the Canadian Arctic were diverted to the first place they could land.



282. Militant Agnostic
February 17, 2012

I have a comment in moderation, apparently for suspected lunacy, since it contains no links or profanity.



283. Edith Prickly

February 17, 2012

Nobody seems to want to answer my questions about how they would feel if their mother or daughter was delusional and you saw them being treated as I am being treated here? Hmm, I wonder what some of your mothers would have to say if they could read these comments. Tsk, tsk!

Hey I'll give it a whirl, even though I know the most likely response will be more crocodile tears about how MEEEEEEAAAAN we all are.

If any family member or close friend of mine was showing the level of disordered thinking and obsessive behaviour that you've been demonstrating here, I would be strongly urging him or her to get treatment, or at least stay off the internet for a few weeks and try reconnecting with fellow human beings who aren't all wrapped up the drama of imaginary conspiracies. That to me is a compassionate response. I'd consider both cruel and irresponsible to let a loved one get trapped in a false belief system for the sake of not hurting their feelings.

A close friend of mine had a similar experience with her father, who got sucked into the moon landing hoax conspiracy during the final years of his life. I don't believe he was suffering any mental illness apart from being lonely and socially isolated – he was a person who had worked very hard his entire life and had trouble adjusting to being retired. It's quite easy for people to get sucked in by crackpots like Alex Jones when they're feeling vulnerable and have a lot of time on their hands, and there shouldn't be any shame in admitting that's happened to you. Your problem is you've made these beliefs so integral to your identity that you get your ego all in a knot when people refuse to take your ideas seriously and dig in your heels instead of listening.

And as for what my mother would say if she saw these comments? Probably that we're all being far too kind. She has a very low tolerance for nonsense and she'd have much sharper words for you than anyone here has used.



284. Shay

February 17, 2012

I'd consider both cruel and irresponsible to let a loved one get trapped in a false belief system for the sake of not hurting their feelings.

Brava, Edith.



285. Shay

February 17, 2012

I'd consider both cruel and irresponsible to let a loved one get trapped in a false belief system for the sake of not hurting their feelings.

Brava, Edith.



286. Narad
February 17, 2012

The only thing I'm getting from Tanya's most recent reply is that the NWO nanotech apparently targets reading comprehension as well.



287. JohnV
February 17, 2012

"I am clearly too lucid to be delusional"

You don't say?



288. NCK
February 17, 2012

Haaaa.. all these earned degrees here, all these "brainiacs" and STILL namecalling.....more posts trying to illustrate how CLEVER someone is.....That woman tanya is right, bitchslapping those who show that you can earn a degree, but not one in dignity and class.....oh, yeah, and the taunts about spelling, punctuation, paragraphs..... Haven't you heard? People who bring that up a big wet p*****s now..that stopped being cool and clever a decade ago.

So, where those pocket protectors with pride, knowing that you can verbally rip to shreds, with your clever wits, people who hurting and scared.....tough guys.....



289. Gray Falcon
February 17, 2012

NCK, Tanya pretty much declared she doesn't care whether what she says is true or not. That does not deserve any form of respect.



290. Fred
February 17, 2012

The Morgellons dot org website information has been replaced with the following message

The Morgellons Research Foundation (MRF) is no longer an active organization and is not accepting registrations or donations.

The MRF donated remaining funds to the Oklahoma State University Foundation to support their Morgellons disease research.



291. [Bronze Dog](#)
February 17, 2012

I notice NCK doesn't address any of the substance behind our real arguments, and instead cherrypicks the most trivial jokes and and side insults to complain about. He does this while hypocritically insulting us, like Tanya was doing.

So, tell us, NCK, how would a global conspiracy like the one Tanya proposes be tenable? I've made it clear that one of my objections is that they'd be too busy policing their own to actually accomplish anything.

Another is that there are easier, more effective, less expensive, and repeatedly proven means of controlling people, such as the manufactured health scare.



292. Fred
February 17, 2012

Nick, You are being rather presumptuous. Tanya does not seem to care that she is spreading misinformation. I am not a 'pocket protector wearing graduate', rather someone who was naively lured into a medical nightmare by some equally delusional disease mongers.

Anymore, I have little tolerance for people like Tanya actively spreading misinformation and even less tolerance given the fact that she is essentially targeting "people who hurting and scared." The last thing those patients need is exposure to the delusional rantings of someone like Tanya. Harsh? No.

Other peoples lives are just as important and valuable as Tanya. It is fine if she wants to keep her delusions to herself, but to actively seek out others and drag them into her drama must not be tolerated. BTW, she is making a really good case for forced medication, up until now, I have been completely opposed to forced drugging of psychiatric patients.



293. Narad
February 17, 2012

BTW, she is making a really good case for forced medication, up until now, I have been completely opposed to forced drugging of psychiatric patients.

No, she's doing nothing of the sort.



294. Fred
February 17, 2012

No, she's doing nothing of the sort.

How about cutting the power to her computer. 😊



295. [Tanya](#)
February 17, 2012


Hey NCK, yup, big wet p*****s about covers it! Of course these pompous, self-important types could never admit, "Hey, I've been a jerk." Nope, they have to justify their appalling behaviour by pretending to believe I'm making this up, or saying I'm spreading *dangerous misinformation* ooooooh! Or, even twisting things so that I'm the disrespectful one, when I am only responding in kind.

What they are REALLY doing is picking on someone who is genuinely debilitatingly ill, and trying to help other sick people and dispel the myths about Morgellons that obviously these numbskulls have bought hook, line and sinker.

Someday, Morgellons sufferers WILL be vindicated, and what I wouldn't give to see the looks on those dweeby little faces on that day! I normally wouldn't wish ill upon anyone, but I kind of hope they get it, BAD, and get to feel what it's like to be treated like a loon, or worse, when you're 100% sane. To be ganged up on a bunch of vultures whose goal is to make suffering people feel stupid, while stroking their insatiable egos.

They seem totally oblivious to the harm THEY are causing by perpetuating this type of cruelty and ignorance toward Morgellons patients, and based on what? An under-funded, INCONCLUSIVE study! Pa-freaking-thetic!



296. herr doktor bimler 
February 17, 2012

how they would feel if their mother or daughter was delusional and you saw them being treated as I am being treated here?

If this hypothetical relative had assured me that “What people (at least the type who would laugh at me) think about me is of no concern to me [...] Seriously, get over yourself, your opinion of me is nothing”, then I would know that there was nothing to worry about.


297. ildi 
February 17, 2012

It's Tanya's kids I feel sorry for...


298. Narad 
February 17, 2012

Of course these pompous, self-important types could never admit, “Hey, I’ve been a jerk.”

Project much, Tanya?

299. Hypothetical 
February 17, 2012

In a just world, someone who has been allowed to post thousands of words in tens of comments on a blog would be grateful for having been allowed to do so, all the more if the commenter knew that the owner of the blog disagreed with the commenter, and yet still allowed the comments. The commenter might show that gratitude by taking care in his or her comments to have his or her facts straight, and accept responsibility when his or her own errors result in misunderstanding.

300. j.michael carney 
February 19, 2012

i might not be a veterinarian but i know what a horses ass looks like...so much disinformation,so many drs that are all in the fold..every things fine and the whole

world could be on fire they would say its all in your mind..the thing thats the biggest killer ,the medical est...i remember the doctors in israel went on strike and the death rate went to zero for two weeks ..the news papers ran a story that said maybe the drs should stay on strike forever ,the next day all the drs went back to work... no more strike



301. Chris
February 19, 2012

Ah, Mr. Carney! So many ellipses and so little actual English grammar, how can we tell what you really mean?



302. [Bronze Dog](#)
February 19, 2012

Sometimes I get amused by the incoherent trolls. With their love of ellipses, I wonder if they talk like William Shatner parodies in the physical world.

Of course, whatever point you were trying to make probably needs evidence, Mr. Carney. Present it.



303. herr doktor bimler
February 19, 2012

i remember the doctors in israel went on strike and the death rate went to zero for two weeks

Mr Carney's memory is (to be charitable) a creative force:

A four-month Israeli doctors' strike in 1983 was found to have some definable effects on public health – the percentage of cesarean sections increased somewhat, and one study suggested hypertension patients might have received worse treatment – but no observed impact on mortality.


Another key example used to support the proposition that fewer doctors means fewer deaths comes from a June 2000 article in the *British Medical Journal* written during another Israeli strike; the author reported that in the three months after doctors walked out death rates fell significantly in affected cities. However, her data was by no means the result of a scientific study but consisted mostly of anecdotal reports from funeral home directors, who claimed they'd seen "the same thing in 1983."

[ht_tp://www.straightdope.com/columns/read/2741/when-doctors-go-on-strike-does-the-death-rate-go-down](http://www.straightdope.com/columns/read/2741/when-doctors-go-on-strike-does-the-death-rate-go-down)

304.  Tanya

February 19, 2012

Hahaha! We're so smart and superior, let's make fun of someone's grammar, rather than actually arguing their point. Apparently, however, you super-geniuses aren't bright enough to figure out that a quick google search of "israel doctors strike death rate" results in numerous relevant articles. Derp!

305.  Edith Prickly
February 19, 2012

Apparently, however, you super-geniuses aren't bright enough to figure out that a quick google search of "israel doctors strike death rate" results in numerous relevant articles. Derp!

I did Google it, and found this very interesting discussion of why only a conspiracy nut would believe it:
<http://www.straightdope.com/columns/read/2741/when-doctors-go-on-strike-does-the-death-rate-go-down>

Da Derp Dee Derp Da Teetley Derpee Derpee Dumb!

BTW, you do know you're posting on two separate Morgellon's threads, right? You mentioned being intoxicated on the other thread – I was just wondering.

306.  Krebiozen
February 19, 2012

i know what a horses ass looks like...so much disinformation

Which you are contributing to – almost everything you write here is untrue.

the thing thats the biggest killer ,the medical est

Untrue, unless you believe that the medical establishment somehow causes heart attacks I suppose.

i remember the doctors in israel went on strike and the death rate went to zero for two weeks

Untrue. Maybe you are referring to the 4 month strike in 1983 in which “Two examinations of outcome measures found no strike-related increases in mortality and no rise in perinatal mortality” (PMID 3582596)? Or to the strike in 2000 when an article in the BMJ suggested mortality had decreased, “according to a survey of burial societies” (but not to zero). Even if this unusual method of estimating mortality was accurate this was likely due to the postponement of “tens of thousands of elective operations”, which of course carry risks, but which reduce mortality in the longer term.



307. Terrie
February 19, 2012

Tanya, “sane” is a legal standard, and a pretty low one at that. Ted Bundy, Charles Manson and Jeffery Dahmer were all sane. It’s hardly something to brag about.

As for the threat of people being so mentally delicate that they might kill themselves due to our comments, screw you. Being mentally ill does not excuse a person from personal responsibility. If they can’t handle it, they shouldn’t be here.



308. Tanya
February 19, 2012

Edith, sounds like you could benefit from a few drinks and a couple tokes. Might loosen the stick.

Terrie,

“screw you”

Aww, someone’s getting a little testy. Cute.



309. Bronze Dog
February 19, 2012

I didn’t bother with searching for the doctor strike thing, because:

1) You made the claim. It’s **your** job to back it up. I’m not going to do your homework for you. Usually when I point this out, the woo tries to worm his way out of the commitment and bluff his way through the conversation.

2) Whenever I do a search in a situation like this, I usually find that the original data or story actually contradicts what the woo proponent says, or I find that they’re

just blindly parroting an urban legend fabricated out of nothing by some altie guru they worship as an Absolute Authority. When I tell them, they throw a hissy fit because I was looking at some page they didn't and dared to think about it for myself.

That's why it's a waste of my time doing a woo's homework for them.



310. Krebiozen
February 19, 2012

Bronze Dog,

That's why it's a waste of my time doing a woo's homework for them.

It's a hobby of mine, finding the origins of these tall tales. As you say, it's almost always untrue, grossly exaggerated or based on a misunderstanding of what someone has read. That distortion then gets repeated literally thousands of times, and most people don't bother checking if it's true, beyond a quick Google, because it agrees with their preconceptions. Then they accuse skeptics of being sheeple who don't think for themselves.



311. At last it makes sense
February 19, 2012

“Edith, sounds like you could benefit from a few drinks and a couple tokes.”

Tanya, if you would post when not stoned out of your gourd, maybe you'd make some sense. It's the idiot's job to provide proof of his dumbass claims, not our job to do it for him. Words for you to live by...



312. Edith Prickly
February 19, 2012


Edith, sounds like you could benefit from a few drinks and a couple tokes. Might loosen the stick.

It might. Or it might make me think it's a good idea to film a 10-minute epic about a piece of lint on the end of my finger and post it on the Internet.



313. Terrie 
February 20, 2012

Tanya, you're damned right I'm testy. I live with chronic mental illness. Every day, I face a society that thinks I should be treated like an infant, that my illness makes me weak, stupid or delicate. I don't appreciate people pushing those sorts of stereotypes as a cheap debate tactic. Those sort of tactics make it harder for people with chronic illness, mental or otherwise, to get the legitimate social accommodations that they need to participate in society to the fullest extent possible.

314. Tanya 
March 6, 2012

Terrie, Just saw this and felt the need to respond. I was not bringing up suicide as a "cheap debate tactic". I am not here to debate, I'm here to raise awareness.

Suicide and suicidal thoughts/tendencies are a big problem amongst Morgellons sufferers. I am pointing out that if any of these know-it-alls who are so quick to poke fun or make hostile remarks at Morgellons sufferers (not just me, and not just here) had actually done any research, they would know this, and those that are aware of this, regardless of whether they believe Morgellons to be a delusion, should show some sensitivity.

This does not negate personal responsibility. If someone chooses to kill themselves, that's their decision, and ultimately nobody else is to "blame", however, that does not justify people's unkind, tactless and even cruel comments toward someone who is clearly suffering.

It's fine to have the opinion that Morgellons could be psychological, it just surprises me that so many people with that opinion think that justifies treating Morgellons sufferers (or in their minds, delusional people) with less respect, or expressing those views in an unkind way.

Terrie, asking for the respect you deserve is not a weakness, and if society chooses to see see you as weak, stupid or delicate...IGNORE SOCIETY!

Your existence has nothing to do with what goes on in the minds of others, unless you allow it, and I think you know that.

You will never change the way everyone thinks. Currently there are about 7 billion people out there and most of them will never see you for who you really are. Stop waiting for them to see you as the strong, competent person you know you are, and simply embody that strength. Don't worry about my request for a little respect and sensitivity having any effect on the way people see you. Better yet, stop worrying about how people see you and just be the greatness you are.

I would hope most people would choose to be kind and decent regardless of whether or not a person has mental health issues. I was merely pointing out how much more insensitive it is to be a jerk toward someone who has stated that they are facing a health crisis.

You are right. People who are so vulnerable that a mean comment on the internet could cause them to harm themselves probably should be avoiding such situations, but that doesn't make it okay to be mean. We are adults. Why do we have to treat one another this way? Sorry, I just don't get it!



315. [Bennie Herny](#)
March 20, 2012

This blog is really very useful for my workings. You always tell and write about important subjects which gets my attention. I'm gonna subscribe to your blog so I always follow your posts 😊 I appreciate your work. Thank u very much (:



316. [A.R. McQueen](#)
March 21, 2012

To all you skeptics:

Morgellons is real. It's something. I have read Marc Nuemanns report and although I disagree with some of his findings most seem to be on the level. If you haven't experienced these symptoms you are just clueless and are truly the ignorant for stating no matter how kindly or scientifically that this is delusional. I believe I may have this and wouldn't wish it on anyone. Whatever it really is and no matter what has caused it, is a very gradual build up of symptoms that may have started years ago. It is somekind of allergic reaction to something; sufferers are reacting to something. Did you ever go to a barbecue or camping and there are some people plagued by mosquitoes and some who aren't. Try to look at this the same way. I am tired of being diagnosed with chronic dermatitus. I want to be normal again but as I don't have insurance and I am on unemployment right now and have to go to a NYC facility for medical care; tests and scrapings aren't an option. In fact the doctor that is treating me is somewhat of a lazy ninny though she makes sure that she keeps her distance when I see her. Why is it that there are doctors and nurses that have contracted this trying to help people with it? They must also be delusional as well right? It seems to me that the medical profession as well as the CDC is going all out to try to make the public think that this is nonsense. It is not! Like I said earlier it is a slow process and as more and more children begin to start to show signs of the disease maybe then you will all wake-up. Human nature is that if you yourself haven't seen or experienced something for yourself then it can't possibly be real. This is truly narrow minded and antiquated thinking. Unfortunately for all you doubters you or yours will have to contract this to change your minds. Mesnwhile, the bsnd plays on.



317. [W. Kevin Vicklund](#)
March 21, 2012

McQueen, maybe you should actually read what has been written. The delusion is in the belief of what caused the symptoms, not the symptoms themselves, as was explained many times. If I claim that Russian ninjas slashed my hand with a sword, the fact that I am bleeding from what looks like a bad paper cut does not mean that I am not delusional.

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