

1 SJR64
2 145243-3
3 By Senator Blackwell
4 RFD: Rules
5 First Read: 09-APR-13

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8 URGING THE GOVERNOR, STATE AGENCIES, MEDICAL SERVICE
9 PROVIDERS, HEALTH CARE AGENCIES, MEDICAL SCHOOLS, AND ALL
10 INTERESTED PARTIES TO WORK TOWARD ESTABLISHING CLINICAL CARE
11 AND RESEARCH CENTERS FOR CHRONIC NEURO-ENDOCRINE-IMMUNE
12 DISEASES AND TO INCREASE EDUCATION CONCERNING THESE DISEASES
13 TO CLINICIANS, NURSES, EMERGENCY ROOM SERVICE PROVIDERS, AND
14 FUTURE MEDICAL PROFESSIONALS.

15
16 WHEREAS, neuro-endocrine-immune diseases (NEIDs),
17 also known as multi-system diseases or complex chronic
18 diseases, include ME/CFS (myalgic encephalomyelitis/chronic
19 fatigue syndrome), fibromyalgia, chronic Lyme disease or
20 post-treatment Lyme disease syndrome, Gulf War illnesses, and
21 multiple chemical sensitivity/environmental illness; and

22 WHEREAS, NEIDs have been characterized as being as
23 disabling as chronic obstructive pulmonary disease, end-stage
24 renal failure, and rheumatoid arthritis; and as life-impairing
25 as multiple sclerosis, AIDS, and chemotherapy treatments; and

26 WHEREAS, the similarity of symptoms of NEIDs imply a
27 common pathophysiology of these illnesses so that discoveries

1 and advances made in the etiology and treatment of any one of
2 these illnesses will be applicable and beneficial to the other
3 NEIDs because of their common pathophysiology; and

4 WHEREAS, evidence is mounting that NEIDs are
5 triggered by infections or other body stressors and develop
6 into an autoimmunity causing a dysfunction in multiple body
7 systems, particularly the central nervous system; and

8 WHEREAS, NEIDs often lead to or are comorbid with
9 other diseases, including adrenal fatigue, anxiety disorders,
10 arthritis, chronic or reactivated infections, depression,
11 dysautonomia (neurally mediated hypotension/orthostatic
12 intolerance/postural orthostatic tachycardia syndrome),
13 Ehrler's-Danlos syndrome, hypocortisolism, hypotension,
14 hypothyroidism, irritable bowel syndrome, interstitial
15 cystitis, migraines, mitral valve prolapse, myofascial pain
16 syndrome, periodic limb movement disorder, premenstrual
17 syndrome, restless leg syndrome, Sjorgen's disease,
18 temporomandibular joint disorder, and vulvodenia; and

19 WHEREAS, the U.S. Food and Drug Administration has
20 declared ME/CFS to be a "serious and life-threatening"
21 disease; research by the Centers for Disease Control and
22 Prevention shows that 84 percent of those with ME/CFS are not
23 accurately diagnosed; and

24 WHEREAS, research has shown that the bacteria that
25 causes tickborn infections including chronic Lyme disease and
26 the tick that carries that bacteria is in this state, and Lyme
27 disease has been contracted from exposure in this state; and

1 WHEREAS, the Centers for Disease Control and
2 Prevention states that tickborn infections including chronic
3 Lyme disease is the most commonly reported vector-borne
4 disease in the United States; it is most common in children
5 ages 5-14; and if treatment is delayed, Lyme disease can
6 develop into a chronic disease that requires expert,
7 knowledgeable medical care; and

8 WHEREAS, according to the Research Advisory
9 Committee on Gulf War Veterans' Illnesses, Gulf War illnesses
10 (GWI) are estimated to affect between 175,000 to 200,000 U.S.
11 veterans, some of whom have been suffering for over 17 years;
12 and

13 WHEREAS, an estimated 20 million American adults and
14 children suffer with NEIDs; and an estimated 20,000 Alabamians
15 (1 in 240) have ME/CFS and 144,000 Alabamians (1 in 50) have
16 fibromyalgia; and the number of those with chronic diseases is
17 projected to increase steadily in future decades; and

18 WHEREAS, a 2012 survey showed 40 percent of Alabama
19 NEIDs patients search for an accurate diagnosis two to seven
20 years before receiving one; and 21 percent search for an
21 accurate diagnosis for over seven years before receiving one;
22 and

23 WHEREAS, the longer a person is ill with a NEID
24 before treatments begin, the more complicated the course of
25 the disease is and worse the prognosis, adding to the
26 financial burden on government services, health care services,
27 and society; and

1 WHEREAS, a 2012 survey showed that 59 percent of
2 Alabama NEIDs patients see four or more physicians before
3 receiving an accurate diagnosis and some treatment; and

4 WHEREAS, increasing physician education of NEIDs
5 will reduce the number of physicians patients must visit as
6 they seek an accurate diagnosis and appropriate treatments;
7 and

8 WHEREAS, centers for NEIDs, with medical
9 professionals who specialize in these diseases, will reduce
10 the time involved and number of physicians the patients visit
11 seeking an accurate diagnosis so as to begin treatment and
12 reduce the time-consuming financial burden on other clinics;
13 and

14 WHEREAS, a 2012 survey showed that 61 percent of
15 Alabama NEIDs patients (more than in other states) are not
16 satisfied with their medical care and do not believe their
17 physician is sufficiently knowledgeable of their disease; and

18 WHEREAS, a 2012 survey showed 52 percent of NEIDs
19 patients in states that border Alabama are not satisfied with
20 their medical care, thus a center for NEIDs would provide an
21 opportunity for the unmet medical needs of NEIDs patients from
22 other states to be treated in this state; and

23 WHEREAS, having clinical care and research centers
24 for NEIDs in Alabama will distinguish the state from other
25 states and provide a place where patients could receive care
26 from NEIDs researchers in this state thereby increasing
27 Alabama's biotech industry; now therefore,

1 BE IT RESOLVED BY THE LEGISLATURE OF ALABAMA, BOTH
2 HOUSES THEREOF CONCURRING, That we urge the Governor, state
3 agencies, medical service providers, health care agencies, and
4 all interested parties to work toward establishing clinical
5 care and research centers for chronic neuro-endocrine-immune
6 diseases.

7 BE IT FURTHER RESOLVED, That we also urge the
8 Governor, state agencies, medical service providers, health
9 care agencies, and medical schools to increase education of
10 NEIDs to clinicians, nurses, emergency room service providers,
11 and future medical professionals.

12 BE IT FURTHER RESOLVED, That copies of this
13 resolution be made available for distribution.