



CASE STUDY

Hypotension

Patient: Hans

Gender: Male

Age: 20

Occupation: Student



“The most difficult step was trying to find a physician in my area that would help to treat my son. That was not an easy thing to do.” – Dr. Marna Ericson

BACKGROUND

Hans, a college student in Minnesota, was an active child growing up. He enjoyed hiking, biking, skiing and had pet dogs. He enjoyed a lively social life and was an honor-roll student. In April 2006, the year before high school, Hans began displaying what appeared to be allergies when he broke out in hives and had itchy eyes. However, an allergist was not able to explain the origin of the problem.

These symptoms quickly progressed with the development of insomnia and headaches, followed by light sensitivity and short-term memory loss. His parents were very concerned and

consulted numerous doctors, including a neurologist, ophthalmologist and infectious disease doctor. Unfortunately, these physicians were unable to establish a specific diagnosis and continued to treat only symptoms.

After two years, his condition was worsening. Hans’ energy level was so low that he was unable to attend high school and instead relied on private tutors and home schooling. Because he was unable to take part in the things he had enjoyed growing up, Hans began to develop anxiety and signs of depression.

TESTING | TREATMENT

Hans had been tested for seemingly everything, including several well known tick-borne infections, with no positive results. He was diagnosed with hypotension and put on medication for his blood pressure, but the only treatment that offered significant relief for his symptoms was acupuncture.

Hans’ mother heard about a study conducted by Dr. Edward Breitschwerdt, Professor of Internal Medicine and Director of the Intracellular Pathogens Research Laboratory at the North Carolina State University College of Veterinary Medicine, on *Bartonella* infection. Hans had frequent contact with pets and because he enjoyed the outdoors he also had a history of tick exposure, both of which are risk factors for *Bartonella*

infections. After enrolling in a research study in late 2008, Hans tested positive for multiple *Bartonella* species using a new method called *Bartonella* ePCR™.

Hans began receiving treatment, originally from a physician familiar with tick-borne diseases and later from a rheumatologist, which included a long-term antibiotic regimen. After months of treatment Hans’ blood tests came back negative, suggesting that the infection was eliminated. However, skin biopsies examined by researchers at the University of Minnesota have since shown evidence that *Bartonella* is still present in his blood vessels. Apparently, the bacteria are still hiding in his tissue.

CONCLUSION

At age 20, Hans now enjoys the highest quality of life he has experienced since middle school. He is able to drive and attends community college classes. He is able to catch up on the social life that he missed out on as a teenager. His energy level, insomnia, headaches and light sensitivity can still be problematic, but as he continues treatment, he has great optimism.

Galaxy Diagnostics, Inc.

Phone: 919-313-9672 | Fax: 919-287-2476
www.galaxydx.com | Email: contact@galaxydx.com

Bartonella ePCR™ was developed and its performance characteristics determined by the North Carolina State University College of Veterinary Medicine and Galaxy Diagnostics, Inc. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined such clearance is not necessary. Results from testing are to be used in conjunction with clinical findings to establish diagnosis.

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