

Testimony by Andrew Bokelman via telephone at the October 2010 CFSAC meeting.

Thank you to the CFSAC for allowing me to speak.

My name is Andrew Bokelman. In 2005 I was hit with a horrible flu-like illness that never went away. My doctor told me I have Chronic Fatigue Syndrome. Three years later I was diagnosed with prostate cancer. And if that were not enough, after that I was diagnosed with oral cancer.

XMRV is biggest news to hit since I became ill. But because more research is still needed, I'm not limiting my hopes to a retroviral answer. I do, however, think XMRV should be vigorously pursued. And I have concerns about how I see things unfolding.

What concerns me is the nature of the talk that proposes sample contamination as the source of XMRV. Because instead of digging in and offering on-point criticism, the sample contamination talk remains at a superficial level. It fails to address the CDC-requested test that was run on the WPI Science study samples during pre-publication peer review, and how that test confirmed no contamination. It fails to address the fact that it was not only WPI that found XMRV during the Science study. It fails to address the variation found within the genetic sequencing, and how that is inconsistent with contamination. It fails to address the presence of antibodies. And with regard to the Alter study, which found evidence of a similar gamma retrovirus, the contamination criticism ignores each additional test they ran to check for contamination. And with regard to both studies, the criticism fails to address the difference between subjects and controls.

I also hear about how there are so many negative studies, and how this makes the position for contamination stronger. But this position fails to consider that there are other positive XMRV studies. For example, I saw a German study a few months ago where XMRV was found in the respiratory tracks of subjects. And there are other positive studies. So what we also need to look at is that if any one of these positive studies is correct, be it a CFS study or not, then why are other studies missing XMRV.

I suggest that the contamination theorists start answering the hard questions, and stop behaving as if holes in their theories don't exist. Or better yet, work cooperatively with people who are getting positive results, and see why tests are coming out differently. Then we can move this research along faster, and find an answer sooner.

Thank You.