

UNEXPLAINED PATHOLOGY - MORGELLONS/LYME SYMPTOMS (2006)

Note: 95% of all, mostly wrong considered Morgellons symptoms, are actually caused from [Lyme disease](#) and other bacterial or viral coinfections, and only 5% of the symptoms are really caused from a [systemic](#) or [subcutaneous mycosis](#) or [protozoanosis](#) which could be called "real Morgellons symptoms", producing under higher stress conditions more black, colored or glassy filaments/hyphae emerging from skin pores.

MAIN SYMPTOMS OF LYME DISEASE

EXTERNAL SYMPTOMS	INTERNAL SYMPTOMS
Pustules, pimples, blisters, nodules, crawling sensations	Fatigue syndrome, shortness of breath, reduced strength, OCD,
Dermatitis, cellulitis, thinner skin, graying of hair, rapid hair growth, hair loss, reduction of collagen and skin tissue	Cough, pneumonia, headache, back and limb pain
Excema-like areas and skin depigmentation pattern	Hypertension, heart pain, circulatory problems, weakness, numbness, , problems with temperature regulation
Teeth rotting/decay, gum atrophy/detoriation, tongue furrows	Neuritis, forgetfulness, depressions, angryness, memory lost, panic attacks, less patience and concentration, brain fog
Biofilm coverage - often yellow teeth, finger- and toenails, dry skin areas, dandruff	Bladder and kidney infections, joint pain, fibromyalgia, extreme weight gain/loss
Watery eyes with inflammations, light sensivity, blur/worst vision, Glaucoma symptoms	Bad Coagulation, thrombosis/clots, lack of red blood cells and iron, lymphedema, inflamed lymph nodes
Swollen legs and face (edema), hematoma, pins and needle feelings in the fingers, stiff neck	Black foot ankles, aching joints, tinnitus, sinusitis, muscle cramps, gastrointestinal problems



Scalp damage (*Acrodermatitis chronica atrophicans*) caused from Lyme disease

MORGELLONS SKIN SYMPTOMS:

In regard to the symptoms, in the initial stage one may experience increased crawling sensation, mostly around the scalp, nose and mouth. This is individual and is caused from colored hyphae/fibers or spores (black specks) that are growing out of skin pores.



In the second stage is noticed, a biting and stinging sensation which is later followed by an itching. This is caused, particularly on sweaty skin areas, from the biofilm entering the skin

again. Sufferers report subjectively the feeling of glass fibre similar to asbestos which causes them to have an intolerable itching sensation.



In a later stage, all typical skin disorders and cell damages (blisters, pustules, lesions, sores) are becoming then more noticeable. This is the worst stage and a sudden treatment is strictly advisable, otherwise the skin will look like on these pictures above and below from a sufferer which could not stop the invasive Morgellons growth.



The infestation is represented also more strongly, due to many factors such as the season (summer heat), the physical condition of the host body, depending upon that he sweat less or more and if a thyroid condition exists etc. As well if the host's intake of carbohydrates and sugars is too high.



In general the typical Morgellons patient has a compromised immune system, also weakened previously by protozoal, bacterial, viral or other mycotic (fungal) infection, which can also be caused from own opportunistic pathogens.

The symptoms that occur after a longer ongoing infestation of 6-12 months and upon physical condition of the host favours also, common alopecia (scalp, eye lashes, eye brows, legs) and grey hairs, formation of crusts, erythema, papulosa and skin nodes, excema, generally thinner skin and cellulitis, and reduction of collagen.

Most do experience also depigmentation pattern, irregular skin thickness, broken down skin areas, aging features of the skin similar to after effects of acute intensive sun baths. Negrotic skin tissue (legs, feet, ankles etc.).

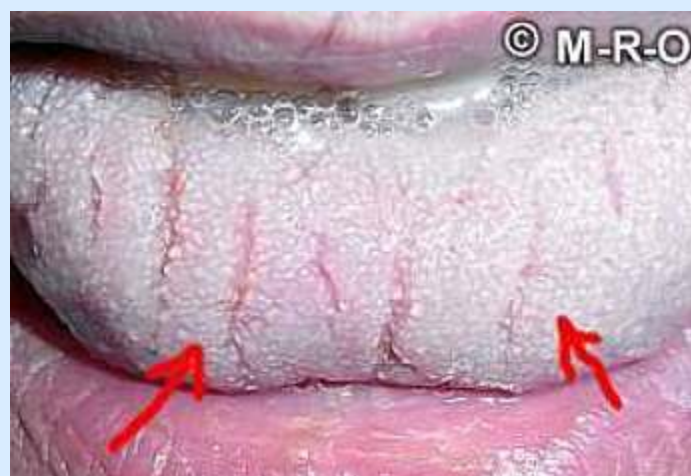


Well visible also the tiny holes on these white spots which were caused from emerging fibers

INTERNAL SYMPTOMS:

In a later stage of infection a general physical weakness is common among concerned, also a reduced efficiency, chronic fatigue syndrome accompanied by concentration problems, general problems with the nervous system and neurological signs (MS) and Meningitis/Encephalitis. As well a state of heightened anxiety, mood swings, angriyness, resignation, depression, apathy and often suicide minds.

As well gastrointestinal difficulties (failure), unexplainable back pain, coughs, rigid neck and other parts, also a generally decreased ocular ability with keratitis inflammation (red inflammed eyes) and a progressive parodontal disease (tooth decay) and gum deteriorations.





Deep furrows on the tongue and outflow of parasites from the eyes (Lymph system)

Most cases include edemas, swollen legs, face etc. (lymph), later also swollen glands and lymph nodes and difficulty in breathing, heart and liver problems (insufficiency) and a constant weariness, as well internal and external fungal infections (candida etc.) and urological problems.



Swollen feet and black ankles and conjunctival hemorrhage of the eye

Similar symptoms and particularly Meningitis/Encephalitis might be caused not only from Lyme but mostly from viruses as Varicella, Coxsackie, Enterovirus, EBV (Ebstein-Barr Virus), Herpes simplex Typ 2, LCM-virus, HIV. As well from other bacteria such as enterobacteria (E.coli) Streptococcus group B, and Listeria monocytogenes:

Particularly with babies, children or immunosuppressive people, or infections with Meningococcus or Pneumococcus in healthy people. As well fungi (Aspergillus spp.) and parasites (Naegleria fowleri) can cause similar symptoms.

[Watch also this video about Lyme and co-infections](#)

MORE INFO:

In the winter month, the illness somewhat slows down, unless one is constantly in warm areas, whereby during the day and in the evening a stronger infestation phase is noted more, as well more during night time.

Generally one can say that in the summer a propagation is more higher and more likely although the active life span of this fungus (biofilm). Also at night a higher symptomatic is present and in the morning hours. Certain hormonal levels of the host body seems to play also a certain role in connection with higher sweating and stronger infestations.

It is dangerous to assume that certain areas of the body are not infested just because one cannot see lesions. Most likely most of the different life forms are settled in close proximity to terminal hairs (hairs visible to the human eye) and areas which sweat which are different in different peoples. Some may sweat more in the area around the chin, while others are more prone towards the nose, forehead, cheeks or feet etc.

An infestation of genital areas is taken seldom place, but around and or on the top of penis, clitoris. On the scalp or forehead, one recognizes in the beginning only a slight bump, which can be a half inch in the diameter, or strips along the forehead where subcutaneously the skin has been devoured and thus causes a minimal indentation (damaged skin tissue, collagen).

The infestation is different with infants since their physical sweat glands are not yet so developed. The infestation is localized more in the head area where the fine hairs are a source of protein/keratin for the parasites. An infestation in and around the mouth, nose and ear areas are mostly present.

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