



Court File No. T-1321-19

FEDERAL COURT

BETWEEN:

WILLIAM AITKEN, BRENDA CAMPBELL, TOM GOODBODY, MICHAEL HOPPING, STEPHANE LEROUX, ANDY MOSIENKO, DAVID NYYSOLA, NEIL DODSWORTH, KEVIN MORROW, JOSEPH JASIN, PAUL MORNEAULT, COLIN WILMS, JAMIE P. GRENIER, JOHN ARTHUR ARMSTRONG, CHRIS HODD, STEVEN M.D. BARTON, ALAN BROWN, TONY HILL, TRENT HOLLAHAN, GERARD MOORES, DARREN VERVILLE, JOHN DOWNS, DINO SIMONE, ROBERT MACDONALD, NORMAN HARRISON, RODERICK MACKAY, KEITH LOSIER, PHILLIP PALMER, THOMAS PATRICK HANEY, RICKIE CHAYKOWSKI, PETER OLAND, JOHN RALPH MCMILLAN, GARY JOHN REID, JASON CLAUDE FLANDERS, JODY DANIAL GILLIS, MILES WALTON, JOSEPH (ANDRE) VAILLANCOURT, DEAN HISCOCK, BRIAN PETER JEFFERSON, BRIAN MCGEAN, BRENT COUNTWAY, PAUL TURMEL, ERIC ST. GELAIS, ROBERT FARQUHAR, DWAYNE SPENCER, RONALD HERBERT O'CONNOR, KEVIN JOHN STEWART, MARTIN GAGNON, PERRY ANTLE, TRACY BARNSDALE, EAMONN BARRY, GRAHAM FORD, PHILIPPE JOSEPH CERE, MASON EDWARD HUDDLESTON and CHRISTOPHER BRECKON

PLAINTIFFS

and

HER MAJESTY THE QUEEN IN RIGHT OF CANADA

DEFENDANT

STATEMENT OF CLAIM

TO THE DEFENDANT

A LEGAL PROCEEDING HAS BEEN COMMENCED AGAINST YOU by the Plaintiffs. The claim made against you is set out in the following pages.

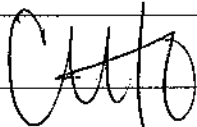
IF YOU WISH TO DEFEND THIS PROCEEDING, you or a solicitor acting for you are required to prepare a statement of defence in Form 171B prescribed by the Federal Courts Rules serve it on the plaintiffs' solicitor or, where the plaintiffs do not have a solicitor, serve it on the plaintiffs, and

file it, with proof of service, at a local office of this Court, WITHIN 30 DAYS after this statement of claim is served on you, if you are served within Canada.

If you are served in the United States of America, the period for serving and filing your statement of defence is forty days. If you are served outside Canada and the United States of America, the period for serving and filing your statement of defence is sixty days.

Copies of the Federal Court Rules information concerning the local offices of the Court and other necessary information may be obtained on request to the Administrator of this Court at Ottawa (telephone 613-992-4238) or at any local office.

IF YOU FAIL TO DEFEND THIS PROCEEDING, judgment may be given against you in your absence and without further notice to you.

DATE: ~~6107 11 9 11~~ AUG 14 2019
ISSUED BY:  Charlene Cho
(Registry Officer) Registry Officer
Agent du greffe

Address of local office: 180 Queen Street West
Suite 200
Toronto, ON M5V 3L6

TO: HER MAJESTY THE QUEEN IN RIGHT OF CANADA
Ontario Regional Office
Department of Justice Canada
120 Adelaide Street West
Suite #400
Toronto, Ontario M5H 1T1

RELIEF SOUGHT

1. The Plaintiffs each claim:
 - a. a Declaration that the Defendant, Her Majesty the Queen in Right of Canada, owed and was in breach of statutory and common law duties to the Plaintiff;
 - b. a Declaration that the Defendant is liable to the Plaintiff for the damages caused by its breach of statutory and common law duties;
 - c. general and aggravated damages arising from the Defendant's breach of statutory and common law duties in the amount of \$380,000.00;
 - d. a Declaration that the Defendant has breached the Plaintiff's s. 7 rights under the *Canadian Charter of Rights and Freedoms* ("Charter");
 - e. damages for violation of the Plaintiff's *Charter* rights pursuant to s.24(1) of the *Charter* in the amount of \$5,000,000.00;
 - f. special damages in an amount to be determined, including future and anticipated medical and out of pocket expenses;
 - g. punitive and/or exemplary damages in the amount of \$5,000,000.00;
 - h. prejudgment and post-judgment interest;
 - i. the costs of this action, including HST and other taxes as applicable, on a substantial indemnity basis; and
 - j. such further and other relief as this Honourable Court may deem just.

OVERVIEW

2. In the fall and winter of 1992-1993, approximately 1,200 members of the Canadian Armed Forces ("CAF Members") were deployed to Somalia as part of a United Nations peacekeeping operation called Operation Deliverance.
3. In advance of and during the deployment, the Canadian Armed Forces and the Department of National Defence ordered all CAF Members to take the unlicensed anti-malarial drug Mefloquine as part of a mismanaged and ultimately botched clinical drug trial that was conducted without consent on unwitting CAF Members.

4. Mefloquine is a potent psychotropic anti-malarial drug that can cause severe and potentially permanent neurological and psychological health harms. The drug manufacturer now warns that Mefloquine can cause prolonged and sometimes permanent severe mental problems including anxiety, paranoia, depression, hallucinations, suicidal thoughts, and mood disorders, and severe nervous system problems including dizziness, vertigo, issues with balance, tinnitus, seizures and insomnia.
5. Psychological side effects from Mefloquine including hallucinations and altered mental state were so severe and widespread across the Somalia mission that CAF Members referred to the day of the week on which they were ordered to take Mefloquine as “Mefloquine Monday”, “Psyco Tuesday” or “Wacky Wednesday”, and referred to the vivid dreams and night terrors as “Meflomares.”
6. The consequences of the Government of Canada’s decision to force its military personnel to take Mefloquine has been disastrous. The Government of Canada sent CAF Members to active combat zones while suffering from Mefloquine-induced psychosis, rages, paranoia, and hallucinations that at times made it impossible to separate reality from fantasy. CAF Members’ Mefloquine-induced mental health issues were compounded by other combat-related mental health issues including post-traumatic stress disorder.
7. The Government of Canada continued to force CAF Members to take Mefloquine on pain of court martial even after CAF Members reported severe adverse reactions in spite of the drug manufacturer’s warning that anyone experiencing adverse reactions must immediately cease taking the drug.
8. Hundreds of CAF Members have returned home with long term and in many cases permanent disabilities caused by Mefloquine that have ruined marriages, families, job prospects and lives. CAF Members describe suffering debilitating mood issues, aggression, bouts of explosive anger, violent behavior, night terrors, panic attacks, anxiety, paranoia, hallucinations, suicidal thoughts, psychotic behavior, memory loss, depression, convulsions and more. Tragically, Mefloquine toxicity has been a major factor in the suicide crisis currently plaguing military veterans and their families.

9. The above harms were entirely avoidable. The Government of Canada always had alternative anti-malarial drugs available to it that posed none of the severe neurological or psychological health risks of Mefloquine.
10. This lawsuit is one of several brought by hundreds of current and former CAF Members against the Government of Canada for harms caused by being forced to take Mefloquine.

THE PARTIES

The Defendant

11. The Defendant is Her Majesty the Queen in Right of Canada (the “Government” or “Canada”). The Department of National Defence (“DND”) and the Canadian Armed Forces (“CAF”) are the departments in the Government of Canada that are responsible for implementing government decisions concerning the operation and management of the Canadian military.

The Plaintiffs

12. The Plaintiffs are all either members or former members of the Canadian Armed Forces who were deployed to Somalia and ordered to take the anti-malarial drug Mefloquine, and who have suffered serious harms as a result (the “Plaintiffs”).

Nature of relationship between Canada and the Plaintiffs

13. CAF Members are in a uniquely dependent and vulnerable relationship with the CAF and DND. CAF and DND have an extraordinarily high level of control over the lives of CAF Members. When CAF Members enroll in the military, they are subject to its hierarchical and authoritarian culture and command structure until such time as they are discharged. CAF Members are by law required to obey all lawful commands and orders of a superior officer on pain of court martial. Section 126 of the *National Defence Act* specifically requires CAF Members to obey all orders to submit to inoculation, vaccination and other medical treatments against infectious diseases; failure to follow such orders is punishable by up to two years imprisonment.

BACKGROUND

Mefloquine

14. Mefloquine, sometimes sold under the brand name Lariam, is a potent psychotropic anti-malarial drug that can cause severe and potentially permanent neurological and psychological health harms.
15. Mefloquine was developed in a US military research facility in the 1970s.
16. The manufacturer of Mefloquine has long recognized the health risks posed by Mefloquine, including the potential for long-lasting adverse neurological and psychological events that can last for years after stopping the medication. The manufacturer of the drug currently provides the following Health Canada-mandated warning regarding the potential for serious negative side effects on its product information sheet:
 - **MEFLOQUINE can cause serious mental problems in some people.** These serious sideeffects may occur suddenly and may last for months to years after stopping MEFLOQUINE.
Symptoms of serious mental problems may include:
 - anxiety
 - unreasonable feeling that people are trying to harm you, do not like you, etc. (Paranoia)
 - depression
 - seeing or hearing things that are not there (hallucinations)
 - thought of suicide or harming yourself
 - feeling restless
 - feeling confused
 - unusual behavior
 - **MEFLOQUINE can cause serious nervous system problems in some people.** Symptoms of serious nervous system problems may include:
 - dizziness
 - a feeling that you or things around you are moving or spinning (vertigo)
 - loss of balance
 - ringing sound in your ears (tinnitus)
 - convulsions (seizures) in people who already have seizures (epilepsy)
 - unable to sleep (insomnia)
 - These serious mental and nervous system side effects may occur at any time while you are taking MEFLOQUINE, may last for months or years after stopping MEFLOQUINE, and in some cases may become permanent in some people.
17. The drug manufacturer also clearly states that Mefloquine must not be used by anyone who have currently, or in the past, suffered from any mental health illness that affects mood, thinking and behavior such as depression, anxiety, psychosis, or schizophrenia.

18. The drug manufacturer also clearly states that individuals who suffer any of the following symptoms after taking Mefloquine must stop taking the drug and get immediate medical help:
 - a. mental problems, including anxiety, depression, paranoia, hallucinations, feeling restless, confused or disoriented, unusual behavior or changes to mood;
 - b. nervous system changes, including dizziness, spinning, ringing in the ears, loss of balance, seizures or convulsions; or
 - c. issues with nerves, including prickling or tingling sensations, numbness and loss of an ability to feel pain or changes in temperature, a burning or sharp pain, loss of balance or co-ordination, feeling pain from a very light touch, and muscle weakness or paralysis.
19. The drug manufacturer also warns that Mefloquine can negatively interact with alcohol and consuming alcohol while on Mefloquine increases the risk of experiencing mental problems.
20. Because of the risk of the above serious adverse effects, Mefloquine should only be prescribed after a qualified health care professional conducts an individual risk assessment.

Operation Deliverance and the Botched Clinical Trial

21. In late 1992 and early 1993, approximately 1,200 CAF Members were deployed to Somalia as part of the United Nations peacekeeping operation called Operation Deliverance. A large contingent of the CAF Members were soldiers from the specialized elite rapid response unit tasked with rapid deployment into hostile situations, the Canadian Airborne Regiment. This contingent of CAF members also included support personnel.
22. In advance of Operation Deliverance, CAF and DND ordered all CAF Members deployed to Somalia to take Mefloquine as part of a mismanaged clinical trial in which CAF failed to implement or follow proper protocols for clinical trials, and failed to obtain informed consent from CAF Members who were part of the clinical trial.
23. Mefloquine was provided to the DND and the CAF with the approval of Health Canada as part of an experimental study known as the Lariam Safety Monitoring Study (the “Lariam

Study"). The Lariam Study was a clinical drug trial involving human subjects. As a clinical drug trial, the Lariam Study was supposed to be conducted by trained professionals under strict conditions in order to protect the health of the subjects in the drug trial. The Lariam Study required that, among other things:

- a. participation in the study by members of the CAF be strictly voluntary;
 - b. that informed consent be obtained from all subjects prior to participation in the study;
 - c. Mefloquine use be administered and monitored by physicians;
 - d. any side effects from Mefloquine be monitored, recorded and reported to Health Canada; and
 - e. use of Mefloquine be discontinued if study subjects experienced anxiety, emotional upset, restlessness or confusion.
24. DND and CAF failed to follow the Lariam Study protocols. CAF Members did not volunteer to participate in the Lariam Study nor did they provide informed consent to take Mefloquine as part of the Lariam Study. In fact, most CAF Members were not even aware that they were taking Mefloquine as part of a clinical drug trial.
 25. Despite the fact that the Government knew that individuals at risk or with a history of psychological disorders should not take Mefloquine, CAF did not conduct any individualized screening of CAF Members before requiring them to take Mefloquine. As a result, many of the CAF Members who the Defendant ordered to take Mefloquine had a history of anxiety, depression or post-traumatic stress disorder ("PTSD").
 26. Despite the fact that the Government knew that CAF Members should immediately stop taking Mefloquine if they suffered any of a number of neurological, psychiatric or neuropathic symptoms, the Government did not have in place any mechanism for reporting of or screening for such symptoms. On the contrary, even in instances where CAF Members reported symptoms, these reports were ignored, and the CAF Members in question were ordered to continue taking Mefloquine.

27. Throughout, CAF and DND failed to keep records of reports of adverse reactions or side effects resulting from Mefloquine made by CAF Members. Throughout, CAF and DND failed to report adverse reacts or side effects resulting from Mefloquine to Health Canada.
28. Throughout, CAF and DND ordered CAF Members to take Mefloquine on pain of court martial and possible imprisonment, pursuant to s. 126 of the *National Defence Act*.
29. Despite serious concerns raised following the use of Mefloquine during and after the Lariam Study, Canada continued to administer and order its troops and support personnel to take Mefloquine without informing them of potential adverse effects. Throughout the 1990s and continuing until 2003, over 90% of CAF Members who were deployed in regions where there was a risk of contracting malaria were ordered to take Mefloquine. Between 2004 and 2009, the rate of prescription of Mefloquine to CAF Members serving in malarial regions was approximately 50%. By 2016, that number dropped to less than 2%. In June 2017, DND announced that Mefloquine would no longer be prescribed unless either a CAF Member requests it, or as a last resort if it is not possible to prescribe other anti-malarial drugs because of contraindications.
30. From its initial use in 1992, the CAF ordered CAF Members to take Mefloquine in a number of deployments around the world including to Somalia, Cambodia, Mozambique, Papua New Guinea, Central African Republic, Western Sahara, Rwanda, Angola, Ethiopia, Eritrea, Sierra Leone, Democratic Republic of Congo, East Timor and Afghanistan. In total, CAF ordered approximately 18,000 CAF Members to take Mefloquine.

CAF Members suffer serious side effects and problems

31. CAF Members who were forced by the Government to take Mefloquine have reported serious neurological and psychiatric side effects caused by Mefloquine including debilitating mood issues, aggression, bouts of explosive anger, violent behavior, night terrors, panic attacks, anxiety, paranoia, hallucinations, suicidal thoughts, psychotic behavior, memory loss, depression, convulsions, dizziness, vertigo, tinnitus, loss of balance and more.
32. The neurological and psychiatric side effects caused by Mefloquine have had catastrophic impacts on the lives of hundreds of CAF Members and their families. The neurological and

psychiatric damage done by Mefloquine has lead to suicide, ruined marriages, lost jobs, homes and families, permanent disability, and ruined lives.

Continued denial of problem by the Government

33. Throughout the relevant period, and up to the present time, the Government has and continues to, on both an individual and systemic level, wilfully deny and conceal the risks posed by Mefloquine to CAF Members. This willful concealment includes, but is not limited to the following:
 - a. DND and CAF has consistently denied any risk post by Mefloquine to CAF Members.
 - b. The Government prematurely shut down the Commission of Inquiry into the Deployment of Canadian Forces to Somalia prior to it being able to consider Mefloquine.
 - c. In 1999, representatives of the Government testified at the House of Commons Standing Committee on Public Accounts. A representative from Health Canada stated that it “was confident that when used properly, Lariam is a drug that is safe and effective.” A representative from the Department of National Defence testified that Mefloquine has an “established record of safety and efficacy” and “was and is a safe and very effective anti-malarial drug,” and “neither the health nor the safety of Canadian Forces personnel were compromised.”
 - d. In 2016, the Surgeon General Brigadier, General Hugh MacKay, told the House of Commons Veterans Affairs Committee that he did not think there was sound science behind the assertion that the drug has long-term side effects.
 - e. In 2017, DND and CAF released a “Surgeon General Report on Mefloquine” written by the Surgeon General’s Task Force on Mefloquine. This report continued to deny and wilfully conceal the risks posed by Mefloquine, stating “[w]e did not identify any evidence (that met our inclusion criteria) addressing potential long term adverse effects of Mefloquine or other MCP agents on health.”
 - f. In 2017, Health Canada stated that there was limited evidence supporting that long-lasting and permanent neurological and psychiatric adverse events are caused by the use of Mefloquine.

- g. In June 2017, a subset of the Standing Committee on Veterans Affairs issued a supplementary report *Mental Health of Canadian Veterans* in which it recommended that “the Government of Canada, in cooperation with all federal, provincial and international institutions concerned, initiate an independent research program to study the long term neurotoxicity of Mefloquine. The research program should be in place no later than 12 months from the day the report is tabled in the House of Commons.” This recommendation was not adopted by the Government.

CLAIMS OF THE PLAINTIFFS

William Aitken

34. Sergeant William Aitken (“Sgt Aitken”) is a former member of the Canadian Armed Forces (“CAF”). He joined the CAF in 1985 and served until 2009. Sgt Aitken was deployed to Somalia from 1992 – 1993.
35. Sgt Aitken resides in Cardinal, Ontario.
36. Sgt Aitken was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Aitken suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, rage issues, fear of crowds, hypervigilance, anxiety attacks, restlessness, nausea, and headaches.

Brenda Campbell

37. Master Corporal Brenda Campbell (“MCpl Campbell”) is a former member of the CAF. She joined the CAF in 1980 and served until 2008. MCpl Campbell was deployed to Somalia from 1992 – 1993.
38. MCpl Campbell resides in Lower Sackville, Nova Scotia.
39. MCpl Campbell was ordered to take Mefloquine prior to and during her deployment to Somalia. She began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Campbell suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, rage issues,

paranoia, fear of crowds, hypervigilance, anxiety attacks, difficulty concentrating, imbalance, nausea, and headaches.

Tom Goodbody

40. Corporal Tom Goodbody (“Cpl Goodbody”) is a former member of the CAF. He joined the CAF in 1985 and served until 1994. Cpl Goodbody was deployed to Somalia in 1993.
41. Cpl Goodbody resides in Milton, Ontario.
42. Cpl Goodbody was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Goodbody suffered and continues to suffer from symptoms of Mefloquine toxicity, including vivid nightmares, sleep issues, short-term memory loss, hypervigilance, fear of crowds, anxiety and panic attacks, difficulty concentrating, and headaches.

Michael Hopping

43. Michael Hopping (“Hopping”) is a former member of the CAF. He joined the CAF in 1986 and served until 2015. Hopping was deployed to Somalia from 1992 – 1993, and Afghanistan in 2003 and 2010.
44. Hopping resides in Kensington, Prince Edward Island.
45. Hopping was ordered to take Mefloquine for his deployments to Somalia and his first tour in Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. Hopping suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, and mood changes.

Stephane Leroux

46. Sergeant Stephane Leroux (“Sgt Leroux”) is a former member of the CAF. He joined the CAF in 1983 and served until 2014. Sgt Leroux was deployed to Somalia in 1992 – 1993.
47. Leroux resides in Kingston, Ontario.
48. Sgt Leroux was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Leroux suffered and continues to suffer from symptoms of Mefloquine toxicity, including vivid nightmares,

sleep issues, anger issues, rage issues, paranoia, fear of crowds, hypervigilance, anxiety and panic attacks, difficulty concentrating, restlessness, nausea, and headaches.

Andy Mosienko

49. Master Corporal Andy Mosienko (“MCpl Mosienko”) is a former member of the CAF. He joined the CAF in 1982 and served until 2003. MCpl Mosienko was deployed to Somalia from 1992 – 1993.
50. MCpl Mosienko resides in Barrie, Ontario.
51. MCpl Mosienko was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Mosienko suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, severe anger issues, mood changes, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, restlessness, random dizzy spells with slight imbalance, nausea and headaches.

David Nyysola

52. Master Corporal David Nyysola (“MCpl Nyysola”) is a former member of the CAF. He joined the CAF in 1976 and served until 2006. MCpl Nyysola was deployed to Somalia from 1992 – 1993.
53. Nyysola resides in Kingston, Ontario.
54. MCpl Nyysola was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Nyysola suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, anger issues, mood changes, and restlessness.

Neil Dodsworth

55. Master Warrant Officer Neil Dodsworth (“MWO Dodsworth”) is a former member of the CAF. He joined the CAF in 1981 and served until 2016. MWO Dodsworth was deployed to Somalia from 1992 – 1993, and Afghanistan from 2003 – 2004 and 2011 – 2012.

56. MWO Dodsworth resides in Oromocto, New Brunswick.
57. MWO Dodsworth was ordered to take Mefloquine for his deployments to Somalia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Dodsworth suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, mood changes, anxiety attacks, difficulty concentrating and multitasking, random dizzy spells with slight imbalance, nausea, and frequent headaches.

Kevin Morrow

58. Sergeant Kevin Morrow (“Sgt Morrow”) is a former member of the CAF. He joined the CAF in 1977 and served until 1996. Sgt Morrow was deployed to Somalia from 1992 – 1993.
59. Sgt Morrow resides in Bourget, Ontario.
60. Sgt Morrow was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Morrow suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, anger issues, mood changes, hypervigilance, anxiety attacks, and random dizzy spells with slight imbalance.

Joseph Jasin

61. Master Corporal Joseph Jasin (“MCpl Jasin”) is a former member of the CAF. He joined the CAF in 1985 and served until 1995. MCpl Jasin was deployed to Somalia from 1992 – 1993.
62. MCpl Jasin resides in Winnipeg, Manitoba.
63. MCpl Jasin was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Jasin suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, rage issues, mood changes, paranoia, fear of crowds, hypervigilance, anxiety and panic attacks, random dizzy spells with slight imbalance, and nausea and headaches.

Paul Morneau

- 64. Colonel Paul Morneau ("Col Morneau") is a former member of the CAF. He joined the CAF in 1975 and served until 2009. Col Morneau was deployed to Somalia in 1992.
- 65. Col Morneau resides in Ottawa, Ontario.
- 66. Col Morneau was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Col Morneau suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, rage issues, mood changes, paranoia, and difficulty concentrating and multitasking.

Colin Wilms

- 67. Colin Wilms ("Wilms") is a former member of the CAF. He joined the CAF in 1989 and served until 2008. Wilms was deployed to Somalia in 1993 and Afghanistan in 2003.
- 68. Wilms resides in Victoria, British Columbia.
- 69. Wilms was ordered to take Mefloquine for his deployments to Somalia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. Wilms suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, and anxiety attacks.

Jamie P. Grenier

- 70. Corporal Jamie P. Grenier ("Cpl Grenier") is a former member of the CAF. He joined the CAF in 1991 and served until 1997 at the end of his contract. Cpl Grenier was deployed to Somalia from 1992 – 1993.
- 71. Cpl Grenier resides in Welland, Ontario.
- 72. Cpl Grenier was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Grenier suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, anger issues, mood changes, difficulty concentrating, nausea, and headaches.

John Arthur Armstrong

73. Corporal John Arthur Armstrong ("Cpl Armstrong") is a former member of the CAF. He joined the CAF in 1986 and served until 2004. Cpl Armstrong was deployed to Somalia in 1992.
74. Cpl Armstrong resides in St. Albert, Alberta.
75. Cpl Armstrong was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Armstrong suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, vivid nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.

Chris Hodd

76. Chris Hodd ("Hodd") is a former member of the CAF. He joined the CAF in 1985 and served until 2010. Hodd was deployed to Somalia in 1993.
77. Hodd resides in Rusagonis, New Brunswick.
78. Hodd was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Hodd suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, anxiety and panic attacks, random dizzy spells, and nausea with headaches.

Steven M.D. Barton

79. Corporal Steven M.D. Barton ("Cpl Barton") is a former member of the CAF. He joined the CAF in 1981 and served until 2004. Cpl Barton was deployed to Somalia from 1992 – 1993.
80. Cpl Barton resides in Havelock, Ontario.

81. Cpl Barton was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Barton suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, mood changes, paranoia, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.
82. Cpl Barton continues to suffer from nightmares, intolerance level issues, anger issues, and fear of crowds.

Alan Brown

83. Warrant Officer Alan Brown (“WO Brown”) is a former member of the CAF. He joined the CAF in 1989 and served until 2017. WO Brown was deployed to Somalia from 1992 – 1993.
84. WO Brown resides in Trenton, Ontario.
85. WO Brown was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Brown suffered from symptoms of Mefloquine toxicity, including vivid dreams, nightmares, sleep issues, anger issues, intolerance level issues, difficulty concentrating, and nausea. He continues to suffer from anger issues, and intolerance level issues.

Tony Hill

86. Chief Warrant Officer Tony Hill (“CWO Hill”) is a former member of the CAF. He joined the CAF in 1986 and served until 2017. CWO Hill was deployed to Somalia from 1992 – 1993, Haiti from 1995 – 1996, and Afghanistan from 2003 – 2004 and 2007 – 2008.
87. CWO Hill resides in Fonthill, Ontario.
88. CWO Hill was ordered to take Mefloquine during his deployments to Somalia, Haiti and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. CWO Hill suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and

panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.

Trent Hollahan

89. Captain Trent Hollahan (“Capt Hollahan”) is a former member of the CAF. He joined the CAF in 1986 and served until 2013. Capt Hollahan was deployed to Somalia from 1992 – 1993, Rwanda in July 1994 and from 1994 – 1995, and Afghanistan from 2005 – 2006.
90. Capt Hollahan resides in South Frontenac, Ontario.
91. Capt Hollahan was ordered to take Mefloquine during his deployments to Somalia, Rwanda and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. Capt Hollahan continues to suffer from symptoms of Mefloquine toxicity, including nightmares, short-term memory loss, mood changes, rage issues, and anxiety and panic attacks.

Gerard Moores

92. Warrant Officer Gerard Moores (“WO Moores”) is a former member of the CAF. He joined the CAF in 1987 and served until 2013. WO Moores was deployed to Somalia from 1992 – 1993, and Afghanistan in 2006 and 2011.
93. WO Moores resides in Calgary, Alberta.
94. WO Moores was ordered to take Mefloquine during his deployments to Somalia and his first tour to Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Moores suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, and difficulty concentrating and multitasking.

Darren Verville

95. Corporal Darren Verville (“Cpl Verville”) is a former member of the CAF. He joined the CAF in 1989 and served until 2017. Cpl Verville was deployed to Somalia in 1993.
96. Cpl Verville resides in Pembroke, Ontario.

97. Cpl Verville was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Verville suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.
98. Cpl Verville continues to suffer from nightmares, sleep issues, mood changes, anxiety attacks, difficulty concentrating, random dizzy spells, and headaches.

John Downs

99. Sergeant John Downs ("Sgt Downs") is a former member of the CAF. He joined the CAF in 1981 and served until 2003. Sgt Downs was deployed to Somalia in 1993 and Rwanda in 1994.
100. Sgt Downs resides in Kingston, Ontario.
101. Sgt Downs was ordered to take Mefloquine during his deployments to Somalia and Rwanda. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Downs suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, rage issues, fear of crowds, difficulty concentrating and multitasking, and nausea with headaches.

Dino Simone

102. Master Corporal Dino Simone ("MCpl Simone") is a former member of the CAF. He joined the CAF in 1989 and served until 2006. MCpl Simone was deployed to Somalia from 1992 – 1993.
103. MCpl Simone resides in Bathurst, New Brunswick.
104. MCpl Simone was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Simone suffered and continues to suffer from symptoms of Mefloquine toxicity,

including dreams, nightmares, sleep issues, short-term memory loss, anger issues, and anxiety attacks.

Robert MacDonald

105. Corporal Robert MacDonald (“Cpl MacDonald”) is a former member of the CAF. He joined the CAF in 1991 and served until 2012. Cpl MacDonald was deployed to Somalia from 1992 – 1993.
106. Cpl MacDonald resides in Wetaskiwin, Alberta.
107. Cpl MacDonald was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl MacDonald suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells with slight imbalance, and nausea with headaches.

Norman Harrison

108. Second Class Petty Officer Norman Harrison (“PO 2 Harrison”) is a former member of the CAF. He joined the CAF in 1979 and served until 2005. PO 2 Harrison was deployed to Somalia from 1992 – 1993.
109. PO 2 Harrison resides in Rockland, Ontario.
110. PO 2 Harrison was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. PO 2 Harrison suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, mood changes, and fear of crowds.

Roderick MacKay

111. Roderick MacKay (“MacKay”) is a former member of the CAF. He joined the CAF in 1968 and retired in 2003. MacKay was deployed to Somalia in 1993.
112. MacKay resides in Orleans, Ontario.

113. MacKay was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MacKay suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, anger issues, intolerance level issues, mood changes, rage issues, paranoia, anxiety attacks, difficulty concentrating, and nausea.
114. MacKay continues to suffer from difficulty concentrating, imbalance, and anxiety and panic attacks.

Keith Losier

115. Keith Losier (“Losier”) is a former member of the CAF. He joined the CAF in 1975 and was released in 1977. He then re-joined as an infanteer in 1989 and served until 2004. Losier was deployed to Somalia from 1992 – 1993.
116. Losier resides in Kingston, Ontario.
117. Losier was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Losier suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, mood changes, rage issues, fear of crowds, anxiety attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.

Phillip Palmer

118. Warrant Officer Phillip Palmer (“WO Palmer”) is a former member of the CAF. He joined the CAF in 1988 and served until 2014. WO Palmer was deployed to Somalia from 1992 – 1993.
119. WO Palmer resides in Calgary, Alberta.
120. WO Palmer was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Palmer suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, anger issues, intolerance level issues, mood changes, rage issues,

paranoia, fear of crowds, panic attacks, difficulty concentrating, and nausea with headaches.

121. WO Palmer continues to suffer from mood swings, and anger issues.

Thomas Patrick Haney

122. Major Thomas Patrick Haney (“Maj Haney”) is a former member of the CAF. He joined the CAF in 1965 and served until 1994. Maj Haney was deployed to Qatar in 1991 and Somalia from 1993 – 1994.

123. Maj Haney resides in Gananoque, Ontario.

124. Maj Haney was ordered to take Mefloquine for his deployments to Qatar and Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Maj Haney suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, mood issues, rage issues, paranoia, and difficulty concentrating.

Rickie Chaykowski

125. Master Warrant Officer Rickie Chaykowski (“MWO Chaykowski”) is a former member of the CAF. He joined the CAF in 1978 and retired in 2008. MWO Chaykowski was deployed to Somalia from 1992 – 1993.

126. MWO Chaykowski resides in Kingston, Ontario.

127. MWO Chaykowski was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Chaykowski suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, mood changes, fear of crowds, anxiety attacks, and difficulty concentrating. He now often has serious attacks of benign positional vertigo.

Peter Oland

128. Sergeant Peter Oland (“Sgt Oland”) is a former member of the CAF. He joined the CAF in 1988 and served until 2017. Sgt Oland was deployed to Somalia in 1993.

129. Sgt Oland resides in Petawawa, Ontario.

130. Sgt Oland was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Oland suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, and sleep issues.

John Ralph McMillan

131. Second Class Petty Officer John Ralph McMillan ("PO 2 McMillan") is a former member of the CAF. He joined the CAF in 1973 and served until 2003. PO 2 McMillan was deployed to Somalia in 1992.
132. PO 2 McMillan resides in Dartmouth, Nova Scotia.
133. PO 2 McMillan was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. PO 2 McMillan suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, anger issues, intolerance level issues, mood changes, rage issues, and paranoia.

Gary John Reid

134. Warrant Officer Gary John Reid ("WO Reid") is a former member of the CAF. He joined the CAF in 1981 and served until 2007. WO Reid was deployed to Somalia from 1992 – 1993.
135. WO Reid resides in Aylesford, Nova Scotia.
136. WO Reid was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Reid suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, rage issues, mood changes, fear of crowds, anxiety and panic attacks, random dizzy spells, and severe headaches. He continues to suffer from nightmares, sleep issues, anxiety attacks, and random dizzy spells.

Jason Claude Flanders

137. Major Jason Claude Flanders (“Maj Flanders”) is a former member of the CAF. He joined the CAF in 1988 and served until 2014. Maj Flanders was deployed to Somalia from 1992 – 1993, and Afghanistan in 2002, 2003, 2005 and 2010.
138. Maj Flanders resides in Vernon, British Columbia.
139. Maj Flanders was ordered to take Mefloquine for his deployments to Somalia and his second tour in Afghanistan in 2003. He began experiencing serious adverse effects shortly after taking Mefloquine. Maj Flanders suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, difficulty concentrating, and random dizzy spells with slight imbalance.

Jody Danial Gillis

140. Corporal Jody Danial Gillis (“Cpl Gillis”) is a former member of the CAF. He joined the CAF in 1986 and served until 1999. Cpl Gillis was deployed to Somalia from 1992 – 1993.
141. Cpl Gillis resides in Stayner, Ontario.
142. Cpl Gillis was ordered to take Mefloquine while deployed to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Gillis suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, anxiety and panic attacks, difficulty concentrating and multitasking, and nausea with headaches. He continues to suffer from dreams, nightmares, anger issues, and mood changes.

Miles Walton

143. Leading Seaman Miles Walton (“LS Walton”) is a former member of the CAF. He joined the CAF in 1989 and served until 1995 at the end of his contract. LS Walton was deployed to Somalia from 1992 – 1993.
144. LS Walton resides in Edmonton, Alberta.

145. LS Walton was ordered to take Mefloquine while deployed to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. LS Walton suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, anger issues, intolerance level issues, and mood changes.

Joseph (Andre) Vaillancourt

146. Corporal Joseph (Andre) Vaillancourt (“Cpl Vaillancourt”) is a former member of the CAF. He joined the CAF in 1983 and served until 1995. Cpl Vaillancourt was deployed to Somalia from 1992 – 1993.
147. Cpl Vaillancourt resides in Matheson, Ontario.
148. Cpl Vaillancourt was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Vaillancourt suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, restlessness, random dizzy spells, and nausea with headaches.

Dean Hiscock

149. Master Warrant Officer Dean Hiscock (“MWO Hiscock”) is a former member of the CAF. He joined the CAF in 1988 and retired in 2018. MWO Hiscock was deployed to Somalia in 1993.
150. MWO Hiscock resides in Petawawa, Ontario.
151. MWO Hiscock was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Hiscock suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating, random dizzy spells, and headaches. He continues to suffer from nightmares, short-term memory

loss, anger issues, mood changes, anxiety attacks, difficulty multitasking, and severe headaches.

Brian Peter Jefferson

152. Corporal Brian Peter Jefferson (“Cpl Jefferson”) is a former member of the CAF. He joined the CAF in 1989 and served until 2008. Cpl Jefferson was deployed to Somalia from 1992 – 1993.

153. Cpl Jefferson resides in Pembroke, Ontario.

154. Cpl Jefferson was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Jefferson suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, hypervigilance, and anxiety and panic attacks. He continues to suffer from short-term memory loss, anger issues, and hypervigilance.

Brian McGean

155. Sergeant Brian McGean (“Sgt McGean”) is a former member of the CAF. He joined the CAF in 1981 and served until 2001. Sgt McGean was deployed to Somalia in 1993.

156. Sgt McGean resides in Ingonish Beach, Nova Scotia.

157. Sgt McGean was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt McGean suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, and random dizzy spells.

Brent Countway

158. Sergeant Brent Countway (“Sgt Countway”) is a former member of the CAF. He joined the CAF in 1988 and served until 2002. Sgt Countway was deployed to Somalia from 1992 – 1993 and the Central African Republic in 1997.

159. Sgt Countway resides in Brookfield, Nova Scotia.
160. Sgt Countway was ordered to take Mefloquine while deployed to Somalia and the Central African Republic. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Countway suffered from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, and nausea with headaches.
161. Sgt Countway continues to suffer from short-term memory loss, intolerance level issues, mood changes, paranoia, fear of crowds, and anxiety and panic attacks.

Paul Turmel

162. Corporal Paul Turmel (“Cpl Turmel”) is a former member of the CAF. He joined the CAF in 1983 and served until 2008. Cpl Turmel was deployed to Somalia from 1992 – 1993.
163. Cpl Turmel resides in Kingston, Nova Scotia.
164. Cpl Turmel was ordered to take Mefloquine for his deployment to Somalia.
165. Cpl Turmel began experiencing serious adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.

Eric St. Gelais

166. Eric St. Gelais (“St. Gelais”) is a former member of the CAF. He joined the CAF in 1990 and served until 2010. St. Gelais was deployed to Somalia from 1992 – 1993.
167. St. Gelais resides in St-Gabriel-de-Valcartier, Québec.
168. St. Gelais was ordered to take Mefloquine prior to, during, and after his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. St. Gelais suffered from symptoms of Mefloquine toxicity, including dreams, nightmares,

anger issues, mood changes, and anxiety attacks. He continues to suffer from sleep issues and anxiety attacks.

Robert Farquhar

169. Officer Cadet Robert Farquhar (“OCdt Farquhar”) is a former member of the CAF. He joined the CAF in 1989 and served until 2017. OCdt Farquhar was deployed to Somalia from 1992 – 1993.
170. OCdt Farquhar resides in Ilderton, Ontario.
171. OCdt Farquhar was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. OCdt Farquhar suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, difficulty concentrating and multitasking, random dizzy spells, and nausea with headaches.

Dwayne Spencer

172. Dwayne Spencer (“Spencer”) is a former member of the CAF. He joined the CAF in 1985 and served until 2008. Spencer was deployed to Somalia from 1992 – 1993, and Rwanda in 1994 and 1996.
173. Spencer resides in Chilliwack, British Columbia.
174. Spencer was ordered to take Mefloquine for his deployments to Somalia and Rwanda. He began experiencing serious adverse effects shortly after taking Mefloquine. Spencer suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, short-term memory loss, anger issues, anxiety attacks, and imbalance.

Ronald Herbert O’Connor

175. Master Warrant Officer Ronald Herbert O’Connor (“MWO O’Connor”) is a former member of the CAF. He joined the CAF in 1974 and served until 2003. MWO O’Connor was deployed to Somalia from 1992 – 1993.
176. MWO O’Connor resides in Ingersoll, Ontario.

177. MWO O'Connor was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO O'Connor suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, and difficulty concentrating.

Kevin John Stewart

178. Second Class Chief Petty Officer Kevin John Stewart ("CPO 2 Stewart") is a former member of the CAF. He joined the CAF in 1978 and retired in 2010. CPO 2 Stewart was deployed to Somalia from 1992 – 1993.
179. CPO 2 Stewart resides in Smith Falls, Ontario.
180. CPO 2 Stewart was ordered to take Mefloquine while deployed to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. CPO 2 Stewart suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, anger issues, intolerance level issues, mood changes, rage issues, paranoia, fear of crowds, anxiety and panic attacks, and slight imbalance.

Martin Gagnon

181. Infantryman Martin Gagnon ("IFN Gagnon") is a former member of the CAF. He joined the CAF in 1990 and served until 1993. IFN Gagnon was deployed to Somalia in 1993.
182. IFN Gagnon resides in Stoneham, Quebec.
183. IFN Gagnon was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. IFN Gagnon continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, rage issues, mood changes, paranoia, anxiety and panic attacks, difficulty concentrating and multitasking, and restlessness.

Perry Antle

184. Sergeant Perry Antle ("Sgt Antle") is a former member of the CAF. He joined the CAF in 1990 and served until 2011. Sgt Antle was deployed to Somalia from 1992 – 1993, Rwanda from 1994 – 1995 and Afghanistan in 2003.

185. Sgt Antle resides in Kincardine, Ontario.
186. Sgt Antle was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Antle suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, anger issues, intolerance level issues, hypervigilance, panic attacks, slight imbalance, and headaches.

Tracy Barnsdale

187. Leading Seaman Tracy Barnsdale ("LS Barnsdale") is a former member of the CAF. She joined the CAF in 1991 and served until 2009. LS Barnsdale was deployed to Somalia from 1992 – 1993.
188. LS Barnsdale resides in Sooke, British Columbia.
189. LS Barnsdale was ordered to take Mefloquine for her deployment to Somalia. She began experiencing serious adverse effects shortly after taking Mefloquine. LS Barnsdale suffered from symptoms of Mefloquine toxicity, including nightmares, anger issues, fear of crowds, hypervigilance, anxiety and panic attacks, and severe headaches. She continues to suffer from nightmares, sleep issues, anger issues, anxiety attacks, and difficulty concentrating.

Eamonn Barry

190. Master Warrant Officer Eamonn Barry ("MWO Barry") is a former member of the CAF. He joined the CAF in 1982 and served until 2014. MWO Barry was deployed to Somalia for Operation Deliverance.
191. MWO Barry resides in Ottawa, Ontario.
192. MWO Barry was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Barry suffered from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, rage issues, and difficulty concentrating. He continues to suffer from short-term memory loss and difficulty concentrating.

Graham Ford

193. Graham Ford ("Ford") is a former member of the CAF. He joined the CAF in 1986 and served until 2007. Ford was deployed to Somalia from 1992 – 1993 and Rwanda in 1994.
194. Ford resides in Chilliwack, British Columbia.
195. Ford was ordered to take Mefloquine for his deployments to Somalia and Rwanda. He began experiencing serious adverse effects shortly after taking Mefloquine. Ford suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, fear of crowds, difficulty concentrating, and random dizzy spells.

Philippe Joseph Cere

196. Corporal Philippe Joseph Cere ("Cpl Cere") is a former member of the CAF. He joined the CAF in 1990 and served until 1996. Cpl Cere was deployed to Somalia from 1992 – 1993.
197. Cpl Cere resides in Fort Saskatchewan, Alberta.
198. Cpl Cere was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Cere suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, short-term memory loss, anger issues, mood changes, and fear of crowds.

Mason Edward Huddleston

199. Mason Edward Huddleston ("Huddleston") is a former member of the CAF. He joined the CAF in 1980 and served until 1999. Huddleston was deployed to Somalia in 1993.
200. Huddleston resides in Plainfield, Ontario.
201. Huddleston was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Huddleston suffered and continues to suffer from symptoms of Mefloquine toxicity, including nightmares, sleep issues, anger issues, and anxiety attacks.

Christopher Breckon

202. Christopher Breckon (“Breckon”) is a former member of the CAF. He joined the CAF in 1986 and served until 2002. Breckon was deployed to Somalia from 1992 – 1993.
203. Breckon resides in Kingston, Nova Scotia.
204. Breckon was ordered to take Mefloquine for his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Breckon suffered and continues to suffer from symptoms of Mefloquine toxicity, including dreams, nightmares, sleep issues, short-term memory loss, anger issues, rage issues, mood changes, paranoia, fear of crowds, hypervigilance, anxiety and panic attacks, difficulty concentrating and multitasking, restlessness, random dizzy spells, and nausea with headaches.

CAUSES OF ACTION

205. Pursuant to s. 3 of the *Crown Liability and Proceedings Act*, R.S.C., 1985, c. C-50, the Defendant is directly and vicariously liable for any wrongs committed by DND, CAF or any of its employees and agents.

Negligence

206. The Government owed a duty of care to CAF Members. The Government knew or ought to have known that if it carried out its duties negligently, it could reasonably cause the kind of harm that was in fact suffered by the Plaintiffs.
207. The Government was required to:
- a. use reasonable care to ensure the safety and well-being of the Plaintiffs;
 - b. obtain the informed consent of the Plaintiffs before requiring them to take Mefloquine;
 - c. use reasonable care in the operation, administration, prescribing, dispensing, managing, supervising, and monitoring of the use of Mefloquine; and
 - d. to follow the Lariam Study protocol and to adhere to international and Canadian standards regarding conducting experiments on human beings.
208. The Government breached that duty of care by:

- a. failing to follow the Lariam Study protocol;
- b. failing to adhere to international and Canadian standards regarding experiments on human beings;
- c. failing to obtain informed consent from the Plaintiffs to participate in the Lariam Study or to take Mefloquine;
- d. ordering the Plaintiffs, on pain of court martial, to take a drug that it knew or ought to have known was not safe and could have serious and long term adverse health effects;
- e. ordering the Plaintiffs to take Mefloquine without conducting a proper medical screening for contraindications;
- f. failing to provide a medication guide or other information to the Plaintiffs regarding the proper use of Mefloquine;
- g. failing to adequately warn the Plaintiffs of the risks associated with taking Mefloquine;
- h. failing to warn the Plaintiffs not to consume alcohol while taking Mefloquine because of the risk of adverse interactions with alcohol, including the greatly increased risk of experiencing mental problems;
- i. failing to tell the Plaintiffs to immediately stop taking Mefloquine if they experienced any of the following symptoms: mental problems, including anxiety, depression, paranoia, hallucinations, feeling restless, confused or disoriented, unusual behavior or changes to mood; nervous system changes, including dizziness, spinning, ringing in the ears, loss of balance, seizures or convulsions; or issues with nerves, including prickling or tingling sensations, numbness and loss of an ability to feel pain or changes in temperature, a burning or sharp pain, loss of balance or co-ordination, feeling pain from a very light touch, or muscle weakness or paralysis;
- j. ordering the Plaintiffs to continue taking Mefloquine after the above symptoms were reported;
- k. failing to monitor or record adverse reactions and complications experienced by the Plaintiffs and other CAF Members as a result of taking Mefloquine;
- l. failing to properly investigate the side effects, adverse reactions and complications experienced by the Plaintiffs and other CAF Members as a result of taking Mefloquine;

- m. failing to report side effects, adverse reactions and complications experienced by the Plaintiffs and other CAF Members to Health Canada or the manufacturer of the drug;
 - n. failing to consider and account for the risk of interaction of Mefloquine with other psychological conditions and injuries commonly experienced by CAF Members including anxiety, depression, post-traumatic stress disorder and traumatic brain injury;
 - o. failing to provide and/or consider suitable alternative anti-malarial drugs to Mefloquine;
 - p. requiring that the Plaintiffs take an anti-malarial drug that was unsuitable for use in a military or combat setting;
 - q. failing to provide necessary medical treatment to the Plaintiffs in a timely manner;
 - r. failing to refer the Plaintiffs to appropriate medical specialists in a timely manner, or at all;
 - s. failing to administer Mefloquine to the Plaintiffs in a safe and competent manner;
 - t. putting its own interests ahead of the interest of the Plaintiffs by ignoring and remaining wilfully blind to the risks of Mefloquine to individual CAF Members; and
 - u. such further and other particulars as may become apparent and counsel may advise.
209. As a result of the Government's breach of its duty of care, the Plaintiffs suffered damages as set out below.

Negligent Misrepresentation

210. The Plaintiffs were highly dependent on information provided by the Government regarding the risks posed by Mefloquine. The Government knew that the Plaintiffs would rely on information provided by DND and CAF to the Plaintiffs in order to make decisions regarding risks to their health and safety.
211. DND and CAF repeatedly represented to the Plaintiffs and CAF Members as a whole that Mefloquine was safe. These representations specifically downplayed or denied the risks associated with Mefloquine and were inaccurate, incomplete, false, deceptive and/or misleading.

212. Canada knew or ought to have known that the representations made by CAF and DND regarding the safety of Mefloquine were inaccurate, incomplete, false, deceptive and/or misleading.
213. The Plaintiffs state that Canada owed a duty of care to the Plaintiffs and is liable in deceit and/or negligent misrepresentation for the Representations that were inaccurate, incomplete, false, deceptive and/or misleading and as a result of which the Plaintiffs suffered damages as set out below.

Breach of Fiduciary Duty

214. The Government owed the Plaintiffs a fiduciary duty. The relationship between the Plaintiffs and the Defendant is one of complete trust, reliance and dependency. While in the Canadian Armed Forces, the Government had extraordinary and unilateral powers over the lives of CAF Members. Because of the hierarchical and authoritarian command structure of the CAF, the binding nature of enrolment in the CAF, the oaths and declarations required by CAF Members, and the strict requirement to follow all orders of superiors, the Plaintiffs were in a position of complete vulnerability and dependence on the CAF and DND. In particular, the Plaintiffs were at the Government's mercy regarding what drugs they were ordered to take prior to and during deployment. Prior to and while deployed, the Government was solely responsible for the protection of the health, safety and well-being of the Plaintiffs.
215. The Government breached its fiduciary duties to the Plaintiffs. The particulars of the breach include:
- a. putting its own interests ahead of the interest of the Plaintiffs by using the Plaintiffs as nonconsenting and unwitting subjects in a clinical drug trial;
 - b. putting its own interests ahead of the interest of the Plaintiffs by ignoring and remaining wilfully blind to the risks of Mefloquine to individual CAF Members;
 - c. ordering the Plaintiffs to take Mefloquine;
 - d. ordering the Plaintiffs to take Mefloquine without conducting a proper medical screening for contraindications;

- e. ordering the Plaintiffs to continue taking Mefloquine after adverse symptoms were reported;
- f. failing to follow the requirements of the Lariam Study;
- g. failing to adhere to international and Canadian standards regarding experiments on human beings; and
- h. failing to safeguard the physical and psychological health of the CAF Members.

Charter claim (breach of s. 7)

- 216. The Government's action in using the Plaintiffs as unwitting and nonconsenting subjects in an experimental clinical drug trial is an infringement of the Plaintiffs' right to security of the person as enshrined in s. 7 of the *Canadian Charter of Rights and Freedoms*. This infringement is not justified in accordance with the principles of fundamental justice.
- 217. The Government's action in forcing the Plaintiffs to take a drug that seriously impaired the Plaintiffs' mental and physical health and caused severe psychological harm is an infringement of the Plaintiffs' right to security of the person as enshrined in s. 7 of the *Canadian Charter of Rights and Freedoms*. This infringement is not justified in accordance with the principles of fundamental justice.
- 218. The breaches of the Plaintiffs' *Charter* rights are not demonstrably justified in a free and democratic society.
- 219. The Plaintiffs are entitled to a declaration that their *Charter* rights were infringed.
- 220. The Plaintiffs are also entitled to a monetary remedy pursuant to section 24(1) of the *Charter* in order to:
 - a. compensate the Plaintiffs for pain and suffering;
 - b. vindicate the Plaintiffs' fundamental human rights; and
 - c. deter systematic violations of a similar nature by the Government in future.

Battery

221. The Plaintiffs assert that the forced ingestion of Mefloquine without their informed consent as part of a clinical drug trial, in the circumstances pleaded above, amounts to battery.

Wilful Concealment

222. The Government has and continues to willfully conceal the fact that the injuries suffered by the Plaintiffs were caused by the fact that the Government ordered CAF Members to take Mefloquine.

Mental and psychological state

223. The Plaintiffs have suffered severe and debilitating mental and psychological conditions as described above as a result of taking Mefloquine and otherwise. As a result of these severe and debilitating mental and psychological conditions, the Plaintiffs were previously incapable of commencing a claim against the Defendant.

Misdiagnosis

224. The CAF Members and Plaintiffs have been misdiagnosed by doctors, including doctors employed by the Government, as suffering only PTSD or Traumatic Brain Injuries, when in fact, the Plaintiffs were suffering from neurological and psychological injuries caused by Mefloquine.

DAMAGES

225. The Plaintiffs have suffered at the hands of the Government, and are entitled to damages, including pecuniary and non-pecuniary general damages, special damages and aggravated, exemplary and punitive damages.
226. Both before and after the Government ordered CAF Members to take Mefloquine, the Government knew or ought to have known that Mefloquine can cause, contribute to, or materially increase the risk of neurological and psychological harm.
227. As a result of being forced to take Mefloquine as part of the Lariam Study, the Plaintiffs have suffered and continue to suffer prolonged psychological symptoms including anxiety, paranoia, depression, hallucinations, thoughts of suicide or self harm, aggression, bouts of

explosive anger, violent behavior, night terrors, panic attacks, memory loss, and a lack of emotional regulation.

228. As a result of being forced to take Mefloquine, the Plaintiffs have suffered and continue to suffer prolonged neurological symptoms including dizziness, vertigo, loss of balance, tinnitus, convulsions and insomnia.
229. As a result of being forced to take Mefloquine, the Plaintiffs have suffered and continue to suffer prolonged neuropathological symptoms including prickling or tingling sensations, numbness and loss of an ability to feel pain or changes in temperature, a burning or sharp pain, loss of balance or co-ordination, feeling pain from a very light touch, and muscle weakness or paralysis.
230. As a result of the actions, errors and omissions of the Government as set out above, the Plaintiffs suffered damages including:
 - a. Creation or exacerbation of neurological disorders and illnesses, including damage to the brain stem and nervous system;
 - b. Creation or exacerbation of psychological disorders and illnesses;
 - c. Creation or exacerbation of neuropathological disorders and illnesses;
 - d. Emotional and psychological harm and distress;
 - e. Impairment of mental and emotional health;
 - f. Impairment of ability to participate in or transition to a normal family life, including alienation from family, spouses and children;
 - g. Impairment of ability to perform household chores and to perform certain daily tasks;
 - h. Impairment of ability to participate in recreational, school, social, and athletic activities;
 - i. Impairment of the capacity to function in the work place and a corresponding loss of income, a loss of competitive advantage in the employment field and a diminution of income earning capacity;
 - j. Pain and suffering, a loss of enjoyment of life and a loss of amenities; and

k. Such further and other harms and injuries as shall be discovered and/or particularized.

231. As a further result of the injuries suffered, the Plaintiffs have incurred, and will continue to incur expenses, including expenses for: hospitalization, medication, therapy, rehabilitation, medical treatment, and other forms of care and out-of-pocket expenses, the full particulars of which are not within the Plaintiffs' knowledge at this time.

Punitive, Aggravated and Exemplary Damages

232. The Government forced the Plaintiffs, on pain of court martial and imprisonment, to take a drug that has caused great neurological and psychological damage. The Canadian Government treated the issue surrounding Mefloquine with wanton and callus disregard for the Plaintiffs' interests, health, safety and well-being. Canada has responded to the growing crisis regarding Mefloquine toxicity within the military veteran community by concealing, denying and downplaying the problem, even as those suffering from Mefloquine toxicity continue to die by suicide.

233. Canada's wrongful conduct is of such a reprehensible nature as to warrant an award of aggravated, exemplary and/or punitive damages in order to deter Canada from taking such wrongful acts in the future.

Provincial Health Insurers

234. As a consequence of the misconduct set out above, OHIP and the comparable provincial and territorial health insurers have incurred various expenses with respect to the medical treatment of the Plaintiffs. As such, OHIP and other provincial and territorial health insurers have suffered, and will continue to suffer, damages including the ongoing medical support for the Plaintiffs, and they are entitled to be compensated by virtue of their subrogated and direct rights of action in respect of all past and future insured services. This action is maintained on behalf of OHIP and all other provincial and territorial health insurers.

APPLICABLE LEGISLATION

235. The Plaintiffs plead and rely upon the following:

Federal Courts Act, R.S.C., 1985, c. F-7;

Federal Courts Rules, (SOR/98-106);

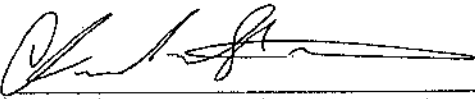
Crown Liability and Proceedings Act, R.S.C., 1985, c. C-50, ss. 3, 21, 22, and 23;

Canadian Charter of Rights and Freedoms, ss. 7 and 24; and

National Defence Act, R.S.C., 1985, c. N-5.

236. The Plaintiffs propose that this action be tried at Toronto, Ontario.

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