



27 May 2016

MEDIA STATEMENT

BRITISH DEFENCE SELECT COMMITTEE REPORT ON MEFLOQUINE WARRIORS FEEL BETRAYED

A British Defence Select Committee has released its report into the use of the dangerous antimalarial drug Lariam (also Mefloquine) in the British Armed Forces. This drug is still used by the Australian Defence Force (ADF) today. A copy of the UK report can be accessed through the link below.

<http://www.publications.parliament.uk/pa/cm201516/cmselect/cmdfence/567/567.pdf>

ADSO welcomes the findings and recommendations of the UK Committee which include:

1. An acknowledgement of the apology to British military personnel by the Minister for Defence;
2. Lariam (mefloquine) to become the antimalarial of 'last resort' (effectively suspending it);
3. A recognition of the severe side effects and ongoing harm caused to many personnel;
4. Recognition that the Ministry of Defence has failed in the 'duty of care' to military personnel; and
5. A single point of contact be created for those affected and information be disseminated to military and civilian doctors about health issues related to Lariam.

A former British Chief of Armed Forces had called for the suspension of Mefloquine use. The British recommendations, by applying very strict conditions for its use as a drug of last resort, effectively achieves that aim.

Mefloquine should therefore also be effectively suspended in Australia.

Impacts for Australia and ADSO recommendations to Defence

- The British findings and recommendations need to be closely examined by Defence. Mefloquine should also be made a drug of 'last resort' in the ADF;
- The British military does not administer a loading dose for prophylaxis, a practice which is outside the manufacturer's recommendations. A loading dose provides an initial higher dose of the drug. This dangerous practice in the ADF must be halted immediately;
- Hundreds of ADF personnel, most now veterans, have been badly affected by exposure to Lariam (Mefloquine) or other quinolone antimalarials when taking part in poorly administered clinical trials;

- The ADF and Department of Veterans Affairs (DVA) response to this serious health issue has been inadequate;
- Urgent action is required to provide proper medical treatment and assistance to those affected by exposure to mefloquine and other antimalarial drugs;
- This should begin with an extensive outreach program to identify and assess all personnel who took these drugs. A single point of contact should be provided to those affected, from which a proactive health information system and medical review process can be administered;
- Australia, like the UK, needs to conduct a full and open parliamentary inquiry into mefloquine and the circumstances surrounding the use of large scale drug trails while troops were deployed on operations which have led to significant harm to hundreds of ADF personnel

The Townsville Mefloquine Forum in March 2016 raised most of these issues. To date no effective meaningful action has been taken by the ADF or DVA to assist those affected who feel betrayed.

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ADSO comprises of the following: The Defence Force Welfare Association (DFWA), Naval Association of Australia (NAA), RAAF Association (RAAFA), Royal Australian Regiment Corporation (RARC), Australian Special Air Service Association (ASASA), Vietnam Veterans Association of Australia (VVAA), the Australian Federation of Totally and Permanently Incapacitated Ex-Service Men and Women, the Fleet Air Arm Association of Australia, Partners of Veterans Association of Australia, Royal Australian Armoured Corps Corporation (RAACC), the National Malaya & Borneo Veterans Association Australia (NMBVAA), Defence Reserves Association (DRA), Australian Gulf War Veterans Association, Australian Commando Association, War Widows Guild, Military Police Association Australia (MPAA), and the Australian Army Apprentices Association.