

F I L E D	FEDERAL COURT COUR FÉDÉRALE	D É P O S É
	May 8, 2023	
Scinthura Seeraladevan		
Toronto, ONT	- 1 -	

Court File No. T-986-23

FEDERAL COURT

BETWEEN:

DAVID SIDNEY MCARDLE AND THE PLAINTIFFS SET OUT IN SCHEDULE “A”

PLAINTIFFS

and

HIS MAJESTY THE KING 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: May 8, 2023

ISSUED BY: _____
(Registry Officer)

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

TO: HIS MAJESTY THE KING 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, His Majesty the King in Right of Canada, owed and was in breach of statutory and common law duties to the Plaintiffs;
 - b. a Declaration that the Defendant is liable to the Plaintiffs for damages caused by the breach of statutory and common law duties;
 - c. general and aggravated damages in the amount of \$380,000.00;
 - d. a Declaration that the Defendant has breached the Plaintiffs' s. 7 rights under the *Canadian Charter of Rights and Freedoms* ("Charter");
 - e. damages for violation of the Plaintiffs' *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.
2. To the extent that Canada has a right to seek contribution, indemnity or an apportionment of damages from Hoffmann-La Roche, or any other third party at common law, in equity, or pursuant to statute, the Plaintiffs' claims are limited to the amount of the Plaintiffs' damages that would be apportioned to Canada in accordance with the relative degree of fault that is attributable to Canada. The Plaintiffs do not seek any damages for any portion of their loss that may be found to be attributable to the fault or liability of Hoffmann-La Roche, or any other third party, and for which Canada could claim contribution, indemnity or an apportionment at common law, in equity, or pursuant to statute.

OVERVIEW

3. From 1992 to 2017, the Canadian Armed Forces and the Department of National Defence ordered thousands of members of the Canadian Armed Forces (“CAF Members”) to take the anti-malarial drug Mefloquine before and while being deployed to malaria-endemic regions.
4. Mefloquine is a potent psychotropic anti-malarial drug that can cause severe and potentially permanent neurological and psychological health harms. The drug manufacturer 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. 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.
6. 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.
7. 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.

8. 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.
9. 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

10. The Defendant is His Majesty the King 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

11. The Plaintiffs are all members or former members of the Canadian Armed Forces who were ordered to take the anti-malarial drug Mefloquine, and who have suffered serious harms as a result (the “Plaintiffs”) or their family members (“Family Plaintiff(s)”).

Nature of relationship between Canada and the Plaintiffs

12. 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

13. 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.
14. 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 side effects 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.

15. 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.

16. 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.
17. 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.
18. 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.

The use of Mefloquine in the Canadian Armed Forces

19. Mefloquine was developed in a US military research facility in the 1970s. By the early 1990s, Mefloquine was the anti-malarial drug of choice for the Canadian military.
20. The drug was first issued to CAF Members during the 1992-1993 mission to Somalia. At the time, Mefloquine was not licenced in Canada, and the drug was given to CAF Members as part of a botched clinical trial, in which CAF failed to implement or follow proper protocols for clinical trials, and failed to obtain informed consent from CAF Members.
21. 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.

22. 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 ordered to take Mefloquine without screening and despite reports of side effects

23. 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”).
24. 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. In a particularly high profile instance, Lieutenant-General Romeo Dallaire (Ret’d) reported to DND headquarters that he was suffering from side effects from Mefloquine including issues with memory and thought process. In spite of this report, Lieutenant-General Dallaire was ordered to continue to take the drug, and told if he did not he would be court martialed.
25. Throughout, CAF and DND failed to keep records of reports of adverse reactions or side effects resulting from Mefloquine made by CAF Members.

CAF Members suffer serious side effects and problems

26. 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.

27. 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 led to suicide, ruined marriages, lost jobs, homes and families, permanent disability, and ruined lives.

Continued denial of problem by the Government

28. 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 posed 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 willfully 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

DAVID SIDNEY MCARDLE

- 29. Chief Warrant Officer David Sidney McArdle (“CWO McArdle”) is a former member of the CAF. He joined the CAF in 1974. CWO McArdle was deployed to Somalia in 1992-1993.
- 30. CWO McArdle resides in East Lawrencetown, Nova Scotia.
- 31. CWO McArdle was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, CWO McArdle suffered and continues to suffer from symptoms of Mefloquine toxicity, including bouts of explosive anger, paranoia, and insomnia.

JASON FOREMAN

- 32. Jason Foreman (“Foreman”) is a former member of the CAF. He joined the CAF in 1990 and served until 2003. Foreman was deployed to Somalia in 1992-1993.
- 33. Foreman resides in Walkerton, Ontario.

34. Foreman was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Foreman continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, bouts of explosive anger, mood disorders, paranoia, anxiety, panic attacks, restlessness, and dizziness.

ROGER RAYMOND LEBRUN

35. Corporal Roger Raymond Lebrun (“Cpl Lebrun”) is a former member of the CAF. He joined the CAF in 1984 and served until 2009. Cpl Lebrun was deployed to Somalia in 1993.
36. Cpl Lebrun resides in Tilbury, Ontario.
37. Cpl Lebrun was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Lebrun continues to suffer from symptoms of Mefloquine toxicity, including insomnia, bouts of explosive anger, mood disorders, paranoia, anxiety, and panic attacks.

MICHAEL EISAN

38. First Class Petty Officer Michael Eisan (“PO 1 Eisan”) is a former member of the CAF. He joined the CAF in 1991. PO 1 Eisan was deployed to Somalia in 1992-1993.
39. PO 1 Eisan resides in Porters Lake, Nova Scotia.
40. PO 1 Eisan was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. PO 1 Eisan suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, mood disorders, restlessness, and dizziness.

JOHANNE BARIL

41. Johanne Baril (“Baril”) is a former member of the CAF. He joined the CAF in 1986. Baril was deployed to Somalia in 1993.
42. Baril resides in Val Rita-Harty, Ontario.

43. Baril was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Baril suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, bouts of explosive anger, mood disorders, memory loss, restlessness, anxiety, paranoia, feelings of confusion, and issues with balance.

LOUIS SCHOOFS

44. Warrant Officer Louis Schoofs (“WO Schoofs”) is a former member of the CAF. He joined the CAF in 1982. WO Schoofs was deployed to Somalia in 1993.
45. WO Schoofs resides in Winnipeg, Manitoba.
46. WO Schoofs was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Schoofs suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, anxiety, tinnitus, mood disorders, and bouts of explosive anger.

LORNE COONEY

47. Sergeant Lorne Cooney (“Sgt Cooney”) is a former member of the CAF. He joined the CAF in 1979. Sgt Cooney was deployed to Somalia in 1992 and to Rwanda in 1994.
48. Sgt Cooney resides in Kingston, Ontario.
49. Sgt Cooney was ordered to take Mefloquine prior to and during his deployments to Somalia and Rwanda. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Cooney suffered and continues to suffer from symptoms of Mefloquine toxicity, including memory loss, mood disorders, bouts of explosive anger, restlessness, and feelings of confusion.

JOSEPH ALPHONSE LARADE

50. Master Warrant Officer Joseph Alphonse LaRade (“MWO LaRade”) is a former member of the CAF. He joined the CAF in 1972. MWO LaRade was deployed to Somalia in 1992 and 1993.

51. MWO LaRade resides in Cheticamp, Nova Scotia.
52. MWO LaRade was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO LaRade suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, mood disorders, bouts of explosive anger, paranoia, anxiety, panic attacks, restlessness, feelings of confusion, dizziness, and issues with balance.

MARK JONES

53. Master Warrant Officer Mark Jones (“MWO Jones”) is a current member of the CAF. He joined the CAF in 1990. MWO Jones was deployed to Somalia in 1993.
54. MWO Jones resides in Brighton, Ontario.
55. MWO Jones was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Jones suffered and continues to suffer from symptoms of Mefloquine toxicity, including memory loss, mood swings, restlessness, and feelings of confusion.

MATTHEW ALEXANDER MCKAY

56. Corporal Matthew Alexander McKay (“Cpl McKay”) is a former member of the CAF. He joined the CAF in 1988. Cpl McKay was deployed to Somalia in 1992.
57. Cpl McKay resides in Edmonton, Alberta.
58. Cpl McKay was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl McKay suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, memory loss, bouts of explosive anger, paranoia, restlessness, feelings of confusion, dizziness, and vertigo.

COLIN PAYNE

59. Corporal Colin Payne (“Cpl Payne”) is a former member of the CAF. He joined the CAF in 1988. Cpl Payne was deployed to Somalia in 1992.
60. Cpl Payne resides in Pasadena, Newfoundland and Labrador.
61. Cpl Payne was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Payne suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, night terrors, dizziness, restlessness, feelings of confusion, mood disorders, anxiety, depression, paranoia, and bouts of explosive anger.

SARAH ASHLEIGH CRITCHLEY

62. Leading Seaman Sarah Ashleigh Critchley (“LS Critchley”) is a former member of the CAF. She joined the CAF in 1989. LS Critchley was deployed to Somalia in 1992.
63. LS Critchley resides in Edmonton, Alberta.
64. LS Critchley was ordered to take Mefloquine prior to and during her deployment to Somalia. She began experiencing serious adverse effects shortly after taking Mefloquine. LS Critchley suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, bouts of explosive anger, depression, anxiety, and mood disorders.

RICHARD SHEPPARD

65. Richard Sheppard (“Sheppard”) is a former member of the CAF. He joined the CAF in 1989. Sheppard was deployed to Somalia in 1992.
66. Sheppard resides in Elmira, Ontario.
67. Sheppard was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, Sheppard suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, panic attacks, restlessness, depression, and bouts of explosive anger.

WILLIAM SCOTT LYSENS

68. Chief Petty Officer 2nd class William Scott Lysens (“CPO 2 Lysens”) is a former member of the CAF. He joined the CAF in 1990. CPO 2 Lysens was deployed to Somalia in 1992.
69. CPO 2 Lysens resides in Lawrencetown, Nova Scotia.
70. CPO 2 Lysens was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, CPO 2 Lysens suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, insomnia, bouts of explosive anger, paranoia, restlessness, and feelings of confusion.

DAVID SIDNEY MCARDLE

71. Chief Warrant Officer David Sidney McArdle (“CWO McArdle”) is a former member of the CAF. He joined the CAF in 1974. CWO McArdle was deployed to Somalia in 1992.
72. CWO McArdle resides in East Lawrencetown, Nova Scotia.
73. CWO McArdle was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, CWO McArdle suffered and continues to suffer from symptoms of Mefloquine toxicity, including bouts of explosive anger, paranoia, and insomnia.

ROBERT JOSEPH AURELE PATENAUDE

74. Robert Joseph Aurele Patenaude (“Patenaude”) is a former member of the CAF. He joined the CAF in 1991. Patenaude was deployed to Somalia in 1992.
75. Patenaude resides in Gatineau, Quebec.
76. Patenaude was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, Patenaude suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, bouts of explosive anger, paranoia, anxiety, restlessness, feelings of confusion, dizziness, and issues with balance.

MICHAEL SEBESTIEN

77. Sergeant Michael Sebestien (“Sgt Sebestien”) is a former member of the CAF. He joined the CAF in 1976. Sgt Sebestien was deployed to Kenya and Somalia in 1993.
78. Sgt Sebestien resides in Moncton, New Brunswick.
79. Sgt Sebestien was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine, Sgt Sebestien suffered and continues to suffer from symptoms of Mefloquine toxicity, including mood disorders, bouts of explosive anger, dizziness, issues with balance, and vertigo.

CHAD WISEMAN

80. Petty Officer 1st class Chad Wiseman (“PO 1 Wiseman”) is a former member of the CAF. He joined the CAF in 1988. PO 1 Wiseman was deployed to Somalia in 1992 and Afghanistan in 2007.
81. PO 1 Wiseman resides in Gibsons, British Columbia.
82. PO 1 Wiseman was ordered to take Mefloquine prior to and during his deployments to Somalia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. PO 1 Wiseman suffered and continues to suffer from symptoms of Mefloquine toxicity, including dizziness, issues with balance, bouts of explosive anger, night terrors, memory loss, anxiety, and panic attacks.

LANCE VINCENT JENN

83. Master Corporal Lance Vincent Jenn (“MCpl Jenn”) is a former member of the CAF. He joined the CAF in 1988. MCpl Jenn was deployed to Somalia in 1992.
84. MCpl Jenn resides in Ottawa, Ontario.
85. MCpl Jenn was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Jenn suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors and tinnitus.

PETER TODD D'ANDREA

86. Peter Todd D'Andrea is a former member of the CAF. He joined the CAF in 1984. Peter Todd D'Andrea was deployed to Saudi Arabia in 1991, Rwanda in 1994, Croatia in 1995, and Bosnia in 1998. He was scheduled to deploy to Somalia and Zaire, now the Democratic Republic of the Congo.
87. Peter Todd D'Andrea resides in Douglas, Ontario.
88. Peter Todd D'Andrea was ordered to take Mefloquine in preparation for deployments to Somalia and Zaire, now the Democratic Republic of the Congo, and prior to and during his deployment to Rwanda. He began experiencing serious adverse effects shortly after taking Mefloquine. Peter Todd D'Andrea suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, bouts of explosive anger, mood disorders, paranoia, anxiety, panic attacks, restlessness, dizziness, and tinnitus.

JOHN BARRETT

89. Master Warrant Officer John Barrett ("MWO Barrett") is a member of the CAF. He joined the CAF in 1990. MWO Barrett was deployed to Somalia in 1993.
90. MWO Barrett resides in Arnold's Cove, Newfoundland.
91. MWO Barrett was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Barrett suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, night terrors, aggression, insomnia, mood disorders, restlessness, panic attacks, and anxiety.

ROBERT LABRIE

92. Warrant Officer Robert Labrie ("WO Labrie") is a former member of the CAF. He joined the CAF in 1979. WO Labrie was deployed to Somalia in 1992.
93. WO Labrie resides in Saint-Honoré, Québec.

94. WO Labrie was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Labrie suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia anxiety, panic attacks, and depression.

WAYNE FREDERICK BOONE

95. Landing Seaman Wayne Frederick Boone (“Landing Seaman Boone”) is a former member of the CAF. He joined the CAF in 1978. Landing Seaman Boone was deployed to Somalia in 1992.
96. Landing Seaman Boone was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Landing Seaman Boone suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, mood disorders, anxiety, restlessness, issues with balance, dizziness, and bouts of explosive anger.

ROBERT JOSEPH DUBE

97. Master Corporal Robert Joseph Dube (“MCpl Dube”) is a former member of the CAF. He joined the CAF in 1986. MCpl Dube was deployed to Somalia in 1992.
98. MCpl Dube resides in Rogersville-Ouest, New Brunswick.
99. MCpl Dube was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Dube suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, bouts of explosive anger, mood disorders, paranoia, anxiety, panic attacks, restlessness, dizziness, and issues with balance.

MARTIN RAYMOND SWATSKY

100. Master Corporal Martin Raymond Swatsky (“MCpl Swatsky”) is a former member of the CAF. He joined the CAF in 1987. MCpl Swatsky was deployed to Somalia in 1992.
101. MCpl Swatsky resides in Regina, Saskatchewan.

102. MCpl Swatsky was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Swatsky suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, bouts of explosive anger, mood disorders, paranoia, anxiety, panic attacks, and restlessness.

GHISLAIN BLAIS

103. Ghislain Blais is a former member of the CAF. Ghislain Blais was deployed to Somalia in 1992.
104. Ghislain Blais resides in Racine, Québec.
105. Ghislain Blais was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Ghislain Blais suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, depression, paranoia, panic attacks, insomnia, bouts of explosive anger, memory loss, tinnitus, restlessness, feelings of confusion, and dizziness.

PETER FULLERTON

106. Warrant Officer Peter Fullerton (“WO Fullerton”) is a former member of the CAF. He joined the CAF in 1986 and served until 2010. WO Fullerton was deployed to Somalia in 1992.
107. WO Fullerton resides in Duncan, British Columbia.
108. WO Fullerton was ordered to take prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Fullerton continues to suffer from symptoms of Mefloquine toxicity, including memory loss, paranoia, and panic attacks.

KIRT MARC ANTHONY ROACH

109. Kirt Marc Anthony Roach (“Kirt Roach”) is a former member of the CAF. He joined the CAF in 1988. Kirt Roach was deployed to Somalia in 1992.

110. Kirt Roach resides in Mississauga, Ontario.
111. Kirt Roach was ordered to take Mefloquine prior to and during his deployment in Somalia. He began experiencing adverse effects shortly after taking Mefloquine. Kirt Roach suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors; memory loss; anxiety; and restlessness.

DOUGLAS NORMAN COURTNEY

112. Warrant Officer Douglas Norman Courtney (“WO Courtney”) is a former member of the CAF. He joined the CAF in 1983. WO Courtney was scheduled to deploy to Somalia in 1992.
113. WO Courtney resides in Barrie, Ontario.
114. WO Courtney was ordered to take Mefloquine in preparation for his scheduled deployment to Somalia in 1992. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Courtney suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, aggression, memory loss, bouts of explosive anger, night terrors, tinnitus, issues with balance, and hallucinations.

DAVID NOEL NOSEWORTHY

115. David Noel Noseworthy is a former member of the CAF. He deployed to Somalia in 1992.
116. David Noel Noseworthy was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. David Noel Noseworthy suffered and continues to suffer from symptoms of Mefloquine toxicity, including mood disorders, paranoia, bouts of explosive anger, nausea, headaches, dizziness, night terrors, insomnia, and memory loss.

JOHN DOWE

117. Master Corporal John Dowe (“MCpl Dowe”) is a former member of the CAF. MCpl Dowe was deployed to Somalia in 1992.
118. MCpl Dowe resides in Mississauga, Ontario.

119. MCpl Dowe was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, anxiety, dizziness, difficulty concentrating, insomnia, night terrors and restlessness.

ROBERT EDWARD PERFITT

120. Robert Edward Perfitt (“Perfitt”) is a current member of the Canadian Armed Forces (“CAF”). He joined the CAF in 1981. Perfitt was deployed to Somalia in 1993.
121. Perfitt resides in Victoria, British Columbia.
122. Perfitt was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Perfitt suffered and continues to suffer from symptoms of Mefloquine toxicity, including bouts of explosive anger, memory loss, and feelings of confusion.

GLENN VEY

123. Master Warrant Officer Glenn Vey (“MWO Vey”) is a former member of the CAF. He joined the CAF in 1981. MWO Vey was deployed to Somalia in 1993, Croatia in 1994, Bosnia in 1995, and Afghanistan in 2004.
124. MWO Vey resides in St. Albert, Alberta.
125. MWO Vey was ordered to take Mefloquine prior to and during his deployments to Somalia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Vey suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, depression, mood disorders, dizziness, vertigo, issues with balance, insomnia, bouts of explosive anger, night terrors, panic attacks, memory loss, restlessness, and feelings of confusion.

TERRY ROBERT MCLAREN

126. Terry Robert McLaren (“McLaren”) is a former member of the CAF. He joined the CAF in 1986. McLaren was deployed to Namibia in 1989, Somalia in 1993, and Israel in 1998.

127. McLaren resides in Courtenay, British Columbia.
128. McLaren was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. McLaren suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, depression, mood disorders, panic attacks, and restlessness.

RANDALL EUGENE MORNINGSTAR

129. Master Warrant Officer Randall Eugene Morningstar (“MWO Morningstar”) is a former member of the CAF. He joined the CAF in 1981. MWO Morningstar was deployed to Kuwait in 1990, Somalia in 1992, Haiti in 1997, Israel in 2000 and 2002, and Afghanistan in 2006 and 2010.
130. MWO Morningstar resides in Winnipeg, Manitoba.
131. MWO Morningstar was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MWO Morningstar suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, mood disorders, memory loss, and restlessness.

PAUL SPRENGER

132. Lieutenant Paul Sprenger (“Lt Sprenger”) is a former member of the CAF. He joined the CAF in 1988. Lt Sprenger was deployed to Somalia in 1993, Bosnia in 1996 and 1998, and Afghanistan in 2001 and 2008.
133. Lt Sprenger resides in Vancouver, British Columbia.
134. Lt Sprenger was ordered to take Mefloquine prior to and during his deployments to Somalia, Bosnia, and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. Lt Sprenger suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, mood disorders, dizziness, vertigo, issues with balance, insomnia, bouts of explosive anger, violent behavior, night terrors, panic attacks, and restlessness.

ROBERT KERRY BROWN

135. Warrant Officer Robert Kerry Brown (“WO Brown”) is a former member of the CAF. He joined the CAF in 1984. WO Brown was deployed to Germany in 1984, Cyprus in 1989, Somalia in 1992, Kosovo in 1999, and Afghanistan in 2005.
136. WO Brown resides in Gander, Newfoundland and Labrador.
137. WO Brown was ordered to take Mefloquine prior to and during his deployments to Somalia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Brown suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, mood disorders, dizziness, vertigo, issues with balance, tinnitus, insomnia, bouts of explosive anger, night terrors, memory loss, restlessness, and feelings of confusion.

STEVEN DOUGLAS POSTHUMUS

138. Corporal Steven Douglas Posthumus (“Cpl Posthumus”) is a former member of the CAF. He joined the CAF in 1988. Cpl Posthumus was deployed to Cyprus in 1989, Somalia in 1992, Croatia in 1994, Bosnia in 1998, Kosovo in 1999, and Afghanistan in 2003 and 2010.
139. Cpl Posthumus resides in Pembroke, Ontario.
140. Cpl Posthumus was ordered to take Mefloquine prior to and during his deployments to Somalia in 1992, and Afghanistan in 2003. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Posthumus suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, mood disorders, dizziness, issues with balance, insomnia, bouts of explosive anger, night terrors, panic attacks, memory loss, and restlessness.

DAVID PAUL WILSON

141. Corporal David Paul Wilson (“Cpl Wilson”) is a former member of the CAF. He joined the CAF in 1989. Cpl Wilson was deployed to Somalia in 1993.
142. Cpl Wilson resides in Chilliwack, British Columbia.
143. Cpl Wilson was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Wilson

suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, mood disorders, dizziness, issues with balance, tinnitus, and bouts of explosive anger.

MARSHALL WIEBE

144. Corporal Marshall Wiebe (“Cpl Wiebe”) is a former member of the CAF. He joined the CAF in 1990. Cpl Wiebe was deployed to Somalia in 1993.
145. Cpl Wiebe resides in Eganville, Ontario.
146. Cpl Wiebe was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Wiebe suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, depression, mood disorders, insomnia, bouts of explosive anger, violent behavior, night terrors, panic attacks, memory loss, and restlessness.

EDWARD MARTIN SMITH

147. Sergeant Edward Martin Smith (“Sgt Smith”) is a former member of the CAF. He joined the CAF in 1984. Sgt Smith was deployed to Somalia in 1992.
148. Sgt Smith resides in Holyrood, Newfoundland.
149. Sgt Smith was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Smith suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, mood disorders, dizziness, insomnia, bouts of explosive anger, violent behavior, night terrors, and panic attacks.

REJEAN JOSEPH RICHARD

150. Major Rejean Joseph Richard (“Maj Richard”) is a former member of the CAF. He joined the CAF in 1985. Maj Richard was deployed to Somalia in 1992, Haiti in 1998, Tanzania in 1998, Eritrea in 2000, and Afghanistan in 2006.
151. Maj Richard resides in Carp, Ontario.

152. Maj Richard was ordered to take Mefloquine prior to and during his deployments to Somalia, Haiti, Tanzania, Eritrea and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. Maj Richard suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, depression, insomnia, bouts of explosive anger, violent behavior, memory loss, restlessness, and feelings of confusion.

ROBERTA JAYNE MELVILLE

153. Master Corporal Roberta Jayne Melville (“MCpl Melville”) is a former member of the CAF. She joined the CAF in 1970. MCpl Melville was deployment in Somalia in 1993.
154. MCpl Melville resides in Comox, British Columbia.
155. MCpl Melville was ordered to take Mefloquine prior to and during her deployment to Somalia. She began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Melville suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, depression, and tinnitus.

BRIAN KEITH VARDY

156. Brian Keith Vardy (“Vardy”) is a former member of the CAF. He joined the CAF in 1990. Vardy was deployed to Somalia in 1992.
157. Vardy resides in Bancroft, Ontario.
158. Vardy was ordered to take Mefloquine prior to and during her deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. MCpl Melville suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, depression, suicidal thoughts, mood disorders, tinnitus, seizures, insomnia bouts of explosive anger, violent behavior, night terrors, and memory loss.

RONALD PETER SMITH

159. Sergeant Ronald Peter Smith (“Sgt Smith”) is a former member of the CAF. He joined the CAF in 1981. Sgt Smith was deployed to Somalia in 1992.
160. Sgt Smith resides in Shediac, New Brunswick.

161. Sgt Smith was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Sgt Smith suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, psychotic behavior, restlessness, hallucinations, mood disorders, bouts of explosive anger, and violent behavior.

KEITH THOMSON

162. Warrant Officer Keith Thomson (“WO Thomson”) is a former member of the CAF. He joined the CAF in 1980. WO Thomson was deployed to Somalia in 1992, Bosnia in 1996, and Afghanistan in 2004 and 2006.
163. WO Thomson resides in Duncan, BC.
164. WO Thomson was ordered to take Mefloquine prior to and during his deployments to the Somalia, Bosnia and Afghanistan. He began experiencing serious adverse effects shortly after taking Mefloquine. WO Thomson suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, paranoia, depression, insomnia, bouts of explosive anger, and night terrors.

DAVID SNASHALL

165. David Snashall is a former member of the CAF. He was deployed to Somalia in 1993 and 1996, the United Arab Emirates, Oman and India in 2001, Cambodia in 1997, East Timor in 1999, the Persian Gulf in 1998, Kuwait in 1997, Rwanda in 1995 and 1996, Haiti in 1993 and 1996, the Democratic Republic of the Congo, Uganda in 1996, Zaire in 1996, and Afghanistan prior to 2005. He was also deployed to Bosnia and Croatia at some point during his service.
166. David Snashall resides in Abbotsford, British Columbia.
167. David Snashall was ordered to take Mefloquine prior to and during his deployments. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including depression, anxiety, insomnia, night terrors, paranoia, and restlessness.

CHAMPION BUTLER

168. Champion Butler is a former member of the CAF. He was deployed to Somalia in 1992, Yugoslavia in 1995, and Afghanistan in 2002.
169. Champion Butler resides in Bedeque, Prince Edward Island.
170. Champion Butler was ordered to take Mefloquine prior to and during his deployments to Somalia, Yugoslavia and Afghanistan. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, bouts of explosive anger, memory loss, anxiety, depression and nausea.

JAMES DEAN LAPERRIERE

171. Master Warrant Officer James Dean Laperriere (“MWO Laperriere”) is a former member of the CAF. He was deployed to Somalia in 1992.
172. MWO Laperriere was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, headaches, anxiety, depression, paranoia, headaches, bouts of explosive anger, difficulty concentrating and restlessness.

FREDERICK WADE BERGLUND

173. Petty Officer First Class Frederick Wade Berglund (“PO1 Berglund”) is a former member of the CAF. He was deployed to Somalia in 1992.
174. PO1 Berglund resides in Sooke, British Columbia.
175. PO1 Berglund was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, memory loss, bouts of explosive anger, depression, headaches, night terrors, insomnia, headaches and restlessness.

JASON STEWART

176. Warrant Officer Jason Stewart (“WO Stewart”) is a former member of the CAF. He was deployed to Somalia in 1992.
177. WO Stewart resides in Conquerall Mills, Nova Scotia.
178. WO Stewart was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including memory loss, anxiety, insomnia, night terrors, difficulty concentrating, restlessness and depression.

CARROLL DARREN LITTLE

179. Master Warrant Officer Carroll Darren Little (“MWO Little”) is a former member of the CAF. He was deployed to Somalia in 1992, Bosnia in 1999, Afghanistan in 2002, 2004, 2006 and 2007, and the Democratic Republic of the Congo in 2005.
180. MWO Little resides in Kemptville, Ontario.
181. MWO Little was ordered to take Mefloquine prior to and during his deployments to Somalia, Bosnia, Afghanistan and the Democratic Republic of the Congo. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, anxiety, paranoia, mood disorders, tremors, and tinnitus.

CHRISTIAN JOSEPH FREDERICK THIBAULT

182. Christian Joseph Frederick Thibault (“WO Thibault”) is a former member of the CAF. He was deployed to Somalia in 1992.
183. WO Thibault resides in Saint-Jean-sur-Richelieu, Quebec.
184. WO Thibault was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night

terrors, mood disorders, anxiety, paranoia, restlessness, difficulty concentrating, bouts of explosive anger, insomnia, and dizziness.

JOHN MITCHELL MACLEOD

185. Captain John Mitchell MacLeod (“Capt MacLeod”) is a former member of the CAF. He was deployed to Somalia in 1992.
186. Capt MacLeod resides in Edmonton, Alberta.
187. Capt MacLeod was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, paranoia, bouts of explosive anger, anxiety, depression, panic attacks, difficulty concentrating, restlessness and dizziness.

DANIEL ROYER

188. Chief Warrant Officer Daniel Royer (“CWO Royer”) is a former member of the CAF. He was deployed to Somalia in 1992, Bosnia in 1996, Haiti in 1997, and Afghanistan in 2007.
189. CWO Royer resides in Shannon, Quebec.
190. CWO Royer was ordered to take Mefloquine prior to and during his deployment to . He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including .

TODD KENNETH DAVIDGE

191. Master Corporal Todd Kenneth Davidge (“MCpl Davidge”) is a former member of the CAF. He was deployed to Somalia in 1993 and Afghanistan in 2004.
192. MCpl Davidge resides in Edmonton, Alberta.
193. MCpl Davidge was ordered to take Mefloquine prior to and during his deployments to Somalia and Afghanistan. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, night terrors, memory loss, bouts of explosive anger, mood disorders,

anxiety, paranoia, difficulty concentrating, restlessness, dizziness, nausea, headaches and depression.

STEPHEN HAYNES

194. Stephen Haynes is a former member of the CAF. He was deployed to Somalia in 1992.

195. Stephen Haynes resides in Kelowna, British Columbia.

196. Stephen Haynes was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, bouts of explosive anger, anxiety, panic attacks, and difficulty concentrating.

TAL SHLAKAT

197. Warrant Officer Tal Shlakat (“WO Shlakat”) is a former member of the CAF. He was deployed to Somalia in 1992.

198. WO Shlakat resides in Stittsville, Ontario.

199. WO Shlakat was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, night terrors, memory loss, bouts of explosive anger, mood disorders, anxiety, paranoia, difficulty concentrating, restlessness, dizziness, nausea, headaches, panic attacks and depression.

JOEY GRECO

200. Master Corporal Joey Greco (“MCpl Greco”) is a former member of the CAF. He was deployed to Somalia in 1992.

201. MCpl Greco resides in Windsor, Ontario.

202. MCpl Greco was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, difficulty concentrating, paranoia, anxiety, bouts of explosive anger, dizziness, nausea and headaches.

MICHAEL INNES

203. Corporal Michael Innes (“Cpl Innes”) is a former member of the CAF. He prepared to deploy to Somalia in 1992.
204. Cpl Innes resides in Drayton Valley, Alberta.
205. Cpl Innes was ordered to take Mefloquine while preparing to deploy to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, night terrors, memory loss, bouts of explosive anger, mood disorders, anxiety, paranoia, difficulty concentrating, restlessness, dizziness, nausea, headaches, panic attacks and depression.

ERIC ALAN ADKINS

206. Warrant Officer Eric Alan Adkins (“WO Adkins”) is a former member of the CAF. He was deployed to Somalia in 1992.
207. WO Adkins resides in Victoria, British Columbia.
208. WO Adkins was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including anxiety, depression, paranoia, insomnia, night terrors, restlessness and bouts of explosive anger.

STEVEN RONALD MCCULLOCH

209. Corporal Steven Ronald McCulloch (“Cpl McCulloch”) is a former member of the CAF. He joined the CAF in 1990. Cpl McCulloch was deployed to Somalia in 1992.
210. Cpl McCulloch resides in Fergus, Ontario.

211. Cpl McCulloch was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl McCulloch suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, memory loss, mood disorders, bouts of explosive anger, anxiety, and dizziness.

KEVIN FLEURY

212. Corporal Kevin Fleury (“Cpl Fleury”) is a former member of the CAF. He was deployed to Somalia in 1992.
213. Cpl Fleury resides in Edmonton, Alberta.
214. Cpl Fleury was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing adverse effects shortly after taking Mefloquine. He suffered and continues to suffer from symptoms of Mefloquine toxicity, including insomnia, anxiety, difficulty concentrating, depression, headaches, tremors, memory loss, and bouts of explosive anger.

THE ESTATE OF DAVIS DIXON BALSER BY THE ESTATE TRUSTEE LORI WARD; LORI WARD

215. Corporal Davis Dixon Balser (“Cpl Balser”) was a former member of the CAF. He joined the CAF in 1991. Cpl Balser was deployed to Somalia in 1992 and Bosnia in 1994.
216. Cpl Balser resided in Beaver Dam, New Brunswick. Lori Ward is the widow of Cpl Balser and the Estate Trustee of Cpl Balser’s estate. She brings her personal claim pursuant to the *Fatal Accidents Act*, R.S.N.B. 1973, c. F-7.
217. Cpl Balser was ordered to take Mefloquine prior to and during his deployment to Somalia. He began experiencing serious adverse effects shortly after taking Mefloquine. Cpl Balser suffered from symptoms of Mefloquine toxicity during his life, including night terrors, memory loss, insomnia, mood disorders, anxiety, and restlessness.

ROBYN DESBOIS

218. Robyn Desbois is a current member of the CAF. Robyn Desbois joined the CAF in 1980. Robyn Desbois was deployed to Somalia from 1992-1993, Haiti in 1997, and East Timor from 1999-2000.
219. Robyn Desbois resides in Québec City, Québec.
220. Robyn Desbois was ordered to take Mefloquine prior to and during his deployments to Somalia, Haiti, and Timor. Robyn Desbois began experiencing serious adverse effects shortly after taking Mefloquine. Robyn Desbois suffered and continues to suffer from symptoms of Mefloquine toxicity, including night terrors, insomnia, aggression, bouts of explosive anger, anxiety, panic attacks, restlessness, dizziness, and issues with balance.

CAUSES OF ACTION

221. 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

222. 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.
223. 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;
and
 - c. use reasonable care in the operation, administration, prescribing, dispensing, managing, supervising, and monitoring of the use of Mefloquine.
224. The Government breached that duty of care by:
- a. 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;

- b. ordering the Plaintiffs to take Mefloquine without conducting a proper medical screening for contraindications;
- c. failing to provide a medication guide or other information to the Plaintiffs regarding the proper use of Mefloquine;
- d. failing to adequately warn the Plaintiffs of the risks associated with taking Mefloquine;
- e. 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;
- f. 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;
- g. ordering the Plaintiffs to continue taking Mefloquine after the above symptoms were reported;
- h. failing to monitor or record adverse reactions and complications experienced by the Plaintiffs and other CAF Members as a result of taking Mefloquine;
- i. 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;
- j. 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;
- k. failing to provide and/or consider suitable alternative anti-malarial drugs to Mefloquine;
- l. requiring that the Plaintiffs take an anti-malarial drug that was unsuitable for use in a military or combat setting;

- m. failing to provide necessary medical treatment to the Plaintiffs in a timely manner;
 - n. failing to refer the Plaintiffs to appropriate medical specialists in a timely manner, or at all;
 - o. failing to administer Mefloquine to the Plaintiffs in a safe and competent manner;
 - p. 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
 - q. such further and other particulars as may become apparent and counsel may advise.
225. As a result of the Government's breach of its duty of care, the Plaintiffs suffered damages as set out below.

Negligent Misrepresentation

226. 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.
227. 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.
228. 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.
229. 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

230. 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.
231. 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 ignoring and remaining wilfully blind to the risks of Mefloquine to individual CAF Members;
 - b. ordering the Plaintiffs to take Mefloquine;
 - c. ordering the Plaintiffs to take Mefloquine without conducting a proper medical screening for contraindications;
 - d. ordering the Plaintiffs to continue taking Mefloquine after adverse symptoms were reported; and
 - e. failing to safeguard the physical and psychological health of the CAF Members.

Charter claim (breach of s. 7)

232. The Government's action in forcing the Plaintiffs to take a drug that seriously impaired the Plaintiff's mental and physical health and caused severe psychological harm is an infringement of the Plaintiff's 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.

233. The breaches of the Plaintiffs' *Charter* rights are not demonstrably justified in a free and democratic society.
234. The Plaintiffs are entitled to a declaration that their *Charter* rights were infringed.
235. 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

236. The Plaintiffs assert that the forced ingestion of Mefloquine without their informed consent, in the circumstances pleaded above, amounts to battery.

Wilful Concealment

237. 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 the Plaintiffs to take Mefloquine.

Mental and psychological state

238. 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

239. The 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

240. 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.
241. 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.
242. As a result of being forced to take Mefloquine, 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.
243. 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.
244. 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.
245. 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.
246. 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

247. 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 callous 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.
248. 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.

Family Law Act Claimant

249. Lori Ward claims under the *Fatal Accidents Act*, R.S.N.B. 1973, c. F-7 in respect of her deceased husband, Cpl Balser, who was administered and injured by Mefloquine during his life. She claims for:
- a. Reasonable expenses incurred for the benefit of Cpl Balser;
 - b. Loss of guidance, care and companionship;
 - c. Reasonable allowance for the value of or the loss of income related to providing nursing, housekeeping and other services to Cpl Balser who was administered and injured by Mefloquine.

Provincial Health Insurers

250. 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

251. 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;

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

Fatal Accidents Act, R.S.N.B. 1973, c. F-7.

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

April 26, 2023



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KEVIN FLEURY

THE ESTATE OF DAVIS DIXON BALSER BY THE ESTATE TRUSTEE LORI WARD;

LORI WARD

ROBYN DESBOIS