20 Greenacre Court
Lancaster
LA1 4LE

27th April 2010

Dear Dr Raine,

I am writing to you regarding the licensing of Wyeth's product Ativan because you dealt with enquiries on this subject in the past.

I was prescribed Ativan in 1975 for anxiety and in hindsight I now realise that I became addicted. I could not discontinue Ativan because of the horrific withdrawal symptoms. I finally managed to discontinue this year using a Diazepam taper and using support and advice wholly from The Council for Involuntary Tranquilliser Addiction in Liverpool and the Bristol and District Tranquilliser Project. The physical and psychological withdrawal symptoms have been crippling; I am still very unwell but hope to eventually recover from the damage inflicted by these drugs.

I have since found many people similar to me who have been made seriously ill as a result of taking Ativan and other benzodiazepines; media research points to a figure of 1.5 million people currently dependent upon benzodiazepines and z-drugs which work in a similar manner. I am already corresponding with the Dept of Health and the Commons and Lords with regard to these issues; I have also written to Wyeth for their explanation. It is through this correspondence that I am becoming acutely aware that the Dept of Health and its regulatory and licensing bodies, such as the MHRA (formerly MCA), have been responsible for allowing this problem to continue for so long. I will omit the wider issue of benzodiazepine addiction in the UK in this letter and focus solely upon Ativan.

I am in possession of copies of correspondence between the MCA (now MHRA) and Mr B Haslam of Oldham as well as Wyeth's responses to his enquiries. I am also in possession of a copy of your response to Phil Woolas MP who wrote to you on his behalf. I have Mr Haslam's permission to use these and I will refer to them. I would like the following answered and please do not include any brief outlines of the regulatory history as I already have two:

1. In the MCAs letter to Mr Haslam of 7th December 2000 the agency states that *'The MCA has no record of formal notification of the study conducted by Professor R De Buck.'* from Wyeth. However, in your letter to Mr Woolas of 25th March 2002 you state that *'The MCA has now received confirmation from Wyeth that details from the study were included in the original licence application submitted in 1972.'* So you did have them but had to ask Wyeth if you received them? This seems rather muddled considering this information was crucial in deciding whether to unleash a drug ten times the strength of Diazepam on the

public. Did you receive details of the De Buck study from Wyeth and what were those details? Did Wyeth mention convulsions?

2. In the MCAs first letter, again of the 7th December 2000, it states that '*An application to add convulsions as a possible side effect associated with abrupt withdrawal of lorazepam was approved on 25/04/1990'*. However, again in your later letter to Mr Woolas you state that '*The CRM produced guidelines in February 1980 regarding the information that should be included in the product information for these medicines……and that convulsions should be added as a symptom of abrupt withdrawal'*. If this information was already added in 1980 then why did there have to be a second application to add something that already existed? Also, what scientific information was each of these alterations based on?

3. With regard to the original licensing in 1972 there has been a lot of manipulation of words from the MCA and Wyeth as to whether the convulsions were as a result of withdrawal from Ativan. You state in your first letter to Mr Haslam of the 7th December 2000 that '*However, I would like to clarify that Professor R De Buck does not make any claim that convulsions were caused by Ativan.……as in one case the patient was taking another medicine that was known to epileptogenic.'* This patient was taking clomipramine and would therefore have been in violation of the protocol i.e. patients were meant to have stopped taking other psychoactive drugs 15 days before the trial. It seems extraordinary that two people had seizures having just stopped the same drug. The MCA should have asked for further trials particularly as there were no reliable trials to establish the safety of Ativan. At the very least the MCA should have queried this, so why didn't they and why didn't they ask for further clinical trials to be conducted before issuing a licence?

4. In Wyeth's correspondence to Mr Haslam, from their Legal Director, they state that '*The cases of epileptic seizures mentioned in this paper are part of De Buck's discussion of his subsequent clinical experience and do not form part of his study results. Accordingly, they were not part of the study results with the Product Licence Application'* This meant more information was sent by Wyeth. When was this information received by the MCA?

5. The original UK recommended dosages were double those in North America and elsewhere. Dosages were quietly changed in the UK in 2007 from 10mg maximum to 4mg. If the MCA had carried out reviews and were monitoring the safety of Ativan from 1972 to 2007 why didn't they identify this gross error sooner?

6. In the 1974 Ativan data sheet there was a warning against high dosage withdrawal '*as some sleep disturbance may result'*. What scientific evidence was that warning based on?

7. Tyrer, Einarson and others noted Ativan withdrawal convulsions in 1979/80 and it was this that prompted Tyrer and Lader's investigation into benzodiazepine withdrawal. Why didn't the MCA withdraw or review the product licence for Ativan in the light of that information?

8. I and many others have been seriously damaged by Ativan and the MCA's response to all the warning signs has been complacent and negligent. Why did the MCA fail to protect me and many others and what are the MHRA's objectives regarding patient safety?

9. I am very concerned regarding my recovery. What information does the MHRA have regarding:

    a) Benzodiazepine post withdrawal syndrome
    b) Long term benzodiazepine damage
    c) Permanent benzodiazepine damage

10. I request a copy of the original Ativan product licence application.

Yours Sincerely

John Perrott

cc to those in receipt of previous correspondence regarding iatrogenic addiction

Baroness Thornton Spokesperson Health Lords
Earl Howe Spokesperson Health Lords
David Cameron Leader of the Conservative Party
Nick Clegg Leader of the Lib Dem Party
Gordon Brown Leader of the Labour Party
Jim Dobbin MP Chair of the All Party Parliamentary Group for Involuntary Tranquilliser Addiction
Barry Haslam
Eric Ollerenshaw (Cons) PPC Lancaster and Fleetwood
Clive Grunshaw (Lab) PPC Lancaster and Fleetwood
Stuart Langhorn (Lib Dem) PPC Lancaster and Fleetwood