

MEFLOQUINE

Concerns have been raised about links between mefloquine and mental health conditions

What is malaria?

- Malaria is a deadly disease which in 2016 killed over 400,000 people worldwide, and affected more than 200 million people.
- The Australian Defence Force (ADF) has a duty of care to ensure its people deploying to malaria prone areas are protected.

What is mefloquine?

- Mefloquine (also known by the trade name Lariam) is one of three anti-malarial medications approved by the Therapeutic Goods Administration for malaria prevention in our region. The ADF uses mefloquine as a third line agent and it is only used when members are unable to tolerate the alternatives.
- Mefloquine may not be suitable for individuals with particular medical conditions or those taking some other medications. In particular, mefloquine should not be taken for malaria prevention by people who have, or have had, a psychiatric condition, seizures, kidney disease or liver disease.
- For these reasons, Defence health policy requires ADF members be properly informed of the potential side-effects of mefloquine and the drug may only be prescribed by a qualified medical practitioner after the member has provided their informed consent.
- Mefloquine can cause psychiatric symptoms in some people, including disturbed sleep, anxiety, paranoia, depression, hallucinations and psychosis. Dizziness and loss of balance have also been reported as side effects from the use of mefloquine. For this reason, the medication is not used in ADF aircrew.
- Mefloquine is commonly used in the broader Australian community for the prevention of malaria in travellers. Mefloquine is also included on the World Health Organisation List of Essential Medicines for both the prevention and treatment of malaria.
- Further information about malaria and anti-malarial medications is available on the 'Malaria, mefloquine and the ADF' website, www.defence.gov.au/Health/HealthPortal/Malaria/.

How many people have been given mefloquine?

- The ADF's use of mefloquine is conservative compared to its use in other militaries around the world and in the civilian population.
- The vast majority of ADF members have never been prescribed mefloquine.
- Records show that between July 2000 and January 2018, less than 2,000 ADF personnel were prescribed mefloquine. Most of these prescriptions were as part of the ADF trials in East Timor from 2000-2002 (a total of 1,319 soldiers).
- It is far more commonly prescribed across the general community, with an estimated 11,457 civilian prescriptions for mefloquine in 2016 alone.
- Statistics are available from the 'Malaria, mefloquine and the ADF' website.

What concerns have been raised?

- Concerns have been raised about the conduct of the ADF trials of mefloquine in East Timor. The Inspector General ADF (IGADF), an independent and impartial statutory authority, examined a number of allegations relating to this matter.
- The IGADF report found that the trials were conducted ethically and in compliance with National Health and Medical Research Council Guidelines for the conduct of human research. It also found that the trials were voluntary and participants were informed about possible side effects. This was consistent with relevant product and consumer medicine information available at the time.
- Further information is available at www.defence.gov.au/Health/HealthPortal/Malaria/AMI_research/.
- Concerns have also been raised that taking mefloquine causes chemically-acquired brain injury.

What is the Repatriation Medical Authority (RMA)?

- The RMA is an independent statutory authority which is entirely separate from the Department of Veterans' Affairs (DVA).
- The RMA is responsible for determining Statements of Principles (SoPs) for any disease, injury or death that could be related to military service, based on sound medical-scientific evidence.
- Further information is available on the RMA website, www.rma.gov.au.

What are Statements of Principles (SoPs)?

- Serving and ex-serving ADF members can claim compensation at any time for medical conditions they believe are related to their service.
- For DVA to accept liability for compensation there has to be causal link determined between the person's service and their medical condition.
- Under the *Veterans' Entitlements Act 1986* and the *Military Rehabilitation and Compensation Act 2004*, the potential link between a medical condition and service is assessed using SoPs.
- Together, mefloquine and tafenoquine are included as a potential causal factor in SoPs for 15 conditions. Of these, mefloquine is covered by 14 SoPs and tafenoquine is covered by six SoPs.

What conditions are covered?

Condition	Anti-malarial Medication
1. Anxiety disorder	Mefloquine
2. Bipolar disorder	Mefloquine
3. Depressive disorder	Mefloquine
4. Heart block	Mefloquine
5. Myasthenia gravis	Mefloquine
6. Peripheral neuropathy	Mefloquine
7. Schizophrenia	Mefloquine
8. Suicide and attempted suicide	Mefloquine
9. Trigeminal neuropathy	Mefloquine
10. Epileptic seizure	Mefloquine and Tafenoquine
11. Acquired cataract	Mefloquine and Tafenoquine
12. Sensorineural hearing loss	Mefloquine and Tafenoquine
13. Tinnitus	Mefloquine and Tafenoquine
14. Psoriasis	Mefloquine and Tafenoquine
15. Methaemoglobinaemia	Tafenoquine

What did the RMA investigate?

- The RMA investigated whether SoPs may be determined in respect of ‘chemically-acquired brain injury caused by mefloquine, tafenoquine or primaquine.’
- Mefloquine, tafenoquine and primaquine belong to the chemical class of drugs known as quinolines.
- The RMA decided that there is insufficient sound medical scientific evidence that exposure to these pharmaceuticals causes acquired brain injury.
- For these reasons, the RMA decided that it does not propose to make SoPs in relation to chemically-acquired brain injury caused by mefloquine, tafenoquine and primaquine.
- The report can be accessed at www.rma.gov.au/assets/Other/RMA-Statement-of-reasons-chemically-acquired-brain-injury-29-August-2017.pdf.
- This decision means that DVA will not be able to accept claims for this specific condition, or the same condition described differently. However, it is important to note that DVA claims staff will still investigate to determine whether another diagnosis may be appropriate and whether it is possible to accept the claim in accordance with that diagnosis.

What is the Specialist Medical Review Council (SMRC)?

- The SMRC is an independent statutory body responsible to the Minister for Veterans’ Affairs.
- On request from an eligible person or organisation, the SMRC can review decisions of the RMA.
- The SMRC is conducting an independent review into the RMA’s decision not to issue SoPs for chemically-acquired brain injury. Submissions to the SMRC review closed on 9 February 2018. The SMRC will review the submissions and the materials that were considered by the RMA, to determine whether the sound medical-scientific evidence supports or does not support developing SoPs for this condition.
- Further information on the SMRC is available from www.smrc.gov.au. Information on the SMRC’s review process is available at www.smrc.gov.au/sites/default/files/files/documents/handbook.pdf.

The Government is acting on the health concerns raised

What has been, or is being, done?

- DVA and Defence provide information and support to those who are concerned about mefloquine use.
- Defence has established a dedicated email address (adf.malaria@defence.gov.au) and the ‘Malaria, mefloquine and the ADF’ information portal, www.defence.gov.au/Health/HealthPortal/Malaria/.
- Defence has released specific clinical guidelines to assist Defence health practitioners and these have been published on the Defence website.
- DVA has established a dedicated support team to help with mefloquine-related claims, and provides information about health and support services and how to access them on its website.
- DVA, in collaboration with the RMA and the Veterans and Veterans Families Counselling Service (VVCS), ran an outreach program in Townsville in December 2016. The program provided serving and ex-serving ADF members who were prescribed mefloquine with easy access to information and face-to-face assistance. Information sessions covered DVA services, non-liability health care, claims processing, VVCS, and mental health resources. The material presented at the Townsville outreach program is available on the DVA website, www.dva.gov.au/mefloquine.
- DVA’s Principal Medical Adviser wrote to general practitioners to bring their attention to information that may assist their patients who have taken mefloquine.
- DVA and Defence are currently considering whether there is scope for research that will build on the body of evidence already established in relation to the effects of anti-malarial medications.

WHAT INFORMATION IS AVAILABLE?

Anti-malarial medications	'Malaria, mefloquine and the ADF' provides information on malaria, types of anti-malarial medications and their use in the ADF, research and clinical trials.		www.defence.gov.au/Health/HealthPortal/Malaria/
	A dedicated email address is available for concerned individuals seeking further information.		adf.malaria@defence.gov.au
	The DVA website provides information on anti-malarial medications and support. Handouts, factsheets and PowerPoint presentations from the Townsville Outreach Program are also available.		www.dva.gov.au/mefloquine
Mental health	DVA's mental health portal, <i>At Ease</i> , provides information and self-help resources to help people recognise the symptoms of poor mental health, manage their wellbeing and build resilience, learn about treatment options, and access professional support. Families can find advice on how to keep their family healthy while caring for someone with a mental health condition, including information on mental health first aid.		www.at-ease.dva.gov.au

WHAT SUPPORT IS AVAILABLE?

All-hours Support Line	A confidential telephone service to help serving ADF members and their families access ADF or civilian mental health services.		1800 628 036 (All-hours support line – 24/7)
1800 IMSICK	Serving personnel can ring 1800 IMSICK if they become ill or injured after hours or they are not in close proximity to an On-Base health facility. 1800 IMSICK is not an emergency number.		1800 467425 (1800 IMSICK – 24/7)
Dedicated DVA Support Team	The dedicated support team can help people who were administered anti-malarial medications by the ADF and are concerned about possible side effects. Support may include accessing treatment under non-liability health care arrangements, or lodging a claim for any condition they think was caused by anti-malarial medications.		1800 555 254 (DVA) Ask to be put in touch with the dedicated support team for assistance
Submitting a claim	Current and former serving members of the ADF who have a diagnosed health condition that they believe relates to anti-malarial medications can lodge a claim with DVA. DVA can arrange an appointment with an appropriate practitioner and meet the costs of any required medical report.	 	1800 555 254 (DVA) GeneralEnquiries@dva.gov.au
Non-liability health care	DVA can pay for treatment for mental health conditions without the need for the conditions to be accepted as related to service. This is known as non-liability health care and anyone who has served at least one day in the full time ADF can access free treatment for any mental health condition.	  	1800 555 254 (DVA) nlhc@dva.gov.au www.dva.gov.au/non-liability-health-care
VVCS	Current and former members who have served at least one day can access free and confidential, nation-wide counselling and mental health support through the Veterans and Veterans Families Counselling Service (VVCS). VVCS is also accessible to the families of ADF members.	 	1800 011 046 (VVCS – 24/7) www.vvcs.gov.au
GP Health Assessment	All former serving personnel can access a one-off comprehensive health assessment from their GP. They can access this health assessment at any stage after leaving the ADF, as there are no time restrictions. A Medicare rebate is available.		www.at-ease.dva.gov.au/veterans/take-action/adf-post-discharge-gp-health-assessment/