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Widow pushes for change in treatment for PTSD

JESSE BASS

American Staff Writer jbass@hattiesburgamerican.com

Petal military widow Alicia McElroy cares for her 4-year-old son in the absence of his father.

"I see myself as raising a hero's son and not as a poor, single mom," she said.

Staff Sgt. James "Mac" McElroy had served in some of the most dangerous - and deadly - war zones.

A deployment with the U.S. Marine Corps to Afghanistan in the early 2000s.

A tour in Iraq with the Mississippi Army National Guard in 2005.

A return to Afghanistan in 2010 for a tour of duty with the National Guard.

But it wasn't on a battlefield where James McElroy lost his life.

Instead, nearly a year ago, the 30-year-old died suddenly - and unexpectedly - on American soil in a military hospital while undergoing treatment for post-traumatic stress disorder.

Now, his widow has joined a list of families who want to see change in military standards for treatment of PTSD.

"I trusted the military to take care of my husband," McElroy said. "They didn't take care of him."

She said - after months of treatment that was difficult to watch her husband go through - her life changed at his funeral services.

"At that point, I said, 'I'm going to find out what happened to you, who did this to you, and they're not going to get away with it,'" she said.

McElroy has teamed up with an active family from West Virginia, who is focused on the same goal.

"Our goal is to try to get changes in the way soldiers and veterans are treated," said Cross Rails, W.Va., resident Stan White.

White lost his son, USMC Cpl. Andrew White, in 2008 while undergoing similar PTSD treatments. Another three soldiers from the greater Charleston area died similarly within a few months of Andrew White's death.

The surviving Whites have become advocates for more peer and professional counseling during PTSD treatment at military hospitals, and less drugs.

"I don't know a person who has died from counseling, but I know 300 and some who have died from drugs," White said.

McElroy and White shared three common prescriptions as part of their treatment:

- Seroquel, an antipsychotic medication that is FDA approved for treatment of schizophrenia and bipolar disorder.
- Paxil, a drug designed to treat depression, but also approved to treat major depressive disorder, obsessive compulsive disorder, panic disorder, social anxiety disorder, generalized anxiety disorder and PTSD.
- Klonopin, a benzodiazepene approved to treat certain types of epilepsy and panic disorders.

White said McElroy has joined a group of about 15 families who have lost loved ones to similar treatments or have loved ones currently involved in PTSD treatments.

For McElroy, advocating for change in military medical procedures has become her full-time job.

"It's refreshing to find someone so young who's so energetic and wants to help," White said.

'A change in him'

McElroy said problems started when her husband came home from his last deployment for leave in October 2010.

"For about the first week, he was doing really good," she said.

But soon, she noticed a change in the career soldier she married.

"There was a change in him," she said. "He started crying all the time. He was depressed. He wouldn't get out of bed."

Things soon came to a head.

"He finally looked up at me and said, 'Get me some help - please,'" McElroy said.

He was released from Veterans Administration inpatient care five days later on one condition demanded by his VA psychiatrist - that he not return to a war zone.

But then James McElroy's Lucedale National Guard unit cut his orders because he wasn't going back overseas.

"I had to quit my job, and we took a huge financial hit," McElroy said.

She stayed home with her husband for four months as he attended support group or psychiatrist meetings three to four times weekly.

"He was getting better, but some new symptoms started to develop," McElroy said, citing nightmares and flashbacks.

But she said his VA psychiatrist was cautious to alter his low-dosage prescriptions.

Which worked until he went back to active duty when he found a job at Camp Shelby.

"He showed up to Camp Shelby and they decided they needed to get him help first," she said.

After his prescriptions were altered during a 28-day drug and alcohol rehabilitation program at River Oaks in New Orleans, James McElroy went off to Fort Benning, Ga., to enter into a PTSD treatment program, where he arrived in April 2011.

Terry Beckwith, spokeswoman for Martin Army Community Hospital at Fort Benning, said in an email response that no details of James McElroy's stay there would be released.

"Unfortunately, due to an (ongoing) investigation and HIPAA we cannot offer any specific patient information," she wrote.

McElroy said her husband was there for six weeks before getting new prescriptions - enough time for him to run out of the medicines prescribed by River Oaks doctors.

"He was basically a basket case - that's what he called himself," she said.

She said once he was prescribed medication, it was changed several times in a few days. And he was taking lots of medications. In large doses.

"I saw a general decline in my husband at this point," she said, noting a loss of dexterity, memory and balance.

She spoke to him for the last time on the telephone during the evening of June 5.

He didn't call back to say goodnight.

And he didn't answer the next morning.

"The doorbell rang," McElroy said.

Two men in uniform told her that her husband was pronounced dead a few minutes before noon on June 6.

When he didn't show up for formation that morning, he was found dead in bed after his room door was unlocked at about 9:30 a.m.

McElroy said her husband's death was deemed accidental via multiple drug toxicity.

But she said even after a year, she can't get hold of his autopsy report despite numerous efforts.

"I have filled out forms; I've been calling," she said.

'This is not right'

Hope is in sight for the White and McElroy families.

Seroquel was removed from the official military treatment formulary for PTSD in March.

White said with increased media attention, legislators are beginning to return phone calls.

McElroy is currently pressing the offices of Sen. Roger Wicker and Congressman Steven Palazzo to start a congressional investigation into the circumstances surrounding her husband's death.

"Quite honestly, it's a tragedy," said Palazzo spokeswoman Laura Chambers.

She said the congressman's office deals with many VA and military issues due to the large veteran population in South Mississippi.

"We have thousands of cases open with veterans who come to us," she said.

Chambers added that Palazzo's caseworkers are currently taking steps toward beginning an investigation after receiving a privacy release form from McElroy in late May.

"Unfortunately, because you're dealing with bureaucracy, it often does take some time," Chambers said.

Wicker's office released a prepared statement on the matter.

"I am committed to ensuring our service members and veterans receive the best care possible when they return from combat operations," Wicker said in the statement.

"I will continue to work with the Department of Defense and the Department of Veterans Affairs to make the proper diagnosis and successful treatment of PTSD our utmost priority. The best science should be used when making these treatment decisions."

Efforts to look into this problem don't stop with the families of deceased soldiers.

Retired San Diego neurologist Fred Baughman has added his professional voice to the chorus of families speaking out against overmedicating military personnel.

It's turned into a hobby of sorts for Baughman, who first took interest in the cause after he read about the four soldiers who died in 2008, including Andrew White.

"I read and re-read that and said, 'This isn't right - guys in this age group do not just die in their sleep,'" he said.

And he's been Googling along with the Whites ever since.

Baughman has prepared a list of probable sudden cardiac deaths among U.S. military personnel, dating back to 2004.

James McElroy, who he has found out about only recently, may very well become number 330 on that list - a list that is steadily growing.

Baughman said this is surprising when compared to data from the three decades prior.

A 2004 study of sudden, nontraumatic deaths in U.S. military personnel including records from 6.6 million from 1977 to 2001 produced only 126 sudden cardiac deaths.

Baughman along with 15 grieving families have found more than double that from the past eight years with Internet searches.

"The military is not providing us any information or any records," Baughman said.

He connects the dots with antipsychotics.

"We know enough about the availability of these drugs in the military to know that the use of these drugs is pervasive," Baughman said. "It makes more sense to say, 'Who's not on these drugs?'"

Baughman points to the writings of nextgov.com's Bob Brewin, who notes that the U.S. military has spent more than \$1.5 billion in Seroquel in the 10 years leading up to 2011, and that 180-day supplies of 25 milligram dosages are supplied to soldiers in the field as sleep aids.

"There is so much money involved here, it's just unbelievable," Baughman said. "It's unthinkable."

Seroquel's manufacturer, AstraZeneca, paid \$520 million in 2010 to settle a U.S. District Court lawsuit in Pennsylvania contending the company marketed the drug for off-label uses, including treatment of PTSD.

The settlement was outlined in a U.S. Department of Justice press release, but the case file, involving whistleblower plaintiff James Wetta, remains sealed even though it has been closed for more than two years.

The United States entered the lawsuit as an intervenor plaintiff.

Baughman said the increased risk of sudden cardiac death with antipsychotics has been known for years - in the 1990s, an increasing amount of literature started popping up documenting such.

In 2006, the FDA put a black box warning on Seroquel.

In 2008, Baughman said a review of previous studies on the cardiac dangers of antipsychotics - especially when mixed with certain antidepressants like Paxil - was published.

"We're currently trying to apply some pressure to central command," Baughman said. "We're going to demand that they acknowledge these deaths."

He said Seroquel's removal from the treatment formulary for PTSD doesn't inspire him with as much hope as it does McElroy or White.

White and McElroy say that their next mission is to dig into VA treatment centers to find out if Seroquel is still prescribed to PTSD patients - along with continuing to push for reform from the top down.

While it may be too late for McElroy's husband, she said she has made it her goal to ensure no one else will suffer the same fate.

"It's my job," she said.

'I trusted the military to take care of my husband. They didn't take care of him.' Click it

Email Stan White at hswhite2346@yahoo.com.

Check out Alicia McElroy's Facebook page "Justice for Mac - a Soldier's Battle with PTSD."
