Medical Negligence Brief

This brief outlines the U.S. Army's medical negligence in the case of Staff Sergeant Robert Bales, focusing on its failure to address his diagnosed Post-Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI), its prescription of the neurotoxic drug Mefloquine, and the concealment of these facts during trial. The Army's actions created the conditions for tragedy and represent a shared responsibility that must be recognized in consideration of clemency.

1. Ignored Medical Conditions

Robert Bales was diagnosed with PTSD and TBI after surviving ten IED blasts and four combat deployments. Instead of providing adequate treatment or removing him from combat duty, the Army redeployed him into one of the most volatile regions of Afghanistan. This decision violated the Army's duty of care and placed him at predictable risk of psychological deterioration [1].

2. Prescription of Mefloquine

The Army ordered Bales to take Mefloquine, an anti-malarial drug with well-documented neuropsychiatric side effects. These include paranoia, hallucinations, psychosis, aggression, and suicidal or homicidal ideation [2]. Medical literature confirms that these risks are drastically heightened in individuals with PTSD and TBI. Mefloquine's neurotoxic effects likely magnified Bales's existing injuries, impairing his judgment and perception of reality.

3. Lack of Disclosure at Trial

The Army was aware of the dangers of Mefloquine and discontinued its use shortly after Bales's case, yet it failed to disclose this fact to the defense. Expert testimony from Dr. Remington Nevin and Dr. Stephen Stahl indicates that Mefloquine likely exacerbated Bales's PTSD and TBI symptoms [2]. By concealing this evidence, the government deprived the defense of a vital involuntary intoxication argument.

4. Shared Responsibility of the Army

The Army created the conditions for this tragedy — by redeploying a soldier with PTSD and TBI, compounding his injuries with a neurotoxic drug, and concealing these facts at trial — and it must share responsibility for the outcome. Assigning full criminal responsibility to Bales while ignoring the Army's role represents a systemic failure of justice. This shared responsibility must weigh heavily in favor of clemency.

Conclusion

Staff Sergeant Robert Bales was denied adequate medical care, subjected to a toxic drug regimen, and deprived of a fair trial. The Army's negligence and concealment of critical information fundamentally compromised his defense and sentencing. Clemency is both a legal corrective and a moral necessity in light of the Army's shared responsibility for the conditions that led to this tragedy.

References

1. Hoge, C. W., et al. (2004). Combat Duty in Iraq and Afghanistan, Mental Health Problems, and Barriers to Care. New England Journal of Medicine.

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3. U.S. Food and Drug Administration (FDA). (2013). Drug Safety Communication: Mefloquine and Neurological Side Effects. FDA Black Box Warning.

4. U.S. Department of Veterans Affairs, Office of Inspector General. (2012). Report on PTSD and Deployment-Related Mental Health Care.