INTEROFFICE MEMORANDUM

TO:

LCDR CHARLES D. SWIFT, JACG, USN

FROM:

EMILY A. KERAM, M.D. GAL

SUBJECT:

INTERVIEW OF SALEM HAMDAN 5/17/05

DATE:

5/17/2005

- 1. As I noted in my memorandum to you dated 5/16/2005, Mr. Hamdan's symptoms of Posttraumatic Stress Disorder (PTSD) and Major Depression are significantly increased when he is transported to Camp Echo to participate in pre-trial preparations. I have repeatedly observed the negative impact these symptoms have on Mr. Hamdan's ability to participate in these preparations. His symptoms are significantly reduced when he is allowed to return to Camp Delta after meetings have concluded for the day. I understand that you have requested this occur at each trip you and your team make to GTMO to work with Mr. Hamdan.
- 2. Yesterday I accompanied you and Mr. Schmitz to Camp Echo and interviewed Mr. Hamdan there. Throughout the evaluation, Mr. Hamdan was extremely anxious that he would not be returned to Camp Delta that evening. When we left Camp Echo at 1830, you were assured that Mr. Hamdan would be returned to Camp Delta that night. You confirmed that he would be returned to Camp Echo at 0900 this morning to continue our interview. When we arrived at Camp Echo this morning, we learned that Mr. Hamdan had not been returned to Camp Delta the previous evening.
- 3. Mr. Hamdan experienced an increase in psychiatric symptoms of PTSD and Major Depression as a result of his unexpected overnight stay at Camp Echo. He reported an increase in his baseline level of anxiety, depression, initial and middle insomnia, nightmates of the guards screaming at him, intrusive thoughts, memories and images of trauma he experienced during his prior isolative confinement at Camp Echo, and feelings of hopelessness and helplessness. He was obviously angry and irritable when we arrived at Camp Echo. On our arrival, he immediately told you, "I don't know who is lying, you or the guards." He was furious that you had not made sure he was returned to Camp Delta when you knew how important that was to him. He could no longer believe you or trust you to work in his best interests. He felt you had lied to him. This obviously damaged your relationship with him as well as his ability to assist you in the preparation of his defense. Although I had planned to spend today continuing my interview with Mr. Hamdan, we spent the day trying to re-establish a working relationship between Mr. Hamdan and his defense team. I understand that this dynamic has repeatedly occurred when you have met with Mr. Hamdan as a result of violations that have been made in previously agreed to terms of his confinement.

Encl(a)

- 4. Mr. Hamdan's current symptoms of Major Depression include depressed mood, decrease in appetite, and anhedonia (lack of interest in previously pleasurable activities). As a result, he has little interest in eating and finds it difficult to maintain his caloric intake. I note from his GTMO medical record that as of this date he has lost approximately 35 pounds since May 2002. He has not been on a hunger strike in one year. Mr. Hamdan reports that having the ability to add spices to his food makes the food more appealing, increases his interest in eating, and as a result, increases his caloric intake. Allowing Mr. Hamdan to continue to have access to spices at Camp Delta would allow him to curtail his weight loss and perhaps to regain some of the weight he has lost.
- 5. Mr. Hamdan's current symptoms of sciatica include significant lower back pain radiating into the right buttock and lower extremity, and worsening pain with immobility. Mr. Hamdan is customarily placed in a single leg restraint during meetings at Camp Echo. It is my observation that this position, although uncomfortable, is tolerable for Mr. Hamdan. He is able to move about a bit, which cases his back pain. Today he was placed in double leg restraints during our interview. This significantly and unnecessarily increased his back pain. During defense team visits, Mr. Hamdan should be placed in a single leg restraint based on the length of the visits and his demonstrated behavior, unless future behavior dictates additional security for the safety of his defense team. Treatment for his sciatica should include daily recreational time, for a minimum of one hour. On days that he is scheduled to attend meetings at Camp Echo, he should be given recreational time either before he leaves for Camp Echo, or after his return. Finally, Mr. Hamdan reported that he is frequently not given Tylenol or other analgesic medication when he requests it for back pain. Physicians providing treatment to Mr. Hamdan at GTMO have diagnosed him with sciatica and have ordered these analgesic medications. Steps should be taken to ensure that medication is given to Mr. Hamdan as ordered when he requests it