
INTEROFFICE MEMORANDUM

TO: LCDR CHARLES D. SWIFT, JACG, USN
FROM: EMILY A. KERAM, M.D. *EAK*
SUBJECT: SALEM HAMDAN, PSYCHIATRIC AND MEDICAL CONSEQUENCES OF CONDITIONS OF CONFINEMENT
DATE: MAY 16, 2005

1. I am a medical doctor and a forensic psychiatrist. I have worked in both federal and state prisons. I have provided treatment to inmates in General Population, Administrative Segregation, and Death Row. I currently work as a staff psychiatrist for the Department of Veterans Affairs and have expertise in the treatment of Posttraumatic Stress Disorder (PTSD) and Major Depression. I have been retained by defense counsel for Salem Ahmed Salem Hamdan. Mr. Hamdan is currently in custody in Camp Delta. He previously spent ten months in isolative confinement at Camp Echo, ending approximately September 2004. As of this date I have interviewed Mr. Hamdan on five separate days for over 20 hours. These interviews took place at Camp Echo, necessitating Mr. Hamdan's transport from Camp Delta.
2. In addition to interviewing Mr. Hamdan, I have reviewed records of the medical care he has received since arriving at GTMO in May 2002. Based on the information I have obtained, it is my opinion that Mr. Hamdan currently meets diagnostic criteria for both PTSD and Major Depression, single episode. I have not completed my evaluation, and therefore have not determined the other psychiatric disorders he may have. With respect to his medical condition, Mr. Hamdan's GTMO medical record indicates, and his current report of symptoms is consistent with, a diagnosis of sciatica.
3. Mr. Hamdan's current symptoms of PTSD include anxiety, initial and middle insomnia, nightmares, daytime fatigue, disturbance of concentration and memory, distractibility, hypervigilance, and increased startle reflex. He was significantly traumatized by his previous ten months in isolative confinement at Camp Echo. Mr. Hamdan reports an increase in symptoms of PTSD each time he is brought to Camp Echo to participate in meetings, as his return there again subjects him to conditions of that confinement. It is my observation and Mr. Hamdan's report that his symptoms of PTSD negatively impact upon his ability to participate in discussions that take place at Camp Echo. Mr. Hamdan experiences some relief in the intensity of these symptoms when he is allowed to return to Camp Delta at night. It would decrease his symptoms of PTSD and increase his ability to participate in pre-trial preparations if he were allowed to return to Camp Delta each evening once meetings in Camp Echo have concluded for the day. In addition, a mainstay of treatment of PTSD is to support activities that increase social interaction. It would decrease Mr. Hamdan's symptoms of PTSD if he were allowed to take his recreation time with other detainees.

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