

MEFLOQUINE (LARIAM) ACTION

an independent information and support group for people with mefloquine toxicity

www.lariaminfo.org

info@lariaminfo.org

SIDE EFFECTS QUESTIONNAIRE

Please print this form, fill it out, and make two copies. Give one to your doctor and keep one for yourself. Your answers could help your doctor diagnose your problem as an adverse reaction to mefloquine (Lariam).

Name			Age	Male	Female
Street			Phone	Cell	
City	ST	Zip	Email		

Who prescribed mefloquine (Lariam) to you?

Personal physician _____ Military branch _____ Peace Corps _____ Travel clinic _____ Employer _____

If a physician, provide the name and contact information _____

When did you take mefloquine? _____

Did you take it more than once? when? _____

Date started _____ Date stopped _____ Number of pills taken _____

When did you notice the side effects or unexplained symptoms? _____

How many mefloquine (Lariam) pills did you take before noticing side effects? (estimate ok) _____

Have you had (or do you still have) any of the following symptoms after taking mefloquine? *(This is not a complete list. For more details, see the product information approved for this drug in the country where you live.)*

<i>Symptom</i>	<i>Date started</i>	<i>Date stopped</i>	<i>Still have? yes/no</i>
1. Fast heartbeat			
2. Irregular heartbeat			
3. High blood pressure			
4. Chest pain			
5. Stomach/ abdominal pain			
6. Diarrhea			
7. Insomnia, sleep disturbances			
8. Abnormal dreams			
9. Psychotic episodes			
10. Paranoid reactions			
11. Mood swings/changes			
12. Hallucinations			

13. Panic attacks			
14. Aggression			
15. Suicidal ideas			
16. Pneumonitis			
17. Skin rashes, itching, oozing lesions			
18. Seizures (“fits”)			
19. Menstrual disorders			
20. Hot/cold sweats			
21. Fevers			
22. Allergies aggravated			
23. Ear pain			
24. Ear ringing, popping, clicking, buzzing, tinnitus			
25. Hearing fluctuates or hearing loss			
26. Sounds seem louder than normal			
27. Dizziness or vertigo			
28 Blurred or double vision			
29. Other visual disturbances (glare, moving lights, reading difficulty— words and letters switch, etc.)			
30. Fatigue, malaise			
31. Feeling “not right” or disoriented			
32. Anxiety or agitation, restlessness			
33. Depression			
34. Loss of self esteem			
35. Headache			
36. Difficulty concentrating			
37. Confusion			
38. Poor memory, forgetfulness			
39. Groping for words, aphasia			
40. Losing train of thought			
41. Muscle and joint pain, cramps			
42. Neck pain			
43. Loss of coordination—dropping things, can’t thread a needle, etc.			
44. Difficulty walking straight			
45. Impaired balance			

Dear Doctor: Side effects clustered between 23–45 may indicate damage to the 8th cranial nerve, the central and peripheral vestibular system. Mefloquine is a known neurotoxin; damage to the vestibular system is listed as an effect on the mefloquine label; vestibular damage has been demonstrated in lab animals. (*Dow G, et al. Mefloquine Induces Dose-Related Neurological Effects in a Rat Model, Antimicrobial Agents and Chemotherapy, 50(3): 1045-1053, 2006.*
<http://aac.asm.org/cgi/content/full/50/3/1045>. For additional research:
<http://www.lariaminfo.org/information/research.shtml>.)

Did you have any of these symptoms before you took mefloquine (Lariam)? Yes ___ No ___
 If so, which ones? _____

When did you first suspect that your symptoms were caused by mefloquine? _____

Have you discussed your symptoms with a physician? Yes ___ No ___

Is yes, what did the doctor tell you? _____

Have you had any tests to determine the cause of your symptoms? Yes ___ No ___

If yes, what tests? _____

What were the results? _____

Have these symptoms interfered with your daily life? Yes ___ No ___

If yes, for how long? 0–6 mo _____ 6 mo–1 yr _____ 1–2 yr _____ more than 2 years _____

Have these symptoms interfered with your work? Yes ___ No ___

Were you forced to take time off from your job? Yes ___ No ___ How much time? _____

If yes, have you been able to go back to work? Yes ___ No ___

If yes, how long after you became ill? _____

Has a MedWatch form reporting your adverse reaction been submitted to the FDA? Yes ___ No ___

If no, PLEASE submit a form NOW, even if your experience was years ago.

If yes, please take a minute to file an *updated* report (especially if you still have symptoms).

The form is short and easy to complete, no need for a doctor. You don't have to prove that mefloquine caused your symptoms; it is enough that you suspect it did. Download <http://www.fda.gov/MedWatch>

Please add any additional comments about your experience with mefloquine (Lariam). (Feel free to add a page.)

Would you be willing to talk about your experience with mefloquine? Yes ___ No ___ If yes email:
info@lariaminfo.org

Would you like to be in touch with other mefloquine survivors? Join the Mefloquine (Lariam) Action support group on Yahoo --click the link at www.lariaminfo.org.

“*Taken As Directed*” is a documentary on the adverse effects of mefloquine. It is currently out of stock. For more info and a link to view a trailer, go to www.takenasdirected.com.

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