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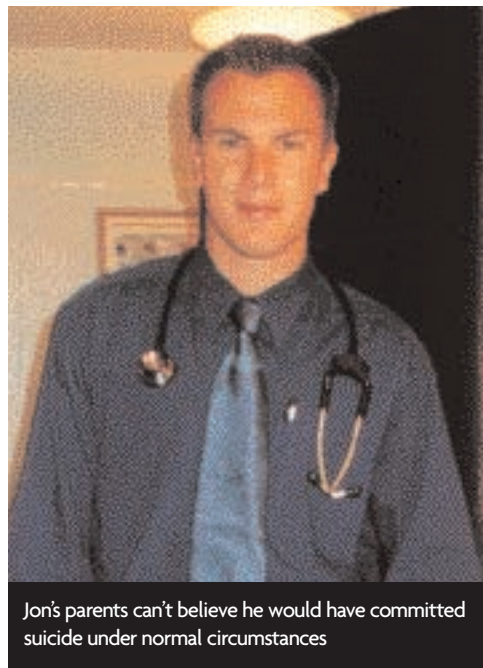
FASHION * BEAUTY * FOOD * HOMES * TRAVEL

WONDER DRUG OR DEADLY WEAPON?

REAL investigates claims that a drug prescribed to treat chronic acne is causing well-balanced people to become suicidal and we talk to the families left wondering why their loved ones changed so dramatically, and meet the woman whose face, and life, was transformed by Roaccutane

Jon Medland was a talented young medic in his final year at Manchester University with a very bright future ahead of him as a doctor. At 22, he already had his life mapped out. He had, what friends and family describe, as the 'perfect future'.

'He had everything going for him,' says his father Jonathan. 'He had a great hospital job lined-up, a lovely girlfriend he was going to marry – he loved his life, his family and friends.' Yet within four weeks of taking the acne drug Roaccutane for the first time, their son was found dead in his bedroom after committing suicide. 'It was utter horror – the Jon we knew and loved so well could not knowingly take his own life. He was aware the drug was affecting him, but what was so scary was it seemed to have induced a total psychotic state. When he hung himself, he couldn't have known what he was doing,' explains his father.



Jon's parents can't believe he would have committed suicide under normal circumstances

“ WITHIN FOUR WEEKS OF TAKING THE ACNE DRUG JON WAS FOUND DEAD AFTER COMMITTING SUICIDE

the drug make him do it? The tabloid newspapers had already run their inflammatory stories by the time that the findings of the chief toxicologist with the Medical Examiner's Office confirmed that Charles' body contained no drugs.

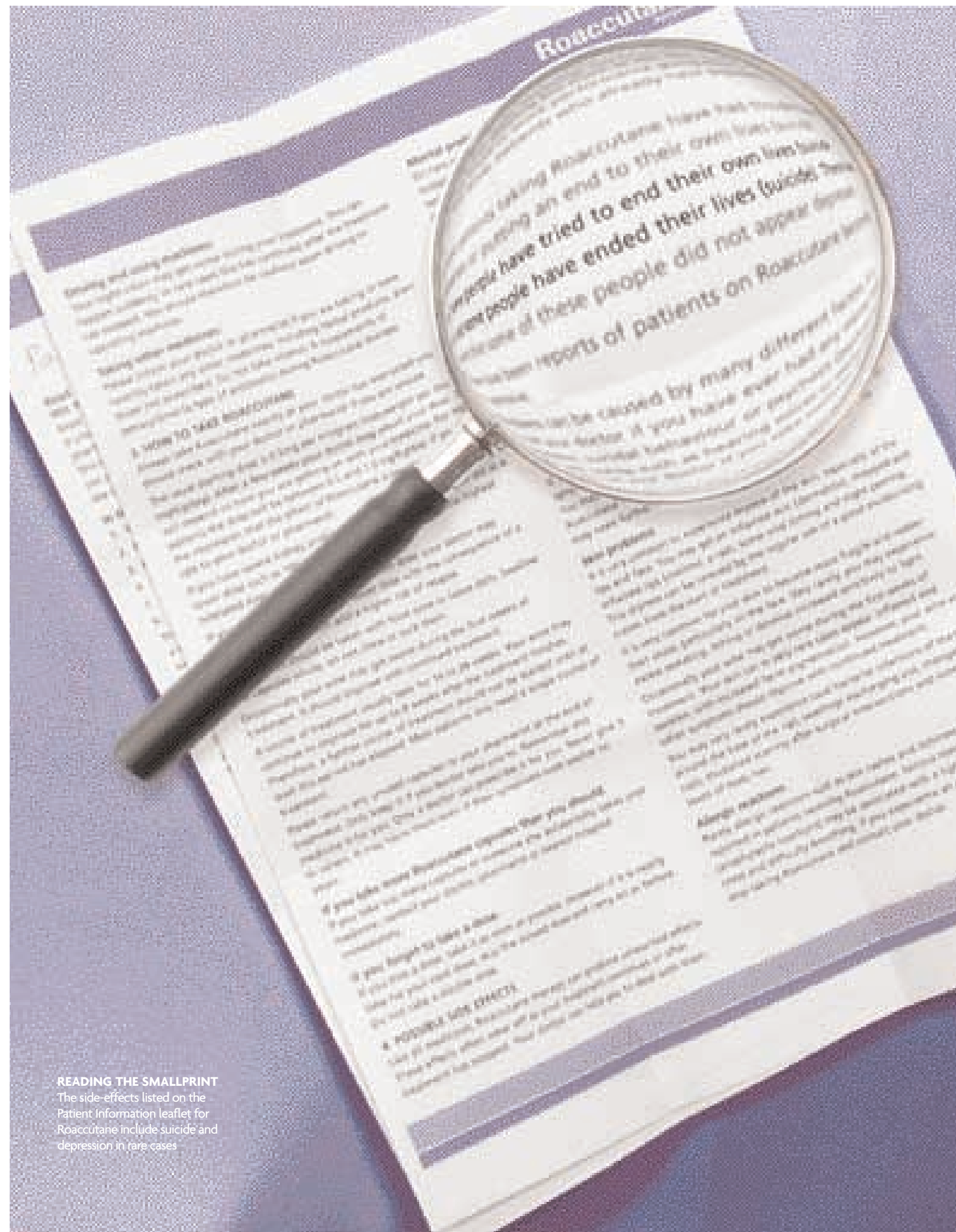
Clinical information has not been able to prove a link between Roaccutane, depression and suicide. The manufacturer Roche argues that there is no proven causal link between Roaccutane and psychiatric effects and that acne sufferers are a high-risk group for depression.

SLEDGEHAMMER DRUG

Alison Bowser, chief executive of the UK Acne Support Group says, 'It's a sledgehammer of a drug and is immensely powerful. There's nothing else like it on the market.' The drug carries strong warnings to prevent it being prescribed to pregnant women and women of child-bearing age because it can cause spontaneous abortion, miscarriage and birth defects.

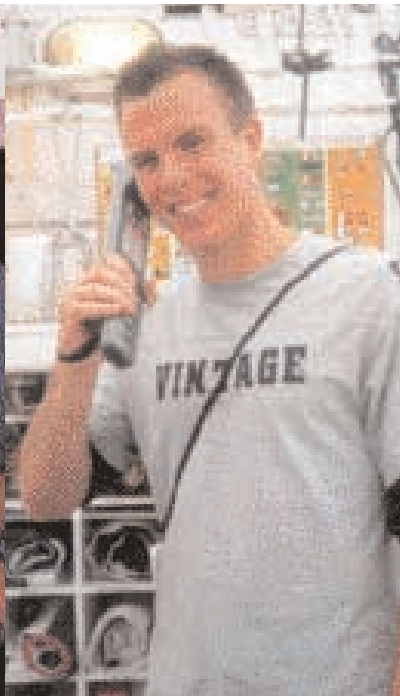
Jon Medland was suffering from a mild form of acne, yet was taking Roaccutane which is normally prescribed to treat only severe acne. Dr Anthony Chu, one of Britain's leading skin specialists, and a consultant dermatologist at Hammersmith Hospital in London, believes the drug is prescribed too often. 'Roaccutane is badly over-used and sometimes prescribed totally inappropriately to those suffering mild acne. The drug is so powerful it should only ever be given when all other treatments fail – and it needs to be carefully monitored with strict instructions to the user about

FEATURE Sarah Sim



READING THE SMALLPRINT

The side-effects listed on the Patient Information leaflet for Roaccutane include suicide and depression in rare cases



None of his friends expected that Jon would be capable of taking his own life

all the side effects.' The British Association of Dermatologists has publicly backed the drug, saying 'Dermatologists throughout the world believe that Roaccutane has actually saved many thousands of acne sufferers from long periods of misery and depression when other treatments for their acne have failed.'

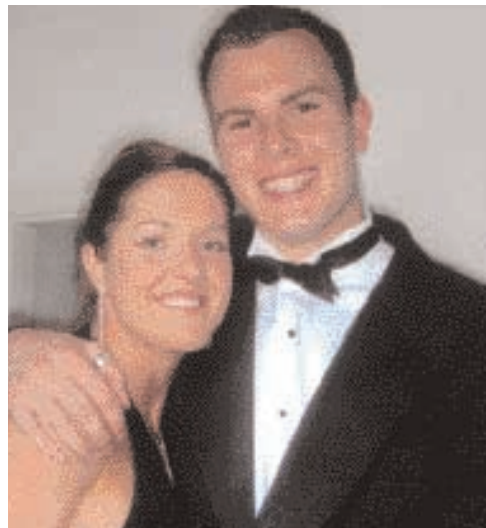
LIST OF SIDE-EFFECTS

In December 2003 Jon was prescribed a one-month course of Roaccutane. 'He barely had acne, but he wanted it cleared up,' says his father Jonathan. 'The dermatologist listed all the possible side-effects – from loss of sleep, inability to concentrate, to depressive and suicidal thoughts. Our initial reaction was against him taking it, at least until after his final medical exams, but he had never suffered depression and some of his medical friends were positive about Roaccutane. So we didn't doubt the drug – or our son's decision.'

Their son and his girlfriend Vicky spent Christmas at the family's Barnstaple home in Devon before returning to Manchester. Jon was slightly less exuberant, but nothing to cause any alarm, recalls his mother Pam. On New Year's Day, Jon sent his parents a loving text message wishing them a great 2004. He was due to start a new work placement the following week.

On the second night he phoned his parents to say he couldn't sleep at night because he felt so cold. 'We didn't think anything of it and decided he didn't have enough bedding,' recalls Pam. 'The following day, however, he rang again to say that he still wasn't sleeping properly which was very strange. He didn't sound himself at all and said he was having trouble concentrating at work. He was tired and down. At that point alarm bells rang – I told him it could be side-effects from Roaccutane. I urged him to stop taking it immediately and he did, that same day.'

Jon sent his parents various affectionate text messages at the weekend, but then they received a



TOP LEFT Jon with his family at home
 ABOVE RIGHT Jon was always a positive person, says his family
 ABOVE With his girlfriend Vicky, Jon was planning to start a work placement in the New Year

“FOR A DRUG TO AFFECT A PERSON OF A VERY SOLID FOUNDATION – IF IT CAN LEAD THEM TO TAKE THEIR OWN LIFE – THEN IT DESERVES FURTHER INVESTIGATION

shocking phonecall from him on the Sunday evening that sent shivers through his mother. He told his mum that he'd had some 'silly' thoughts, but he had talked it over with his house-mates who felt it was a cry for help rather than something serious. 'We were really upset – it just wouldn't sink in what we were hearing. It just wasn't possible for Jon to even think such things on his own accord,' says his dad.

SUICIDAL THOUGHTS

The couple planned to visit him the next day, but Jon reassured them he would be fine. 'His word was always his bond. He was always so honest, I made him promise to phone me if he had another suicidal thought. 'I was on the phone to Jon on and off all day long the next day,' says his dad. 'He was talking logically but he sounded distressed. I tried to reassure him. I had told him earlier that he must see a doctor, but he didn't want to take the anti-depressants prescribed by his GP. He was worried how the Roaccutane in his system might react,' explains his dad. The couple planned another visit, but again their son assured them he was feeling better. 'By the evening he sounded more positive. He talked about his future appointment with the hospital consultant to discuss the fall-out of his stopping taking Roaccutane. He was even planning to take his girlfriend to a concert.'

Despite their son's apparent improvement, the couple privately agreed to drive to Manchester to see him the following day, but by the following morning it was too late. 'When we received the horrific news from his house-mate we felt utter disbelief. Jon must have been in such a psychotic state, he couldn't possibly

have known what he was doing,' says his father.

At the inquest, 10 months later in October 2004, the Manchester coroner Leonard Gorodkin recorded a verdict that Jon Medland killed himself, but he called for more information about Roaccutane. He said, 'For a drug to affect a person of a very solid foundation, if it can lead them to take their own life, then it deserves further investigation, if a link can be proved.'

ROACCUTANE: A SAFE DRUG

A spokesperson for the manufacturers of Roaccutane, Roche, gave this statement in response to the article...

'We understand and sympathise with the families and relatives of those who have suffered the tragic loss of one of their loved ones.

Unfortunately, severe acne can cause some sufferers to become depressed and can also affect their mood and self-esteem.

This is why the information provided with Roaccutane carries a warning that some patients may experience mood changes, including an increase in depression.

The information leaflet, which is inside every pack of Roaccutane tablets, also tells patients that – before they start taking the medicine – they must tell their doctor if they are depressed, or if they have felt this way in the past.

The leaflet also advises patients that they must tell their doctor if they notice any change in mood or behaviour and gives examples of the types of changes they should look out for.

We are very keen to further raise awareness of the high risk of depression in people suffering from acne, regardless of the treatment they are taking and are currently looking at ways in which we can do this.

While no causal link has been established between Roaccutane and either depression or suicide, we are constantly monitoring all available safety databases on Roaccutane worldwide.

In this way, we hope to continue to reassure patients and physicians of the benefits of Roaccutane in managing severe acne.

Since 1982, over 13 million people have been treated with Roaccutane.'

April 2005

ROACCUTANE CHANGED EVERYTHING FOR THE BEST
 Nicola Millbank's young life was marred by severe acne from the age of nine, but a decision to begin Roaccutane treatment turned her life, and her skin, around

My acne started when I was about nine years old and I was put on antibiotics to help to clear it up. I think in all I have been on about five different antibiotics over the years. The worst patches were at the bottom of my face, underneath my chin, on my chest and back. As a little girl it was very frustrating and sore, but I don't think at that age you are completely aware of the confidence-sapping side to acne – the way it makes you feel about your self-image.

It wasn't until I was in my teens that I became hyper-aware of my condition and how different I looked. When I was little, people would tell me not to worry as it would all clear up soon, and by about 10 my mum would say that by the time all your mates have teen spots, yours would have gone. Of course, by the time I was 16, my friends' spots and acne was pretty much gone, but mine was just getting worse. It was very frustrating to be the only one.

Over time my body started to build up an immunity to each set of antibiotics, and every time I changed it would get a bit better and then go downhill and be a lot worse. In all honesty, my acne never really got better as such, I was just able to get it under control a bit more. It didn't clear up completely. The only thing that the antibiotics did for me is that they stopped me from scarring really badly, which is obviously a very distressing part of recovering from acne, because you are left with a lifelong reminder of it.

COMING OF AGE

When I was about 16 we moved house so I signed up for a different doctor, who immediately started asking questions about my acne. They were particularly interested in whether anyone in my family had had the same condition. Of course, I was able to tell them that my dad had very bad acne as a child – he still has the scars – and also my cousin. Apparently, it can run in the family, which was interesting to hear.

It was a great relief to have someone taking an interest in my acne. Now I can see how it really held me back. I had so little confidence as a teenager compared to my friends who were much more outgoing and forward with boys. I always wore my hair down and layered around my face to try to hide it. My fringe was something to hide behind, not to mention all the make-up I used, which I can now say looked awful. I know your teenage years are meant to be awful, but really!

Once my GP had referred me I went to see a dermatologist who, perhaps because she was a woman, was very sympathetic and seemed to understand how important getting my skin cleared up was to me. When she suggested Roaccutane I had never heard of it, but she said that it might be time to try a different tack, since all the antibiotics hadn't really worked. Frustratingly, I would have to wait a year on the NHS to get the treatment, but I knew it would be worth it in the end. Once I was ready to start taking it, I had to stop taking anything for two months beforehand to clear out my system – so the acne got really bad – and then



Nicola is now fresh-faced and happily free of acne

I was put on contraceptive pills to make sure I couldn't get pregnant. They were very clear that the drug would be very dangerous to a foetus.

Obviously my parents, especially my dad, were not too pleased about me being on the Pill so young. I was so embarrassed when they asked me whether I was sexually active. It's not normally something you want to discuss with your parents when you are in your teens. Perhaps because of my acne, I hadn't had many boyfriends, so it wasn't an issue.

The specialist explained all the side-effects and I have to admit I found it quite scary at first. It was such a big list. Dad didn't want me to go on it, but the dermatologist reassured us that they would monitor me and helped us to understand how everyone could keep an eye out for mood swings. If there were any warning signs I would be taken straight off.

Dad was adamant until I had a chance meeting with a nurse at my GP's office, who told me about her husband who had had a really positive experience with Roaccutane. When I told Dad about this he was happier about me starting treatment, which was a huge relief, as I really wanted to try it. I know he was only being protective, but I am a naturally happy person, and not at all depressive. The worst two months were, ironically, the two months before I started the course and couldn't take anything.

It was about two months in that I started to see a big difference in my skin once I began taking them. It was about Christmas and quite a few people, like my grandad, said that my skin had looked awful before. I know people were really pleased for me, but part of me wishes that they had said something before! After nine months my skin was clear and I haven't had to go back on it. Some people do have to start another course after a year, but once it was all gone I stopped taking it and haven't gone back for five years.

One thing I did notice was that I had a lot more attention from boys and now I'm in my third year at the University of Greenwich doing Media Studies and I'm a totally different person. ▶

I SAT WITH MY SICK CHILD FOR THREE MONTHS

Mary Braid's* 19-year-old son Martin* went from being a fun-loving, popular and ambitious student to a suicidal psychotic in just four months. He was prescribed Roaccutane for his acne

Five years ago, my son was a typical university student. He was highly motivated and very sporty. He had lots of friends and he loved life – he was never depressed. He'd suffered from very mild acne – more like teenage spots – since he was 15. After antibiotics failed to eradicate them, his GP referred him to the dermatology department of our local hospital. In November 1999 Martin was offered an eight-week course of the drug.

HIGHLY AGITATED

By February 2000, he had almost completed a second course of treatment, when his mental state suddenly and inexplicably deteriorated. He phoned me up out of the blue in a paranoid state, believing his computer was bugged. He was highly agitated and called me six times. It was completely out of character. He sounded totally paranoid – he clearly needed help.

Then he told me about taking Roaccutane and I suspected a link, although my husband Paul thought I was being irrational. When I picked Martin up from university that same day, his flat-mates confided in his total change in behaviour – he wasn't eating and he hadn't slept for three nights. He looked terrible, with a sickly yellow pallor. He was totally manic, hyped-up. I knew I must not panic him, so I coaxed him gently to come home with me.

I was driving him back on the motorway when he lunged for the door handle. It was terrifying. I almost crashed the car trying to hold onto him with my other hand. I don't know where I found super-human strength to pull him back. Moments later, he tried kicking in the windscreen with his feet. Again, with my other hand I grabbed him back. His actions were so spontaneous he didn't know what he was doing. He was in a total psychotic state.

Back home, I was livid when the GP dismissed everything as stress. I knew my son's thoughts were totally out of control and that he could harm himself. So we forced him to rest in bed at home, locking both

front and back doors so he couldn't escape. Paul and I took it turns to stay at home and watch over him all day and night. The GP came again, even a psychiatrist and social worker visited. Yet my son was physically sick – he was yellow – and his left eye had drooped. He couldn't walk properly or hold his weight. His legs would collapse or he would smash into a wall. He had blood in his urine and stools. He complained that he was going blind and couldn't see anything. He said there were voices in the television talking to him. He was curled up in a foetal ball with severe stomach pains. He even started hallucinating.

I often had to hold him to stop him from screaming. For seven months we looked after him with no help from anyone. I was so frightened, I slept with my back to his bedroom door so he couldn't escape and kill himself. By August 2000 he slowly improved. He even wanted to return to university. However, after a month, he relapsed badly into paranoia again. He ended up catatonic in a psychiatric hospital. Martin needed neurological care, yet the medical profession ignored the physical symptoms and quickly labelled him a paranoid schizophrenic – a mental patient. He escaped once and ran across a busy road. Another time he threw himself against a glass window. I was terrified to leave him – I didn't trust anyone to look after him.

ON THE CRITICAL LIST

I relayed my fears that I thought Roaccutane was to blame. I was convinced it had poisoned him and that he'd suffered an allergic reaction. The doctors agreed that his body had gone into paralysis. He was now critically ill and in a coma. He almost died on several occasions. I sat by his bedside for three months, terrified that he would die. Martin suffered practically every side-effect of the drug – around 30. I know in my heart the next step would have been my son's suicide. Although Martin is now back at university, he is very fragile, physically and mentally.



POSED BY A MODEL

*Names have been changed

“ I SLEPT WITH MY BACK TO HIS BEDROOM DOOR SO HE COULDN'T ESCAPE AND KILL HIMSELF



CONTACTS

You should contact your doctor or dermatologist for professional medical advice about drug side effects, acne and its treatment.

- For advice on the prevention of acne, and tips on dealing with it, contact the Acne Support Group on 0870 870 2263. www.stopspots.org
- Government's healthcare regulator, MHRA. Call 020 7084 2000. www.mhra.gov.uk
- Log any adverse reactions on www.yellowcard.gov.uk
- www.april.org.uk
- www.accutaneaction.com/www.accutanehelp.com