

1 **DECLARATION OF RALPH ANKENMAN, M.D.**

2 I, Ralph Ankenman, M.D., have personal knowledge of the facts stated in this declaration
3 and, if called as a witness, I could and would testify competently thereto under oath. I declare as
4 follows:

5 1. I am a psychiatrist. My practice involves the evaluation and treatment of the brain
6 injured and mentally retarded at Madison County Hospital in London, Ohio.

7 2. I have been successfully using a new and experimental treatment with my patients, which
8 I believe should be considered for the treatment of Terri Schiavo. We have anecdotal evidence
9 that patients who are in a catatonic state become more functional on this treatment using the
10 medicine, Namenda (memantine). Such patients who were once catatonic and did not move
11 when another person raised their hand became normal in movement, and patients who could not
12 talk well are now able to talk easily.

13 3. Namenda is a medicine that slightly modifies NMBA (a type of glutamate receptor),
14 which is an amino acid receptor of the brain and, therefore, may cure dissociation in the brain.

15 4. The treatment is to administer doses of Namenda on an accelerated schedule of
16 increasing the dose from 5 mg every 2 to 4 days up to at least 20 mg a day to see if Ms. Schiavo
17 will be able to make new attempts to communicate with others.

18 5. Such a treatment is based on the properties of this newly available (only since 2004)
19 medication and is built on several assumptions, which are plausible, but not standard concepts.

20 6. The long duration lack of speech seen after injury trauma is not always due to destruction
21 of brain structure. Sometimes it is due to a state of brain dysfunction that is reversible. The
22 condition of dysfunction can be considered a state of dissociation, wherein the brain is blocked
23 from certain patterns of organization and thus unable to perform certain routine activities. It is
24 reasonable to consider it a dissociative state since dissociation is one psychological phenomenon
25 which can last years then cease to exist instantaneously. There was a recent case involving Sarah

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1 Scantlin in Kansas, who started communicating after 20 years. It is easier to consider that she
2 was blocked from speaking by a dissociative process which suddenly resolved than it is to
3 believe that she had an area of neurological injury which somehow rejuvenated after 20 years.

4 7. Namenda has demonstrated the ability to help recover blocked speech in a variety of
5 situations which might represent dissociation. This is seen in Alzheimer's patient's increasing
6 ability to communicate. It is also seen in the improvement of flow and clarity of the talk of the
7 brain-injured, the increased socialization and attempt to communicate of autistic individuals, and
8 in the rapid improvement in function and verbal communication of patients who have been in
9 catatonia. Namenda also helps individuals with standard dissociative conditions - specifically it
10 can diminish the amount of time that individuals "lose" in conditions such as Post Traumatic
11 Stress Disorders. (Namenda acts on a glutamate receptor mechanism as a partial blocker. It has
12 long been believed that glutamate is related to dissociation since the two powerful medicines
13 which cause dissociation are strong complete glutamate blockers - PCP and ketamine.)
14 Namenda is quite free of major side effects.

15 8. Unfortunately, there is as of yet no published literature validating these assertions. The
16 *American Journal of Psychiatry* and the publication *Current Psychiatry* have accepted articles
17 about the use of Namenda in Catatonia for future publication.

18 9. I understand that this is a presumptive treatment; it has not been proven to work in any
19 case of post-injury mutism. If it were to work, it would demonstrate that Ms. Schiavo has intact
20 facilities. However, failure to obtain a response does not indicate that she is incapable of
21 functional thinking.

22 10. The idea of using a medicine to spark brain function in a brain is not a standard concept -
23 however, its proven rapid benefit in several patients with catatonia provides a reason to believe it
24 is worthwhile trying it for Ms. Schiavo.

25 11. I would be pleased to make myself available to assist in the evaluation and treatment of

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1 Terri Schiavo. I strongly believe that she deserves the chance to benefit from all new treatment
2 programs, including the possible use of Namenda.

3 I declare under the penalty of perjury under the laws of the State of Ohio that the
4 foregoing is true and correct.

5 Executed this 3 day of March 2005, in London, Ohio.

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Ralph Ankenman MD
Ralph Ankenman, M.D., Declarant

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