

The ME GI bal Chronicle

www.let-me.be

Extra Edition – October 2015



1. Colofon / Personalia



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Textual contributions for the October issue need to be supplied in Word by 10st December and sent to: contribute@let-me.be

The next issue will come out on December 20nd, 2015.

Subscribe to this newsletter

We are no association or society, just a bunch of idealists who want to give our best efforts towards recognition of this terrible disease. By trying to help connecting to each other all patients all over the world. Anyone who expresses the wish to receive the Newsletter will be added to the list: that's the only formality and thing to be done. subscribe@let-me.be -

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Picture front page: **Greg & Linda Crowhurst, Eddy Keuninckx**

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We as editors tried to make the magazine much more accessible by adding a link to each article as included in the Table of Contents, which gives you direct access to the article itself. Any suggestion is most welcome.



3. Introduction



Dear readers,

The editors of the ME Global Chronicle decided to publish a special on the Danish severe ME-patient **Karina Hansen**, who is kept against her wishes and the wishes of her parents in a clinic for people with brain damage (which she doesn't have), after having spent more than two years in Hammel Neurocentre in Hammel, Denmark. Being supervised by psychiatrist **Per Fink** and **Nils Balle Christiansen** who decide about her life.



The contents of this extra edition consists mostly of articles, published in MEGC 13, but are highlighted here to commemorate the third birthday **Karina** will spend in custody, on November 7, 2015, when she will become 27.

We believe that it's most important the voice of the entire global ME-community is being heard on this occasion, both for the sake of **Karina** and her family, and of the community itself. It is high time to raise our joined voices, to proclaim we don't take our being discriminated and stigmatized and not being treated or even mistreated anymore.

What you can do:

- ✚ Write a birthday card to **Karina**, in a way it will get to her on or before 7th November, either to her parents **Ketty** and **Per**, or to the clinic. Although the psychiatrist most likely decided no postcard will be handed over to her:
Ketty and Per Hansen
Kløvermarken 8,
7500 Holstebro, Denmark

Karina Hansen

p/o Tagdækkervej 10
8450 Hammel, Denmark

- ✚ Give a donation to the fund **Save4Children**:
<http://www.geef.nl/donatiemodule/taal:en/doel:save4children>

In coordination with the Danish groups all donations will be spent on **Karina's** case, until she is set free, like the German girl **Joanne** last July.

- ✚ Support all activities to support the campaign to free Karina (more news later). Check this page for more actions. People who sign up for the event will be notified about further actions in early November when all the cards have been sent: <https://www.facebook.com/events/499460126901603/>

Let our joined voices be heard, all over, by everyone

Next issue will be published about the 20th December, its deadline being the 10th December 2015. Contributions, preferably in Word, can be mailed to: contribute@let-me.be.

However if you think something's important enough to bring to all our attention, it can be submitted earlier through: <http://ww.facebook.com/groups/TheMEGlobalChronicle/>


or

the mentioned email-address:
contribute@let-me.be

The editors



4. Karina Hansen



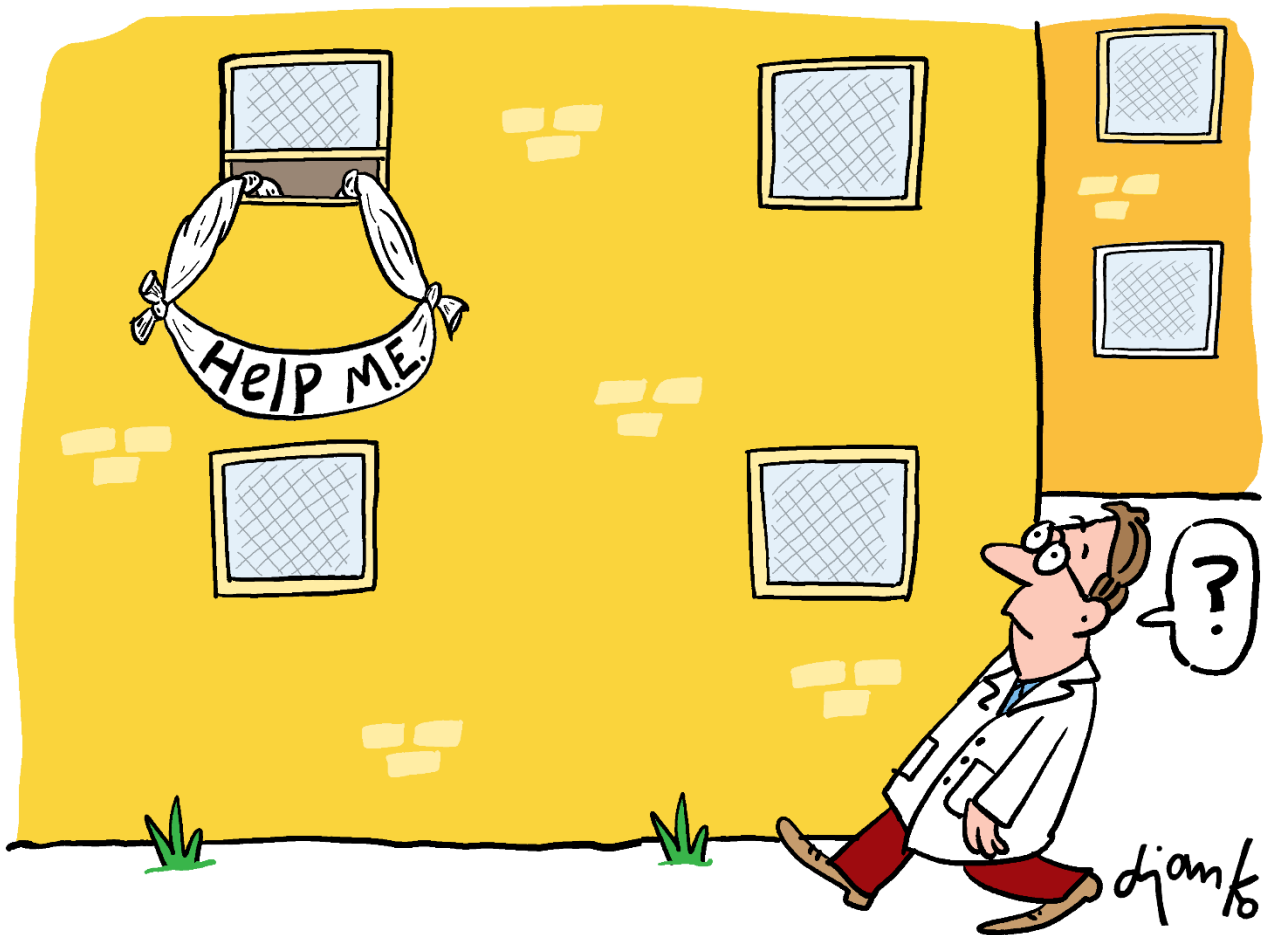
On February 13th 2013, Karina called her mother and said "How can I get out of here? I can't take it" and the connection was cut. That was their last contact.

They later discovered that Karina made a total of 43 phone calls and sent 7 texts in an attempt to get help before her phone died.

Her last call was a call to the police that lasted about 40 seconds. Transcripts have been requested but not provided.

Please join the event and support the fight to free **Karina**:
<https://www.facebook.com/events/499460126901603/>

Cartoon Djanko



Karina Hansen – 3rd Birthday In Hostage Of The Danish Psychiatric System



Karina Hansen is a 26-year-old Danish Severe Myalgic Encephalomyelitis (ME) patient.

Unfortunately, **Karina's** story is no ordinary disabled persons story

Karina, with the help of her parents, was struggling with an unknown disease from the age of 16. She was eventually told she had ME, although no official diagnosis was given. But the treatment she was then given made her condition worse, thus requiring her mother to become her full time carer.

In Denmark, People with ME are deemed to be suffering with a 'Functional Disorder' which is psychiatric condition. Their health service treatment is GET (Graded Exercise Therapy) & CBT (Cognitive Behavioural Therapy) & antidepressants.

Treating ME patients with these treatments, due to the PENE (Post Exertional Neuro-immune Exhaustion) effect can often tip them into a severe ME state. This happened to **Karina** in 2008 when she was admitted to an arthritis hospital.

In 2010 **Karina** was again pressured into a hospital stay. By this time, she was suffering all the classic ME symptoms, plus light & noise sensitivities. During that hospital stay, a Dr. recorded that **Karina** was not depressed or had any psychotic tendencies, so there was no reason why she should be kept for psychiatric reasons, so should be allowed to go home. Two weeks later she was officially diagnosed with ME.



In early 2012, I remember reading that a young girl (her name was unknown at the time) was being pressured by a Danish psychiatrist, **Per Fink**, to be taken into his Hammel Neurocenter psychiatric clinic, but refused to state what the treatment would be.

This reminded me of the case of the UK Severe ME patient **Sophia Mirza**, who in 2005 was forcibly removed from her home by Social Services and psychiatrists and subjected to intensive GET/CBT treatment which sadly led to her premature death. The coroner stated the cause of death was ME/CFS which was exacerbated by the psychiatric treatment (they did not know about PENE in those days).



Karina and her parents hired a lawyer and were granted the power of attorney over **Karina** and managed to fend off the advances of **Per Fink**. So **Fink** then wrote to the Danish Ministry of health asking for the power to remove the **Karina's** parents' legal rights over her.

On February 12th 2013, **Per Fink** was (not actually there) but behind an unannounced return, by five policemen, two doctors, two social workers and a locksmith, **Karina's** mother was physically restrained whilst the bedbound

Karina was forcibly removed, pleading with them to allow her to remain at home with her family.

The Danish state overrode **Karina's** parents' legal rights to represent her, by making some false claims against the family, that resulted in the state imposing a legal guardian hand picked by the psychiatrists. These allegations were later dismissed but the legal guardian has remained and has actually been extended, despite numerous protest from ME patients from around the world.

Since that time, **Karina's** parents' rights of power of attorney, have been disregarded and **Per Fink** installed a legal guardian, a retired policeman named **Kaj Stendorf**, who has replaced the rights of her family for her. He has also refused all requests from **Karina's** family to visit her including Birthdays and Christmas.

The psychiatrists have imposed a total ban on anyone who knows **Karina**, from seeing her, throughout the two and half years of her captivity. This also includes the Chairman of the Danish ME Assn and the UK **Dr. Nigel Speight** (ME Expert). They claim **Karina** has a mental health condition, because they are politically driven to prove that she does not have ME and that ME does not exist in Denmark.

They are funded by the worlds Health insurance industry and Big pharmaceutical companies. The psychiatrist **Nils Balle Christensen**, has by his own admission, said that he does not know what is wrong with **Karina**, but he claims it isn't ME.

Per Fink has stripped **Karina** of her ME diagnosis and replaced it with an unknown psychiatric diagnosis and barred **Dr. Speight** from carrying out any tests on **Karina** to get a second opinion.

Their repeated use of psychiatric treatment on **Karina**, such as GET etc, has by their own admission resulted in brain damage to **Karina**. As well as being guarded 24/7 by the legal guardian, the staff in the 'care home' are barred from speaking about **Karina** to anyone, including the rest of the patients in the home.

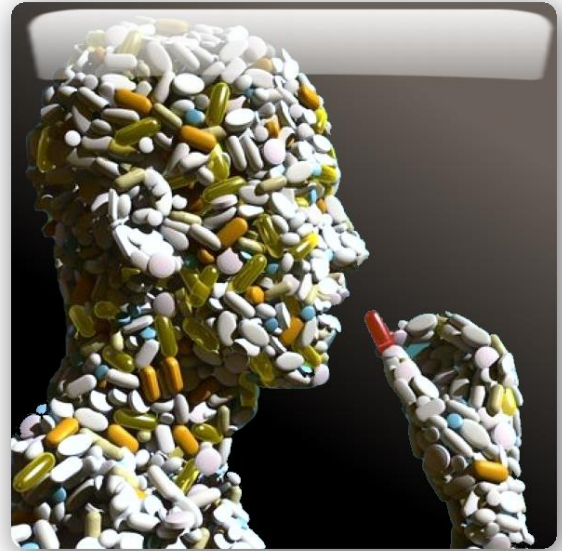
There is an unofficial media blackout in Denmark about **Karina** and she was even hidden when the Danish Royalty visited the Hammell center last year. This is a political situation that was set up by the previous Danish Social Democrat Govt and is now being continued by the current Danish Liberal party Govt.

They have a constitutional monarchy and the main parties are virtually the same. A very similar situation to the pre Corbyn UK situation. The Govt will not respond to appeals by concerned individuals by concerned ME patients around the world.

The Danish State has funded the psychiatrists to redefine the ME disease as a psychiatric disease in Denmark. At the same time Denmark has acknowledged along with WHO's ICD-10 definition of ME as a neurological disease. So it does not make sense.

We are fighting the Danish state and the financial power of the Health insurance industry and Big pharmaceutical companies. **Karina's** parents have employed a Lawyer for a long while and that has led to them draining their personal finances.

The reason the Health Insurance industry are funding **Fink** is because ME is recognised by the WHO (World Health Organisation) ICD-10 as a neurological disease. Therefore, ME patients can claim on their health insurance.



These companies have a clause that that enables them not to pay out on psychiatric illnesses. So they can save millions by avoiding the requirement to pay out to the 17 million ME patients around the world. The pharmaceutical companies are also looking to make billions out of the same patients by manufacturing psychiatric drugs for the worlds ME patients.

Last summer ME patients and advocates had a fundraising campaigning to fund further legal challenges against the psychiatrists. They now have a **Dr. Stig Gerdes** who has been active in campaigning against the use of Gardasil in Denmark. He intends to challenge **Per Finks** who theory on his BDS (Bodily Distress Syndrome) Diagnosis, which is a psychosomatic functional disorder, that he claims is the real truth about ME and numerous other misunderstood diseases.

Without a doubt, they have all now gone too far to save face in their attempts to disprove ME and are unable to turn back now. The same power that many of the worlds psychiatrists have, is based around the DSM V (Diagnostic & Statistical manual).

They intend to create a huge multimillion dollar psychiatric industry around the manual. We in the UK have the **Wessely** lobby who claim to be CFS/ME experts and are employed as consultants on ME by the DWP and the NHS. The UK psychiatrist **Peter White**, who is one of the **Wessely** lobby, is actually involved in **Karina's** case and BDS has been trailed in the UK.

On November 7th 2015, **Karina** will spend her third birthday as a hostage to **Fink** and has no hope of release in sight, **Karina** desperately needs our help. Please don't forget **Karina**.

The psychiatrist has never allowed her family & friends to visit her, regardless whether it is her birthday, Christmas or whatever.

Is this the way a very ill human being should be treated in a modern European country and where does the Human Rights Act stand on cases like this?

Shame on Denmark for allowing this to happen in 2015 and the Danish media who have imposed a news blackout on **Karina's** case.

What is Amnesty Internationals view on this abuse of human rights in Denmark?

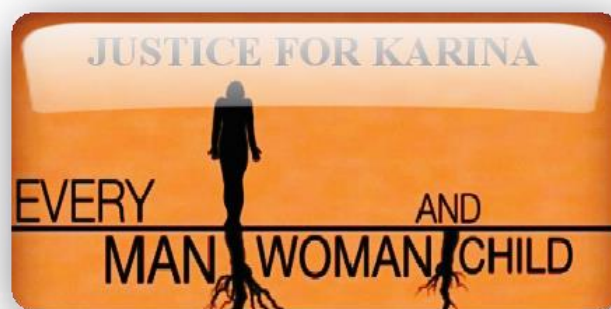


What is the policy of the European court of Human Rights on this matter?

In November, for the second year running, we will be organising a mass birthday card campaign for **Karina**. The psychiatrists have ruled out accepting any cards for **Karina**, so all cards will once again be sent to her parents' home in Denmark.



On behalf of **Karina**, we appeal to Amnesty International to try to help **Karina**. Send someone to talk to her parents and the Danish ME patients who hold vigils out side the home that **Karina** is bring held against her will. Please give **Karina** hope on the eve of her third birthday as a hostage.



https://secure.avaaz.org/en/petition/Justice_for_Karina/share/

Michael Evison

Patients Battle For Justice



Is it possible that a disease as impairing as Type II diabetes mellitus, congestive heart failure, multiple sclerosis, and end-stage renal disease could be repeatedly belittled and delegitimized by scientists and health care professionals? Tragically, this is the case for a devastating illness affecting over one million Americans, and these patients have been deprived of their basic rights to respect, appropriate diagnosis, and humane treatment.

In the beginning, patients with this illness had a credible name, myalgic encephalomyelitis (ME), and diagnostic criteria that had been developed by the distinguished British physician, **Dr. Melvin Ramsay**. Yet, in 1988, the Centers for Disease Control (CDC) renamed this illness chronic fatigue syndrome (CFS).

Patients were unanimous in their disdain for this trivializing term, but they were no match for the supreme power and authority of the CDC. The new name placed patients around the world in a compromised position, as they were now forced to use a degrading and stigmatizing term in explaining their illness to family members, friends, work associates and medical personnel.

Patients were next characterized as having a relatively rare "Yuppie Flu" disease, and flawed epidemiology was responsible for these inaccurate and biased characterizations. If this were not enough, the CDC in 1994 developed a case definition that did not require the cardinal symptoms of this illness (such as post-exertional malaise and neurocognitive impairments).

When this porous case definition was used to select patients, the resultant heterogeneity increased the risk of failing to consistently identify biomarkers, which contributed once again to dismissing those affected as having a psychiatric illness. Misguided psychiatrists then developed treatment approaches focusing on increasing exercise, even though the patients' chief complaints were muscle weakness and exercise-induced fatigue.



Rarely in the annals of recorded medicine has there been such a **David and Goliath-like battle**, with impaired and sick patients trying to defeat an entrenched medical and scientific establishment. Their story of resistance is not one of an epic skirmish, but rather a veritable war with health care professionals and scientists that has endured for decades, as has been so well documented by **Hillary Johnson**.

This past year, in an effort to rectify these tragic abuses, the Institute of Medicine (IOM) released a report that not only clearly emphasized the debilitating nature of this illness, but also strikingly rejected the stigmatizing name CFS and the defective case definition.



Unfortunately, particularly in light of decades of past disastrous scientific blunders, the IOM once again imposed an inappropriate name (i.e., systemic exertion intolerance disease) on the patient community, but patients valiantly challenged this recommendation by collecting data that exposed the spuriousness of this foolish name change effort.

Even a federal panel called the Chronic Fatigue Syndrome Advisory Committee at its recent meeting in August has rejected this new name.

The IOM also released a new case definition to replace CFS, and our published work now suggests that these new criteria would almost triple the prior CFS prevalence rate, and this is in part due to the inclusion of individuals who formerly had been excluded.

Unwittingly, this inadvertent action accomplished much of what **Bill Reeves** and the CDC had attempted to do a decade ago when they proposed an ill-fated expansion of the case definition.

Is there any way to salvage the damage inflicted on the larger patient community by well-intentioned scientists from the IOM? Perhaps we might consider re-activating the brilliant scholarship of **Dr. Melvin Ramsay** and the term Myalgic Encephalomyelitis, which would identify a smaller more homogenous group of patients as having ME.

In contrast, those meeting the broader IOM criteria, which we might call neuroendocrine dysfunction syndrome (which had been recommended by the patient inspired Name Change workgroup over a decade ago) could replace CFS and this category would represent a larger group captured by the key IOM symptoms.

Those that do not meet the ME criteria or the broader IOM criteria could be classified as having chronic fatigue, which is the most general category, and represents those with 6 or more months of fatigue. Such a tripartite classification system would eliminate the detested term CFS, validate the original respected name ME, differentiate ME from the IOM criteria, and provide a new nonstigmatizing term for those not meeting the more restrictive ME criteria.

In addition, the broader IOM criteria could be used for clinical purposes, whereas the more restrictive ME criteria could be used for research purposes.

Some scientists might prefer to consider this tripartite grouping a matter of severity rather than categorical differences, but all agree that differentiations of this type occur with many diseases, and such a classification system has the potential to clarify discrepant findings from epidemiologic, etiologic, and treatment studies.

Ultimately, whatever decisions are made on the names and criteria, the vetting process needs criteria to be open, inclusive and transparent, with patients playing a prominent, decisive, and leadership role in these deliberations.

Prof Leonard Jason, September 28, 2015

Leonard A. Jason is a professor of clinical and community psychology at **DePaul University**, director of the **Center for Community Research**,

and the author of **Principles of Social Change** (<http://bit.ly/1KJ89Qz>)

and co-editor of the soon to be published **Handbook of Methodological Approaches to Community-Based Research: Qualitative, Quantitative, and Mixed Methods** (<http://bit.ly/1KPxl4M>).

Read his previous blog posts on the OUPblog.

See more at: <http://bit.ly/1FBepLI>



DePaul University researchers invite persons with ME, CFS, MS, Lupus, and Cancer to participate in a voluntary research study to determine which symptoms may be commonly experienced by individuals in multiple fatiguing illness groups, and which symptoms may be unique to each illness. Participation includes completion of a confidential online questionnaire, which takes approximately 45 minutes to complete.

Eligibility Criteria:

Adults at least 18 years of age

- Must be able to read or speak English
- Have a diagnosis of Multiple Sclerosis, Lupus Erythematosus, Cancer, Myalgic Encephalomyelitis, or Chronic Fatigue Syndrome.

If you are interested in participating, follow this link to access the survey: <https://redcap.is.depaul.edu/surveys/?s=d9gSMwkGsW>

The 'Rights' And Wrongs In Karina Hansen's Case



Abuse of power, conflict of interest, cronyism, lies, incompetence, secrecy and deep unprofessionalism infuse the case of **Karina Hansen**.

Karina Hansen was neither insane nor a danger to herself or others. She suffered from the physical illness ME (chronic fatigue syndrome). Yet she was hospitalized against her will in February 2013. She was legally incapacitated when she was hospitalized, and despite the fact that she called her parents and the police to try to get help, she was not heard.

After the forced hospitalization, she was appointed a guardian on May 29, 2013. The guardian, **Kaj Stendorf**, is a recently retired policeman. Before May 29, **Karina's** parents were her guardians, but their requests for access to her medical records have been rejected.

The police officer who gave the order to remove **Karina** from her home in February 2013 was none other than **Kaj Stendorf**, who was at that time working as chief of police in **Karina's** home county, Holstebro. He should therefore be disqualified, due to conflict of interests, but the court refuses to consider this issue.

Hospitalization-papers and the legal basis for the hospitalization are still missing. **Karina** is still not allowed to receive visits, 2 years and 7 months after her hospitalization. This is ordered by the psychiatrist **Nils Balle Christensen** from the Research Clinic for Functional Disorders.

She has been treated with cognitive therapy, physical training and psychotropic drugs, which are very hazardous for ME-patients. Medicine works more intensely in ME-patients than in healthy people. That's why she may have been seriously damaged by the treatment.

The psychiatrists did not respect her ME-diagnosis, even though she was diagnosed by internationally recognized specialists. The psychiatrists gave her another diagnosis, PAWS, (Pervasive Arousal Withdrawal Syndrome) which is rarely used and usually only for children traumatized by war.

Karina's parents hoped to annul the guardianship of **Kaj Stendorf**, but the City Court upheld the guardianship without allowing the family's lawyer to speak or present his case.

The High Court also upheld the guardianship, but the judgment is inconsistent and untrustworthy. There are obvious contradictions in the judgment and the guardian, **Kaj Stendorf**, was not called as a witness, despite the fact that the lawyer of the family, **Keld Parsberg**, had specifically requested the court to do so.

Now **Karina** has been transferred to Tagdækkervej 10, in Hammel, a home for brain-damaged people. She was not brain-damaged when she was hospitalized.



The two lawyers on the case have not yet been told the exact legal basis on which **Karina Hansen** was hospitalized. The Municipality of Holstebro, the Board of Health and a Mental Health Fund all give different explanations.

Karina's state-appointed lawyer, **Anne Grete Kampmann**, has earlier been paid by the Municipality of Holstebro to give them legal assistance. This presents a clear conflict of interest and means she should be declared incompetent in **Karina's** case.

Neither the guardian, **Kaj Stendorf**, nor the appointed lawyer, **Anne Grete Kampmann**, have been helpful in getting **Karina** a second opinion from a specialist in ME, which is a normal patient's right. They appear to be the 'system's men' and not guardians who want the best for her.

On 30th August last, there was a trial to decide if **Kaj Stendorf** should be **Karina's** permanent guardian. This would mean that the guardianship would not have to be renewed on a yearly basis. During the trial, the judge and the lawyer, **Anne Grete Kampmann**, exchanged meaningful glances several times. And during the lawyer **Keld Parsberg's** presentation, **Anne Grete Kampmann** rolled with her eyes and shook her head which is completely unacceptable behavior during a trial. This behavior could give one the impression that the matter was decided in advance.

The guardian, **Kaj Stendorf**, asked the judge for permission to leave before the trial was over, which he was allowed to do and thereby avoided answering any of **Parsberg's** planned questions. **Kaj Stendorf** did not know whether **Karina** gets psychotropic drugs or not. He knew nothing about the treatment she underwent. He seemed nervous and he stuttered.

From the Municipality no one came and thus the Municipality avoided answering questions in the court.

The psychiatrist **Nils Balle Christensen** appeared strangely incoherent and inconsistent in his statements. For example, he claims to have had long conversations with **Karina** while at the same time he says that she has no language. At a meeting about the PAWS diagnosis (which does not have a WHO ICD-10 code) **Christensen** said that he has no experience with that diagnoses or how to treat it, and that it was 'another' psychiatrist who had given the diagnosis. Who this was could not be disclosed.

In **Christensen's** second-to-last written statement he says that **Karina** does not speak, but nevertheless according to him **Karina** stated that she voluntarily lives at this home for brain-damaged people and that she voluntarily receives treatment. In the last statement from **Christensen** it is said that **KH** had a patient advisor, but we cannot get this verified.

In this last statement **Karina** is described as incompetent and unable to take care of herself. Furthermore, it states that she will not talk to NBC, but after that it is said that she shows a number of improvements in her condition. But these “improvements” do not fit with what she was able to do when she was first hospitalized where she managed to phone home several times and even call the police.

Christensen also apparently invented a malnutrition-diagnosis that must have occurred in his care, because before her hospitalization **Karina** was given a diet which was recommended by leading ME-experts. Furthermore, they don’t want to tell which treatment she currently receives, if any, or how she responds to it.

As the reader can understand, the man who is responsible for **Karina Hansen’s** hospitalization and detainment appears either indifferent or totally arrogant towards her needs, or he is deeply unserious or maybe sick.

The court ought to reconsider **Christensen’s** incoherent argumentation and in the opinion of the Civil Rights Movement, the court ought to understand that it is necessary to reevaluate the case with new eyes now, 2 years and 7 months after the case has begun.



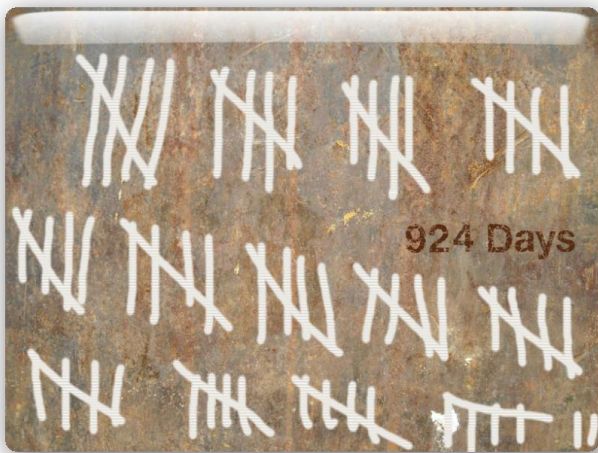
Bente Stenfalk,
Vice President of the Civil Rights Movement.

Civil Rights Movement’s Newsletter from August 2015

Cards2Karina Campaign

Sadly, this is the the second Cards2Karina campaign we have been forced to run, in the ME worlds efforts to free **Karina** from the grip of the Danish state and their agent **Per Fink**. Please support this event. Please fight for an end to the worldwide psychiatric 'solution' to ME. Help us in our struggle to bring **Karina** home.

November 7th 2015 is **Karina**'s birthday. Unbelievably, its her third birthday as a hostage of the Danish state, simply because they contest her ME diagnosis, due to their false belief that ME is a psychiatric disorder, that is being pursued on a financial basis, because it is cheaper to fund psychiatric care for ALL Danish ME patients, than fund creditable bio-medical treatment and care and then excludes ME patients from many aspects of health insurance or benefits.



This scandal has now lasted 33 months, which is 924 days, but to poor **Karina** it will seem more like the 22,176 hours!

Once again, we are hoping to send cards to both **Karina** at her 'care' home and to her parents' home.

The 'care' home management promised our ME friends in Denmark, that any post sent to **Karina** would be given to her. So to test this statement, a plain brown registered letter was sent to

Karina at the home. Sadly, it was returned, unopened. Further investigations via the Danish postal service led to the statement from the post man who actually delivered the letter saying that he handed the letter to **Karina**, but she handed it back unopened.

We have to assume that last years' statement from the Hammell Clinic, that **Karina** had been moved to a nearby 'care' home, because she now was suffering from brain damage, is sadly very true. Most people who understand ME, know that there is an inflammation issue in the brain, with severe ME and the constant use of GET only exasperates this problem. The clinics are known to favour CBT/GET and 'Mindfulness' training, in an attempt to brain wash ME patients into 'exercising' themselves back to health frown-emoticon

In order to capture **Karina**'s imagination, in her present state, we are suggesting that those sending cards to **Karina**, should use 'cute' stickers all over the envelope and make it plain that it is a birthday card for **Karina** with 'happy birthday', 'birthday presents' & 'birthday cakes' stuck on the envelope. Also fancy lettering with her name may help. These stickers can be bought at a Poundshop for 2 packs for a pound called Fun stickers. Also some are available from Ebay.

Posting a standard card to Denmark 18 cm X 13 cm, weighing 5 grams from the UK will cost you £1 or two 2nd class stamps. The delivery time is 3-5 working days. Those posting from other parts of the world, please either check out your local postal service for international costs and delivery times (this can be done on line) If you do get the information, please share on this page.



The care home address is:

Karina Hansen
p/o Tagdækkervej 10,
8450 Hammel,
Denmark.

Karina's parents home address is:

Ketty and Per Hansen
Kløvermarken 8,
7500 Holstebro,
Denmark

Please ask any further questions you may have, about the aims of this Cards2Karina event on this event page.

This year we intend to have a second wave of actions in our continuing campaign to free **Karina**. The details of the 2nd wave will be released after the final date of UK/Europe posting, on the 31st October.

Michael Evison

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Help Karina – Donate To Save4Children

The charity **Save4Children** has been created by the editors of the ME Global Chronicle (<http://www.let-me.be>) and helps parents whose children have been forced into psychiatric wards by authorities, to try and set them free by legal procedures, if the parents have proven to be incapable of affording needed legal assistance.

They helped in **Joanne's** case – the German teenager who has been held under psychiatric care for 18 months, and **Joanne** has been allowed to go home last July. Now they would like to help **Karina Hansen**.



Karina is a severely-ill ME patient who has been held in a hospital against her will for 2 ½ years. Her parents are still not allowed to see

her. Her condition is worse now than when she was forcibly removed in 2013.

She can no longer speak in full sentences. She sits in a wheelchair and mumbles to herself. She is allowed to wear her earplugs as she becomes very distressed when they have tried to take them from her.

When she was first taken, she actively resisted treatment and was therefore given the diagnosis of Pervasive Refusal Syndrome.

This is the same diagnosis as **Joanne** was given. Now **Karina** no longer resists treatment and the psychiatrists claim that this is improvement. **Karina** has never resisted eating, which is a core symptom of PRS, so of course this diagnosis is completely ridiculous.

Also, **Karina** is a young adult and PRS is exclusively a pediatric diagnosis.

Although it does not look good for **Karina** at the moment, the fact that "**Joanne**" has been released gives us hope.

If you would like to help, please donate to **Save4Children** at:
<http://www.geef.nl/donatiemodule/taal:en/doel:save4children>

The money that will be donated will be transferred in mutual deliberation to a volunteer non-profit civil rights group called The Citizens Right's Group (Borgeretsbevægelse) that has taken up **Karina's** case.

CRG fights for cases that are examples of principle human rights violations and they are finding many violations in **Karina's** case.

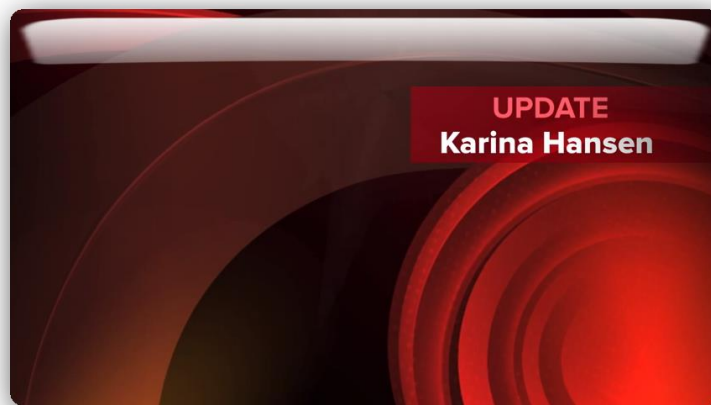
Donations will be collected at the S4C site here:
<http://www.geef.nl/donatiemodule/taal:en/doel:save4children>

Information about the **Karina** and the case can be found in this and future issues of the ME Global Chronicle and at these sites:

Justice for **Karina Hansen** - find info under notes.
<https://www.facebook.com/JusticeForKarinaHansen>

Two videos about **Karina** from 2013:

<http://www.youtube.com/watch?v=Dk3e8IWj7M0>



<http://www.youtube.com/watch?v=JTkkcvlvYf8>

The Citizen's Rights Group – documents in the case in Danish
<http://xn--borgerretsbevgelsen-xxb.dk/>

New documents will be added as they become available.

Check also:



<http://meadvocacy.org>

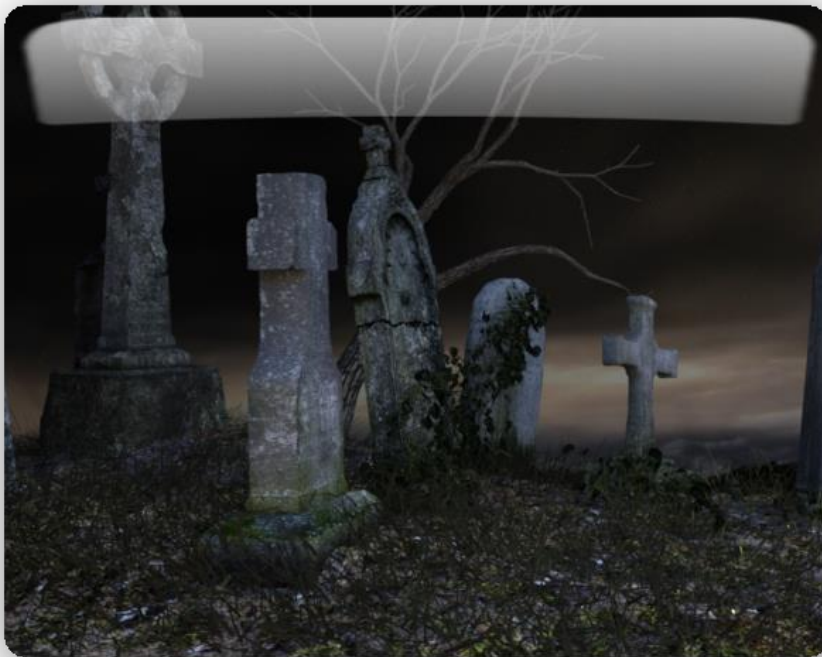
5. Vote For...



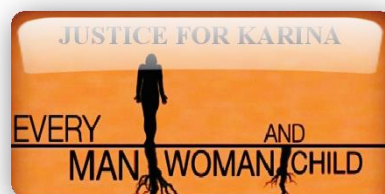
Justice for **Karina**

Karina Hansen suffers with severe Myalgic Encephalomyelitis meaning muscle pain with inflammation of the brain and spinal cord.

ME is a neurological disease as noted with the World Health Organization (WHO) G93.3. Every country who belongs to the United Nations must abide by the WHO description of what is a physical disease as well as the United Nations Human Rights.



Denmark is holding Karina against her will and forcing her to take part in treatment **which can kill her**. Denmark believes that ME is the same as Insanity which is not how ME is described in WHO G93.3. Denmark is a member of the European Union, United Nations, Human Rights and WHO.



https://secure.avaaz.org/en/petition/Justice_for_Karina/share/

6. Major Fundraising



Save4children

The fund called Save4Children has been initiated in March 2014 by the editors of the **ME Global Chronicle**. We would very much appreciate your financial help with this project to give financial support to parents whose children are forcibly taken from home and 'treated' in psychiatric wards, like **Sophia Mirza** once was, and the German 14 year old **Joanne**.

She's been released thanks to legal procedures, partially financed by the Save4Children Fund.

The Fund will now direct its arrows to try and set free Danish **Karina Hansen**, about whom you can read in the section ME & Children of this issue of the ME Global Chronicle.

Until now the fund has collected more then **€ 6.386,-**
<http://www.geef.nl/doel/save4children>

You can donate any amount through:
<http://www.geef.nl/donatiemodule/taal:en/doel:save4children>



7. Poem – ME Isn't Real You Know

ME ISN'T REAL YOU KNOW.....

ME isn't real you know
ME is all just fake
I chose to give up work you know
To rely upon the state

ME isn't real you know
It's all just in my mind
I just fancied giving up
On everything in my life

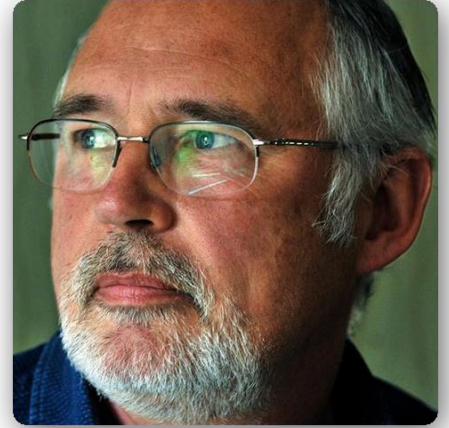
ME isn't real you know
ME is all just talk
I just chose to give up running
And use a stick to help me walk

ME isn't real you know
The pain is in my head
In fact, it's also in my arms
My back, my ribs, my legs

ME isn't real you say
It's all just my pretend
You think I choose, my life to lose
As well as my final friend?

ME isn't real you say
Laziness is in my genes
You say this though not knowing
That I've worked since in my teens

ME is just fake you say
I really am ok
Do you really reckon, for just one second
I'd choose to be this way?





Lazy sod, it's in your head
Wish I could just stay in bed
Shake it off, stop complaining
To be like that, you must be feigning

Just not possible, to have pain like that
And legs that just won't go
To feel battered and bruised like you say you are
You're a lying so and so.....

To be this way is not by choice,
To hide from light, to hide from noise,
Friends don't call, and that's not all
They talk behind our back
They say we're no fun, won't go for a run
But then they don't know Jack.

Hit with this, we don't know why
Keep fighting on, is our battle cry
All we ask is for belief,
It's taken our lives like a skulking thief

I ask for not a single pound
But when next the thought is going round
Let's all do a charity run
What's our cause, is there one?
Can I ask that you keep minds free
And choose to help those with ME.

Bill Clayton

<https://www.facebook.com/bill.clayton.94?fref=nf>

8. Connecting You To M.E.



Leonard A. Jason, Ph.D. DePaul University - Chicago, USA

“The future of the field is in connecting the many patient and scientific groups into one larger body that is united for change. Any events that bring people together across countries and organizations should be promoted.

The message is simple, we have more impact with numbers, and when we flex our collective muscles, then we become a movement like the civil rights, women’s and disability revolutions of the 60s, 70s and 80s.

The HIV/AIDS groups changed policy throughout the world, but they did it by keeping their focus on critical issues and demanding change, and although the voices in that movement were also divided, for a few things like increased funding and provision of services, they were all together.”

