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November 21, 1994

VIA COURIER

Ms. Katrina Prystupa, B.A., LL.B.
Suite 204
120 Holland Avenue
Ottawa, Ontario
K1Y 0X6

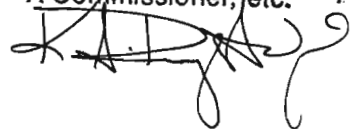
Dear Ms. Prystupa:

Re: Catherine Ross

This will acknowledge receipt of your letter of November 17, 1994, requesting my review of the custody assessment report that had been prepared by Dr. McLean of the Family Court Clinic. I have reviewed this report and also reviewed my notes in regard to certain comments that had been made about Mrs. Ross by Dr. McLean. As I have mentioned to you in the past, I have not had the opportunity to examine Mr. Ross or the children.

I wish to emphasize that, in my opinion, Mrs. Ross is not an addict and to label her as such is clinically inaccurate. I wish to emphasize that, prior to the dissolution of the marriage, Mrs. Ross was experiencing overwhelming stress in regard to her abusive relationship with her husband. Against this background, Mrs. Ross had consulted Dr. Rushforth, her family physician, who had placed her on Benzodiazepines - Xanax - a tranquilizer. These had been continued at the time that she came under my care. The background to her considerable distress included being exposed to threats of rape and threats from her husband. She had called the police on two occasions. There was also overwhelming stress within the home setting that was compounded by her children's behavioural difficulties and an untrained dog that was quite messy.

Mrs. Ross certainly did rely on the utilization of Xanax to assist in calming herself. As these drugs did calm her, she utilized them slightly more frequently than prescribed. In this connection, the pharmacist contacted me, and I advised him to hold on the repeat prescription until I had the opportunity to advise Mrs. Ross that there could be consequences of her taking a larger number than prescribed. When I outlined this to Mrs. Ross, she followed my instructions

This is Exhibit "M"
of the Affidavit
of CATHERINE ROSS
sworn NOVEMBER, 19 94
A Commissioner, etc.


exactly. She curtailed the intake of Xanax to the prescribed amount. Due to the extreme distress she was under in living in the home with her husband, I suggested to her that we would withdraw the Xanax at the conclusion of the custody proceedings.

Against this background, I can not agree with the statement made by Dr. McLean that the issue, at the present time, is dealing with Mrs. Ross' addiction. In my opinion, there is no need for her to be assessed for her addiction or to be referred to the Alcohol and Drug Unit at the Royal Ottawa Hospital. I can advise you, however, that Mrs. Ross would be most agreeable to undergoing further assessment if this is required in clarifying this issue. There are, however, a number of other significant issues in her background that will require further assistance but, in my opinion, to explore them at this stage, in the presence of the ongoing, overwhelming and difficult custody litigation, would not be very productive.

I can advise you that I have implemented a phase of reduction for the medication, and I feel confident that over the next four to six weeks Mrs. Ross will be completely free of benzodiazepines. She has not consumed nor abused alcohol since coming under my care.

There are a number of other significant issues within the body of Dr. McLean's report which do cause me considerable concern. For example, on page 15 of his report Dr. McLean highlights that he is unable to rule out major psychopathology in Mr. Ross because of his defensive posture on psychological testing. He has also noted that Mr. Ross displayed a "general negative bias colouring his perception of females". He expresses concerns about the potential role he could see Catherine playing with the girls (page 16). Despite these significant statements, he has not clarified, in my opinion, how he has drawn the conclusion that Mr. Ross should be the custodial parent. I was left wondering that, in the absence of Mrs. Ross' alleged addictive tendencies, custody may well have been recommended to her.

I am sure that these issues will be explored in a court setting. However, I do feel that it is important to place the background of Mrs. Ross' Xanax utilization in context. In summary, her utilization of Xanax occurred against a background of overwhelming stress. Her intake is in the throes of being cut back. Mrs. Ross is most cooperative and compliant with treatment, and I am confident that this issue can be successfully managed.

If you require any additional information, please feel free to contact me.

Yours sincerely,

Selwyn, M. Smith, M.D.

- back credentials (?)
for Dr. Smith
- doesn't refer to psych, addictive history, or history gave to Dr. MacLean
- hypothetically - if evid of no drinking and no treatment program - Q is what happened before.

SMS:jw