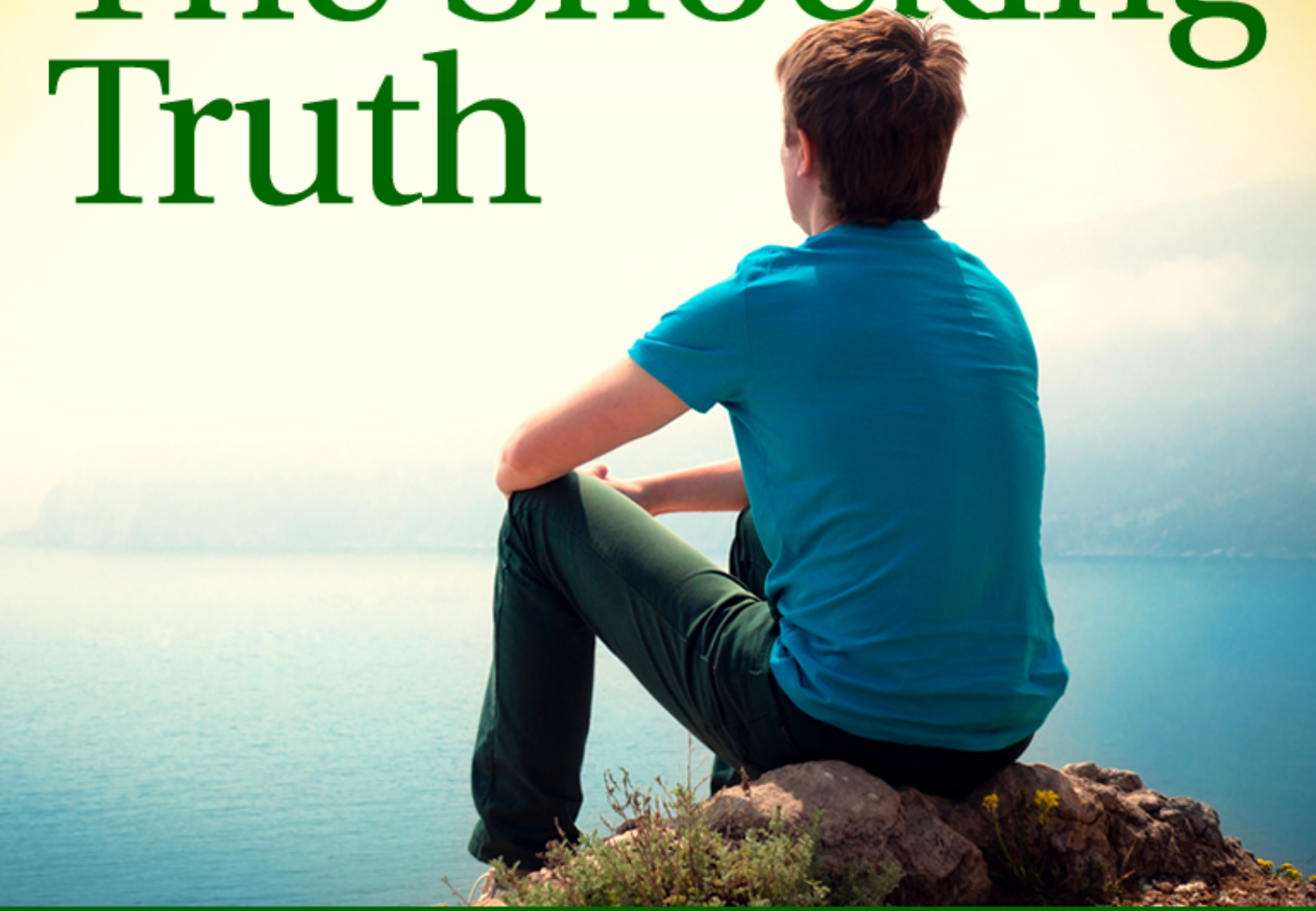
Marketing Fraud Adds Up to Billion$...

While Boys & Young Men are Irreparably Harmed

RISPERDAL: The Shocking Truth



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Risperdal: The Shocking Truth

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First Edition

By Marc Whitehead, Esq.

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Introduction

Perhaps you are an adolescent male who developed abnormal breast growth (gynecomastia) while taking Risperdal. You may be embarrassed and confused about the effects of this condition on your body, and you are now looking for answers.

Or maybe you are the family member or friend of someone who suffers from gynecomastia, and you are wondering if the medication Risperdal could be responsible for your loved one's condition.

Whatever your connection to Risperdal may be, you are most likely dealing with a number of questions, such as:

- Did Risperdal really cause the side effects experienced by me or my loved one?
- Is there medical evidence available showing that Risperdal causes serious side effects like gynecomastia?
- Did Johnson & Johnson encourage consumers to use Risperdal without taking the proper steps to investigate and/or disclose these potential side effects?
- Did I or a loved one take Risperdal "off label?" If so, who can be held responsible for the trauma I have experienced?
- Can consumers who have developed gynecomastia after taking Risperdal bring legal action against the manufacturer?
- If I believe I have been harmed by Risperdal and would like to pursue compensation, what is the next step?

This e-book offers a concise guide for anyone who is interested in learning more about the connection between Risperdal and gynecomastia.

Regardless of your specific experiences with this drug, this book will provide you with a clear and thorough explanation of why gynecomastia occurs in males taking Risperdal. We've created what we believe is a fair and balanced guide that neither confuses readers by over-complicating the issues nor exaggerates the science involved.

In addition to explaining the relevant research and scientific concepts, this book will also provide an overview of the legal implications for Janssen Pharmaceuticals, the drug's manufacturer, including the options for injured boys and men who may be entitled to compensation.

Our primary goal in creating this e-book is simple: to provide you with a detailed overview of the scientific and legal issues surrounding the use of Risperdal so that you can clarify your understanding, get control over the situation and protect yourself and your family.

The topics we will cover are as follows:

Section I: Risperdal 101

In this section, we will provide a general overview of why Risperdal was made, how it works and when it is typically prescribed. Next, we will discuss the ways in which Risperdal has been used, including off-label usage. Finally, we will explain gynecomastia, and we will talk about how researchers came to discover the connection between Risperdal and this condition.

Section II: Legal Recourse

In the second section of this book, we will review the current state of legal actions against Janssen Pharmaceuticals, the manufacturer of Risperdal, as well as its parent company Johnson & Johnson. We will talk about how mass tort cases like these work, as well as what clients can expect if they decide to join the fight. If you are a victim of gynecomastia because of Risperdal, we will also explain your options for pursuing justice and obtaining compensation for your suffering.

Please keep in mind that this e-book does not constitute legal or medical advice.

If you believe that you or a loved one is experiencing symptoms of gynecomastia after using Risperdal, discuss these symptoms with your doctor as soon as possible. If you are interested in pursuing legal action as a result of your experience with Risperdal, contact the team here at Marc Whitehead & Associates, LLP by calling (800) 562-9830. We will be happy to review your case and explain your options.

After dealing with what has undoubtedly been a confusing and difficult situation for you, we hope that you are able to gain some insight and comfort from this e-book.

Section I: Risperdal 101

Risperdal (chemical name Risperidone) is a drug that was created to treat several different mental health conditions, including ADHD, schizophrenia and bipolar disorder. It may also be used to treat irritability in patients with autism.

Risperdal is part of a class of drugs known as second generation antipsychotics (SGAs), or "atypical" antipsychotics. Medications in this class were developed in the 1990s in response to some of the problems experienced by patients taking first generation antipsychotics (FGAs). Among these problems was the risk of movement disorders like tardive dyskinesia and a condition known as hyperprolactinemia, which is characterized by a significant increase in the body's production of the hormone prolactin. Scientists hoped that Risperdal and the other SGAs would work as well as FGAs without as many side effects.

How Does it Work?

Scientists currently believe that some of the symptoms of mental health problems, such as ADHD and schizophrenia, are the result of elevated dopamine levels. Risperdal works to alleviate these symptoms by normalizing the patients' dopamine levels over time.

Risperdal is a dopamine antagonist, which means that it blocks the receptors in the brain that typically bond with dopamine. However, because brain function is so complex and difficult to study, scientists are not sure exactly how this process works. It is also difficult for scientists to determine exactly how Risperdal will affect the other regions of the brain, especially since results can differ from one patient to another.

Is it Safe?

Many people mistakenly believe that, because Risperdal has been approved for use by the Food and Drug Administration, scientists know exactly how it works and have proven its safety for patients. However, even though psychopharmacology has made significant advancement in the past century, the science used to study the effects of drugs on the brain and body is still relatively new, and these processes are not easily understood. Furthermore, the eagerness of drug manufacturers to release their products often results in poorly-designed research studies and hasty requests for approval.

When Is it Prescribed?

After being approved for use in adults, Risperdal was primarily prescribed to treat bipolar disorder, schizophrenia and similar conditions in this population. However, Janssen Pharmaceuticals also encouraged its off-label usage for children and adolescents suffering from ADHD, autism and other such conditions, as well as for elderly patients suffering from dementia. We will discuss this issue in depth later in the book.

The Gynecomastia Epidemic

After it was released into the market, evidence of the dangers of Risperdal emerged. Even though it was an SGA, studies found that it too caused side effects that were just as serious as the effects of its predecessors: the FGAs. In fact, perhaps the most notable side effect of Risperdal usage is hyperprolactinemia, one of the same side effects experienced by patients taking FGAs.

Understanding Hyperprolactinemia

Before you can understand hyperprolactinemia, you must first understand the function of prolactin, a hormone produced by the pituitary gland.

WebMD explains the function of prolactin as follows:

"Though prolactin plays a role in the growth and development of your breasts, its primary function is in milk production after a child is born. Normally, it is present in small amounts throughout your bloodstream (and in men's), kept under control by another hormone called a prolactin inhibiting factor (dopamine)." (From WebMD, sourced 4/28/15)

All people have a certain amount of prolactin in their bodies, and these levels fluctuate throughout the day. Levels are highest during times of emotional or physical stress, during sleep and immediately after waking. Prolactin levels also become elevated naturally during pregnancy and after childbirth in order to stimulate breast growth and milk production. Once the mother stops breastfeeding, or if breastfeeding continues for an extended period of time, prolactin levels gradually return to normal.

Long-Term Effects of Hyperprolactinemia

Although prolactin provides an essential function in the body, having too much of it can cause serious side effects.

Hyperprolactinemia is a condition which occurs when the body of a man or non-pregnant woman begins producing increased amounts of the hormone prolactin for an unnatural reason. This may occur because of certain medical conditions, such as a pituitary gland tumor, or it may be a side effect of a medication like Risperdal.

Over time, hyperprolactinemia can cause medical problems for both men and women. WebMD explains the results of hyperprolactinemia as follows:

“In women, [hyperprolactinemia] results in a decline in the body's production of progesterone after ovulation which, in turn, can lead to irregular ovulation and infrequent menstruation, cause you to stop menstruating altogether, or cause your breasts to start producing milk, a condition called galactorrhea. Men also can experience galactorrhea. High prolactin levels in men can also lead to impotence, reduced libido, and infertility." (From WebMD, sourced 4/28/15)

In men, hyperprolactinemia can also lead to a problem known as gynecomastia, which is the subject of many of the legal actions currently pending against Risperdal's manufacturers.

Gynecomastia Basics

Gynecomastia is an embarrassing condition characterized by the increase in the volume of breast tissue in a male. In many cases, the condition is accompanied by the production of milk (galactorrhea), as well as the development of excess skin.

How Does it Happen?

Gynecomastia typically occurs as a result of a hormonal imbalance. Several different hormones control secondary sex characteristics, such as the development of breasts. These hormones include testosterone, progesterone, estrogen and prolactin. Both men and women produce all of these hormones, but women tend to produce estrogen, progesterone and prolactin in higher amounts than men. Likewise, men typically produce higher amounts of testosterone than women.

The development of gynecomastia seems to be related to levels of the hormone prolactin. When these levels become too high, breast tissue will grow regardless of the person's sex.

The medical community recognizes four basic stages of gynecomastia:

1. **Grade one** - The patient's breasts have increased in size mildly, but no excess skin has formed.

2. **Grade two** - The patient's breasts have increased in size moderately, but no excess skin has formed.

3. **Grade three** - The patient's breasts have increased in size moderately and excess skin is present.

4. **Grade four** - The patient's breasts have grown substantially and excess skin is present.

Treating Gynecomastia

While reducing prolactin levels may aid in the resolution of gynecomastia, it won't always eliminate the problem. In many cases, the extra skin and breast tissue will remain even after prolactin levels are back to normal.

If normalizing prolactin levels doesn't resolve the symptoms of gynecomastia completely, patients may undergo surgery to fix the problem, such as a mastectomy or liposuction procedure. However, these surgeries put the patient at risk for various complications, such as surgical site infections, disfigurement or loss of feeling in the affected area.

Emotional Effects of Gynecomastia

Gynecomastia causes a number of serious physical symptoms, but the emotional effects of this condition are even more significant. Some of these effects include:

- High risk of bullying, especially among adolescent males
- Poor self-esteem
- Decreased earning potential

- Increased risk of substance abuse
- Inability to form healthy relationships
- Depression and anxiety

Whether or not the condition is successfully treated, the emotional effects of gynecomastia can continue to affect a patient's life dramatically for years to come.

Keep in mind that not all cases of gynecomastia are the result of exposure to Risperdal or any other medication. However, studies examining the link between Risperdal and this condition have produced compelling evidence indicating a strong relationship between the two. In fact, experts believe that up to 25 percent of all gynecomastia cases may be caused by medications like Risperdal.

Understanding the Link Between Risperdal and Hyperprolactinemia

The consequences of hyperprolactinemia and gynecomastia are clearly serious, especially for young men. But does Risperdal really cause this condition to occur?

According to recent findings, Risperdal can, in fact, raise levels of prolactin for some men. Some of the case reports, as well as research studies, that support this phenomenon are detailed below.

Case Report: Gynecomastia in Geriatric Male

This 2005 case study comes from the Indian Journal of Medical Sciences. A letter to the editor entitled "Unilateral gynecomastia induced by Risperidone in a geriatric male patient." was submitted by Dr. DN Mendhekar in order to draw attention to the experience of a 60-year-old male patient who had taken Risperidone. Within six weeks of exposure to the drug, the man developed a firm, non-tender growth on his left breast. His prolactin levels were also found to be elevated at the time of the exam.

The patient discontinued Risperidone treatment and experienced a significant drop in prolactin level within three weeks of stopping the medication. His gynecomastia also resolved after four weeks. According to the author of the letter, "The appearance of gynecomastia was associated with hyperprolactinemia, and gynecomastia disappeared with the return of circulatory prolactin to normal levels, following withdrawal of

Risperidone. The adverse drug reaction probability score, based on Naranjo's algorithm, was 9 for this case, denoting a definite adverse reaction due to Risperidone."

Research Study: Drug-Induced Gynecomastia

A key research study demonstrating the relationship between Risperdal and gynecomastia was published in Expert Opinion Drug Safety in 2012. This study, which was entitled "Drug-induced gynecomastia: an evidence-based review," estimated that drugs were responsible for between 10 and 25 percent of gynecomastia cases. After thoroughly reviewing the reports and studies currently available on this topic, the authors concluded that "Medications probably associated with gynecomastia include Risperidone." The study also identified several other medications that are likely to cause this condition.

Case Report: Mr. R.

A research paper published in 2000 in Psychiatric Services, Volume 51, No. 8 discussed the case of Mr. R, a man suffering from bipolar disorder at the age of 38. The title of this paper was "Gynecomastia with Risperidone Fluoxetine combination."

According to the authors, Mr. R. was prescribed Risperidone to treat hyper sexuality, paranoid thinking and irritability. After only 12 days of treatment, Mr. R began complaining of discharge from his breasts. Doctors performed an exam and found that both of his breasts had grown and were producing a white discharge. They also found his prolactin levels to be elevated.

Risperidone was discontinued, and Mr. R.'s prolactin levels returned to normal within 10 days. Within 23 days of discontinuing the medication, the patient's breasts had decreased in size and were no longer producing a discharge.

Research Study: Risperidone and Prolactin Levels

Published in 1999, this review explored the relationship between Risperidone and adverse outcomes, including high prolactin levels. The study was entitled "Prolactin levels and adverse events in patients treated with Risperidone" and can be found in *Clinical Psychopharmacology* February 1999; Volume 19; issue 1.

The researchers writing this review examined two previous research studies that had been performed on patients taking Risperidone. They concluded that "Risperidone… produced dose related increases in plasma prolactin levels in men and women… among men, the incidents of adverse events was positively correlated with the Risperidone dose." This indicates that, not only is Risperdal able to cause hyperprolactinemia in both men and women, but that **the risk of problems increases with higher doses of the drug.**

Section II: Legal Recourse

The evidence in the previous section clearly suggests that taking Risperdal can lead to serious side effects, particularly hyperprolactinemia and gynecomastia. However, can Janssen Pharmaceuticals (and parent company Johnson & Johnson) really be held responsible for these issues? Did they know about these risks when they promoted the use of the drug? Before we can answer these questions, we must first explore the history of the drug's development, release and marketing.

Risperdal: Janssen's Cash Cow

The primary goal of any pharmaceutical company is to increase profits by creating a drug that satisfies a consumer need or desire. Johnson & Johnson (and their subsidiary Janssen) created Risperdal for this purpose. However, before they could market the drug and start making money, they had to obtain approval from the Food and Drug Administration.

- **1993**: The FDA first approved Risperdal to treat psychiatric problems in adults.
- **2002**: The FDA revised this recommendation and cleared the drug for "treatment of schizophrenia" in adults.
- **2003**: The FDA approved Risperdal for the short-term treatment of manic episodes brought on by bipolar disorder.
- **2006**: The FDA approved Risperdal for the treatment of autistic children.
- **2007**: The FDA approved the drug as a treatment for bipolar disorder and schizophrenia in children and adolescents.

Based on the timeline above, it seems like the drug companies did everything right. However, the journey to Risperdal's FDA approvals was anything but simple.

Although the drug was initially marketed to adults, Janssen has been trying to open up the market to children and adolescents since it was first released in the 1990s. In fact, the company sought FDA approval for use in this age group immediately after the drug was approved for adults. However, the FDA initially declined this request on the grounds that Janssen hadn't identified a use for Risperdal in children, nor had it provided any "data from adequate and well-controlled trials to support any such approvals."

To put it bluntly, *Janssen was seeking to market a drug to kids without any evidence that it would be useful.* Not only that, but the company hadn't even run tests to see if the drug would be safe for children and adolescents! This is neither ethical nor acceptable.

Unfortunately, the FDA's initial resistance did not stop Janssen from continuing their quest for approval. In 2000, the company tried to get Risperdal approved for children once again. The FDA turned them down and expressed frustration with Janssen's behavior.

Completely undeterred, Janssen decided to begin marketing Risperdal to children and adolescents **without FDA approval.** They developed a new business plan that focused attention on Risperdal, and they began instructing sales reps to market the drug to health professionals as a possible treatment for children with ADHD, obsessive compulsive disorder, autism and other such issues. Keep in mind that, at this point, the company had still neglected to adequately research the effects of this drug on children.

In 2002, Janssen refined its marketing efforts even further by developing the "Risperdal Child and Adolescent Market Segment: 2002 Business Plan Summary." **Again, this plan was created to market a drug that was not approved by the FDA for use in children.** Furthermore, research studies performed by external sources were now providing evidence of the dangerous side effects of Risperdal, especially for young patients.

The Johnson and Johnson Study

By 2003, multiple research studies indicating that Risperdal might be dangerous for patients, especially children, began drawing negative attention to Janssen and its marketing practices. In response, parent company Johnson & Johnson published a paper entitled "**Prolactin levels during long-term Risperidone treatment in children and adolescents**." The paper stated that, although Risperidone does affect prolactin levels in children and adolescents, "serum prolactin levels tended to rise and peak within the first 1 to 2 months and then steadily decline to values within or very close to the normal range by 3 to 5 months."

Based on the results of this study, it seems like the hyperprolactinemia caused by Risperdal is short-lived. However, the study was not without flaws. Namely:

- **The study analyzed five different clinical trials with relatively small sample sizes.** Larger sample sizes would be required in order to draw reliable conclusions.

- **Although the paper indicates analysis of "long-term Risperidone treatment," two of the clinical trials studied only short-term treatment.** These trials did not provide any information about what would happen to patients who continued taking the drug for longer periods of time.

- **The paper's abstract purposefully excluded the demographic of boys aged 10 and older from the results.** Excluding these patients from the results artificially lowered the incidence of adverse outcomes reported, thus making the drug appear to be safer for this population than it actually is.

In spite of these issues, the release of the study marked a success for Janssen Pharmaceuticals. On the heels of this victory, Janssen applied for FDA approval of Risperdal for use in children once again in 2005. The FDA again said "no." Janssen responded by launching its largest marketing campaign yet with the intention of selling the drug to children and adolescents off label.

The FDA finally succumbed to Janssen's requests for approval in 2006 and 2007. However, the FDA's approval did not make Risperdal any safer, and countless children had already taken the drug off-label anyway.

Legal Implications for Janssen

By the time the results of Janssen's actions became clear, the manufacturer (and its parent company) had already made billions from the promotion and sale of Risperdal. However, with so many studies demonstrating the effects of this drug, especially on adolescents, the company now faces legal action on multiple fronts.

Federal Fines

Thanks to Janssen's blatant efforts to market Risperdal to children off label before its FDA approval, as well as its attempts to market the drug to elderly dementia patients, the federal government sued parent company Johnson & Johnson. The court ordered Johnson & Johnson to pay a fine of $2.2 billion for their transgressions.

Violations in Arkansas

In 2012, an Arkansas jury determined that Janssen Pharmaceuticals and Johnson and Johnson had violated the state's Medicaid fraud law 240,000 times. Each violation amounted to a $5,000 fine, for a total of $1.2 billion owed.

Multi-State Fines

In 2012, Johnson & Johnson agreed to pay a total of $181 million to 36 different states because of their unscrupulous marketing practices.

Mass Tort

In March 2010, the victims of Risperdal launched a mass tort against Johnson & Johnson. The first of these cases ended in a $1.2 million dollar award to the plaintiff. In the second case, the jury determined that "Janssen failed to warn of off-label use in adolescents and children." However, it was concluded that Risperdal was not responsible for that particular plaintiff's gynecomastia. More than 1300 additional cases involving Risperdal are still pending against Janssen in Pennsylvania.

Mass Torts 101: How Risperdal Victims Are Fighting for Justice

When companies manufacture, distribute and market products that cause harm, injured victims and their families can take their claim to the court system for recourse.

A hurt person can bring an action known as a **tort** to obtain compensation for damages**.** A tort is a type of *civil action*, as opposed to a *criminal action*. The person who sues is known as the **plaintiff**, and the company or person being sued is known as the **defendant**. In general, for a tort to succeed, three basic things must be true.

1. **First of all, someone suffered an injury that led to costs**. For instance, if patient suffers a major medical complication after taking Risperdal, the court would definitely consider the victim “injured.”

2. **Some person or entity (like a company, such as Johnson & Johnson) directly or indirectly caused that injury as a result of negligence, carelessness or other wrongdoing**.

3. **The entity responsible has money to pay for the damages**. A source of funds is of importance. By contrast, imagine a situation in which a drunk driver with no insurance or assets causes a serious car wreck. A lawsuit might not be feasible, if the driver has no way to provide any compensation. In Risperdal cases, however, this last constraint is not a problem, considering that companies like J&J and Janssen have many billions of dollars.

When a lot of different people suffer similar harm from similar causes, they can combine their torts into what's known as a **mass tort**. These plaintiffs can combine forces to sue one or several defendants. To pursue a mass tort action, plaintiffs have to ask the court for permission. The court will decide based on factors like:

- How many plaintiffs got hurt;
- Where the plaintiffs live (are they close to each other or far apart?);
- The nature of the injuries (are they similar or not?);
- Whether a single cause or set of causes was likely responsible for the damages.

Mass torts are not the same thing as **class action** lawsuits. Both legal processes bundle similar cases together for the purposes of expediency (so the court can speed things up) and to make sure that results don't vary wildly.

In a mass tort, you can have a trial that's separate from other plaintiffs' trials. In a class action, the court treats you and other plaintiffs essentially as a single group, and a single trial determines the outcome. From the perspective of a plaintiff, mass torts offer some advantages. For instance, statistically speaking, you have a greater potential for large compensation. Defendants and their attorneys can also share resources and insights.

Mass torts can also evolve into a suite of lawsuits known as **Multi District Litigation** or MDL, in which different suits are organized to go before one judge and one jurisdiction.

Mass torts can get quite complicated, both because of all the legal "moving parts" and because of the high stakes involved. Liable defendants often stand to lose millions of dollars -- in some cases, billions of dollars. As a result, defendants generally have both the motivation and the means to go to great lengths to discredit the plaintiffs' cases.

To fight back, plaintiffs and their attorneys must be meticulous, prepared, resilient, and strategic. You may have compelling science on your side and a tragic, heart wrenching story, but do not expect the defendant to give any purchase or to admit fault.

So what can you do to prepare yourself and your family for the road ahead?

Finding a Qualified Law Firm to Represent You

There are times when an ambitious person can represent himself or herself in the legal system. For instance, if you're writing up a simple will, you could just use a template from Nolo.com to write the will. If you get into a minor fender-bender that leads to no major injuries, you could handle the insurance company negotiations on your own.

However, when it comes to cases involving serious injuries, like strokes and bleeding in the brain, you really want to find a qualified attorney to represent your interests. Be choosy about which law firm you select. Given the rash of legal actions that have commenced against companies like Janssen and Johnson & Johnson, you will probably see a lot of advertising over the next several months regarding Risperdal related claims.

- How can you vet potential firms?
- How can you know whether you might have a claim?
- How can you work well with the law firm you choose to obtain fair results and also reclaim your dignity and protect your health and your family?

Absent context, it's difficult to know whether you have a case. You could be underestimating your need for help. Context is essential. Speak with an attorney if there's any ambiguity; there's no harm in at least calling.

To vet prospective attorneys, first, obtain references. You can use the internet, TV, personal referrals from friends at work, etc. Take time to think through the principles by which you want to govern the search. Why do you want an attorney? What are you hoping to accomplish? What are the essential values that you want the lawyer to have and demonstrate?

Here's a useful exercise to that end. Imagine how a relationship with an attorney might go *wrong*, and then define your values in opposite terms. For instance:

- ***I don't want a lawyer who has a dodgy ethical track record or problems with clients*** translates into the following value: ***The law firm has a stellar track record and an A+ record with the Better Business Bureau.***

- ***I'm worried that the attorney will ignore me or treat me like "just a number***" translates into the following value: ***The attorney treats me with compassion and his or her team answers my questions and meets my needs***.

- ***I'm afraid the attorney will pressure me into taking action I don't want to take*** translates into the following value: ***The attorney listens and respects what I want.***

- ***I worry that the attorney might be under-qualified to help me*** translates into the following value: ***The attorney has strong credentials – for instance, he or she is Board Certified in Personal Injury Trial Law by the Texas Board of Legal Specialization and/or is AV rated by Martindale Hubble.***

Once you have these principles outlined, review the candidate lawyers' websites and other materials, and winnow your list of prospective firms down to about three. Then set appointments for a free consultation. Before your consultation, write down any questions you have about your case, about the process, or about the firm's history and qualifications. Write down the answers you get.

During your consultations, pay attention both to substance of the conversation as well as to your intuition. Do you get along with the attorney and his or her staff? Do you feel comfortable with the values that animate the law firm?

Ask about fee arrangements. In mass tort cases, attorneys often work on what's known as a "contingency" basis. This means that you only pay for legal services if the attorney wins a settlement or achieves a verdict for you. In that case, you pay a percentage of this amount.

Once you have chosen an attorney, get to know the law firm's processes and people. To save time, develop the habit of writing down your questions on paper (or on a Word document) whenever they occur to you, so that you can "batch ask" them to the attorney. In addition, you might find it useful (starting immediately) to compile any relevant evidence, including doctor's notes, a written timeline of events, written witness accounts, and so forth.

Lastly, develop strategies to deal with other needs -- financial, emotional, psychological, logistical, etc. -- so that your entire life isn't on hold while the legal process plays out. After all, depending on the nature of your injury and the size and scope of your legal action against a Risperdal manufacturer (or some other liable party), you may not get clarity about your case for months if not longer.

Avoid living life in limbo until this resolves. Work with people you trust -- such as your attorney, your financial advisor, your doctor, your personal trainer, your employer, your family and your friends -- to manage various problems that have been raised or worsened by the injury, so that you can reclaim a degree of calm and control over your life.

More Background about Attorney Marc Whitehead and His Legal Team

Attorney Marc Whitehead and his legal team are proud of their track record and numerous distinctions in the arena of Texas personal injury law. Marc Whitehead & Associates, LLP has been rated A+ by the Better Business Bureau – a reflection of our team's devotion to customer service. We specialize in plaintiff personal injury, mass tort, pharmaceutical, insurance & ERISA litigation, social security disability law and veterans' disability law.

Attorney Marc Whitehead has served as law professor at University of Houston Law Center, where he taught Civil Trial Advocacy, as well as an Instructor of Civil Trial Advocacy at the National Institute of Trial Advocacy.

He is Board Certified by the Texas Board of Legal Specialization in Personal Injury Trial Law, putting him in a rare group of lawyers who must pass very stringent requirements to obtain and maintain this certification. He's also active in many professional associations, serving as an American Association for Justice-Leader Forum Member, an AAJ Risperdal Litigation Group Member, an AAJ Xarelto Litigation Group Member, an AAJ Transvaginal Mass Litigation Group Member and an AAJ Toxic, Environmental and Pharmaceutical Section Member. In addition, he has been honored as an Association of Civil Trial and Appellate Specialist, rated "AV" by Martindale Hubble, rated 10.0 by AVVO, rated by SuperLawyers, and rated by the National Trial Lawyers Association as one of the Top 100 Trial Lawyers in Texas.

Conclusion

The creators of Risperdal hoped that the drug would relieve certain psychiatric symptoms caused by the overproduction of the neurotransmitter dopamine. However, because of the complexities of the human brain, dopamine wasn't the only chemical affected by this drug. Taking Risperdal led to serious side effects for many patients, including hyperprolactinemia and gynecomastia. These effects were particularly severe for male children and adolescents who took the drug.

The marketing practices and overall behavior of Janssen Pharmaceuticals and Johnson and Johnson with regard to Risperdal are astonishing. The companies attempted to obtain FDA approval of this drug for use on children and adolescents without any evidence that it would be beneficial. When approval wasn't granted, Janssen decided to market the drug to kids anyway. Even when evidence of Risperdal's severe side effects on children was uncovered, Janssen continued to promote the drug's off-label use. This led to countless cases of gynecomastia and other severe side effects.

In this e-book, we covered some of the science behind Risperdal, as well as the side effects it can cause. We also discussed the legal actions that have been brought against the drug's manufacturers. In addition, we explained how mass torts work, and we have talked about how you can find legal representation if you want to file a lawsuit against Janssen Pharmaceuticals.

We hope this e-book has provided you with both guidance and insight. If you believe that you or someone you know has developed severe side effects as a result of taking Risperdal, the attorneys here at Marc Whitehead & Associates would be happy to help you explore your options. We have earned an A+ rating from the Better Business Bureau, and we promise confidentiality at all times, so you have absolutely nothing to lose. Please call (800) 562-9830 now to talk about your case. We sincerely wish you the best as you work through these issues and regain control of your life.

Disclaimer

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Professional Experience

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Adjunct Professor of Law (2002)
University of Houston Law Center
Civil Trial Advocacy

Instructor (2003)
National Institute of Trial Advocacy
Civil Trial Advocacy

Instructor (2005-2007)
National Business Institute
Social Security Disability

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Texas Board of Legal Specialization

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National Board of Trial Advocates

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President=s List
Valedictorian, Normangee High School 1985

Admitted to Practice

State Bar of Texas
U.S. District Courts, All Texas Districts
United States Court of Appeals-Fifth Circuit
United States Court of Appeals for Veterans Claims

Professional Activities & Associations

American Association for Justice-Leader Forum Member
AAJ Risperdal Litigation Group Member
AAJ Xarelto Litigation Group Member
AAJ Transvaginal Mess Litigation Group Member
AAJ Toxic, Environmental, and Pharmaceutical Torts Section

Houston Trial Lawyers Association
President (2009-10)
President Elect (2008-2009)
Secretary/Treasurer (2007-08)
Vice-President (1999-2007)

Texas Trial Lawyers Association
Board Member (1997-Present)
Board of Advocates (1999-2001)

HBA Social Security Section Chairman (2004-2005)

Memberships and Honors
Association of Civil Trial and Appellate Specialists
National Organization of Social Security Claims Representatives
Texas Aggie Bar Association
Houston Volunteer Lawyers Association
College of the State Bar of Texas
Houston Bar Association
National Organization of Veterans Advocates
AV Rated by Martindale Hubble
10.0 AVVO Rating
Rated by SuperLawyers
Top 100 Trial Lawyers in Texas by National Trial Lawyers Assoc.

Articles & Publications

- *Tort Reform As It Relates to Strict Products Liability;*
- *A Lawyer's Guide for Determining Eligibility of Social Security Disability Claimants;*
- *Nuts & Bolts of Social Security Disability Law;*
- *The Five Step Sequential Evaluation Process Used in Determining Disability For Social Security Claimants;*
- *The Social Security Disability Puzzle-How to Fit the Pieces Together and Win Your Claim;*
- *Disability Insurance Policies-Solving the Mystery and Proving Your Case*
- *Veterans Disability Claims – Strategies for a Winning Campaign*
- *Car & Truck Crashes -10 Secrets Victims Should Know to Protect Their Rights*