EXHIBIT 12

Confidential - Barry David Charles Arnold

	Page 1
UNITED STATES DISTRICT COURT	
MIDDLE DISTRICT OF FLORIDA	
ORLANDO DIVISION	
IN RE:	
SEROQUEL LITIGATION : MDL NO. 1769	
:	
THIS DOCUMENT RELATES:	
TO ALL ACTIONS :	
June 18, 2008	
oune 10, 2000	
CONFIDENTIAL	
Videotape deposition of BARRY	
DAVID CHARLES ARNOLD, held at the	
Radisson Edwardian Manchester, Free Trade	
Hall, Peter Street, Manchester, England	
commencing at 9:14 a.m. before Linda L.	
Golkow, Registered Diplomate Reporter,	
Certified Shorthand Reporter.	
Golkow Technologies, Inc.	
877.370.3377 ph 917.591.5672 fax	
deps@golkow.com	

Golkow Technologies, Inc. - 1.877.370.DEPS

Confidential - Barry David Charles Arnold

	Page 362		Page 364
1	Q. Is that a common symptom in	1	information here?
2	people with diabetes?	2	A. I do not know the specific
3	A. It's actually a sign rather	3	details of the followup of this
4	than a symptom, but it may be a sign of	4	particular patient. I'm aware that the
5	diabetes mellitus. But, of course, there	5	company has a standard operating
6	are many other causes of ketonuria as	6	procedure for followup. And to my
7	well.	7	experience, the data handling teams and
8	Q. Do you see where it says,	8	the clinical teams who were managing
9	"Seroquel discontinued about 3 months	9	adverse event reports follow that SOP
10	later. DM" or diabetes mellitus	10	very diligently.
11	"reported to have resolved that same	11	Q. Would the fact that it
12	day." Do you see that?	12	resolved on the same day give you a clue
13	A. Yes, I do.	13	that it might be a positive dechallenge?
14	Q. So, would that be an example	14	MR. BROWN: Objection to the
15	of a positive dechallenge?	15	form.
16	A. I would regard that as an	16	BY MR. BLIZZARD:
17	example of a possible positive	17	Q. Would that be a pretty
18	dechallenge. The data that's presented	18	strong indication of a positive
19	in front of me is not full. What we	19	dechallenge, resolving on the same day
20	don't know is what concomitant	20	that Seroquel was discontinued?
21	medications the patient was on, we don't	21	MR. BROWN: Objection.
22	know whether those medications were	22	THE WITNESS: The fact that
23	stopped at the same time, and then,	23	it resolved on the same day may be
24	equally, what we don't know is, was the	24	taken as an indicator that it
	D		
1	Page 363		Page 365
1	_	1	
1	patient subject to some sort of dietary	1	might be a positive dechallenge. I would not characterize it as
2	patient subject to some sort of dietary control at the same time as discontinuing	1 2 3	might be a positive dechallenge. I would not characterize it as
2 3	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks	2	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly
2 3 4	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may	2 3 4	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being
2 3	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but	2 3	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you
2 3 4 5	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed.	2 3 4 5	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being
2 3 4 5 6	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed.	2 3 4 5 6	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data.
2 3 4 5 6 7	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is	2 3 4 5 6 7	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD:
2 3 4 5 6 7 8	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case	2 3 4 5 6 7 8	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one
2 3 4 5 6 7 8 9	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge?	2 3 4 5 6 7 8 9	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the
2 3 4 5 6 7 8 9 10	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is	2 3 4 5 6 7 8 9 10	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's
2 3 4 5 6 7 8 9 10 11	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are	2 3 4 5 6 7 8 9 10 11	might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you
2 3 4 5 6 7 8 9 10 11 12	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection.	2 3 4 5 6 7 8 9 10 11 12	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male?
2 3 4 5 6 7 8 9 10 11 12 13	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important	2 3 4 5 6 7 8 9 10 11 12 13	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes.
2 3 4 5 6 7 8 9 10 11 12 13 14	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing	2 3 4 5 6 7 8 9 10 11 12 13 14	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown,
2 3 4 5 6 7 8 9 10 11 12 13 14 15	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like	2 3 4 5 6 7 8 9 10 11 12 13 14 15	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct.
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if	$\begin{array}{c} 2\\ 3\\ 4\\ 5\\ 6\\ 7\\ 8\\ 9\\ 10\\ 11\\ 12\\ 13\\ 14\\ 15\\ 16\\ 17\\ 18\\ 19\end{array}$	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if you're trying to categorize them	$ \begin{array}{c} 2 \\ 3 \\ 4 \\ 5 \\ 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12 \\ 13 \\ 14 \\ 15 \\ 16 \\ 17 \\ 18 \\ 19 \\ 20 \\ \end{array} $	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it say the preferred term was "blood glucose
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if you're trying to categorize them in the manner that you seem to be	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 9 20 21	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it say the preferred term was "blood glucose increased"?
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	 patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if you're trying to categorize them in the manner that you seem to be attempting. BY MR. BLIZZARD: Q. Do you know what efforts 	$\begin{array}{c} 2\\ 3\\ 4\\ 5\\ 6\\ 7\\ 8\\ 9\\ 10\\ 11\\ 12\\ 13\\ 14\\ 15\\ 16\\ 17\\ 18\\ 19\\ 20\\ 21\\ 22\end{array}$	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it say the preferred term was "blood glucose increased"? A. So, that would be the
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23	 patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if you're trying to categorize them in the manner that you seem to be attempting. BY MR. BLIZZARD: Q. Do you know what efforts were made by the company to get a 	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 8 9 20 21 22 23	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it say the preferred term was "blood glucose increased"? A. So, that would be the reported event, yes. Q. Then it said, "Patient" has arrow up or that would be increased
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22	 patient subject to some sort of dietary control at the same time as discontinuing Seroquel. So, this is a case that lacks complete data, and, therefore, it may appear as a positive dechallenge, but that has yet to be confirmed. Q. Well, from the data that is presented, does this appear to be a case of positive dechallenge? A. Well, the important thing is when you are MR. BROWN: Objection. THE WITNESS: The important thing is when you're assessing individual clinical cases like this is that you assess them on the basis of a complete dataset if you're trying to categorize them in the manner that you seem to be attempting. BY MR. BLIZZARD: Q. Do you know what efforts 	$\begin{array}{c} 2\\ 3\\ 4\\ 5\\ 6\\ 7\\ 8\\ 9\\ 10\\ 11\\ 12\\ 13\\ 14\\ 15\\ 16\\ 17\\ 18\\ 19\\ 20\\ 21\\ 22\end{array}$	 might be a positive dechallenge. I would not characterize it as being a clue, and I certainly wouldn't characterize it as being a strong indicator, as you suggest, due to the lack of data. BY MR. BLIZZARD: Q. If you look at the one that's second from the bottom of the first page, which is 2004UW06024, it's described as a nonserious event. Do you see this involved an 11-year-old male? A. Yes. Q. The dose was unknown, approximately six months, correct? A. That's correct. Q. And in the comments, does it say the preferred term was "blood glucose increased"? A. So, that would be the reported event, yes. Q. Then it said, "Patient" has

92 (Pages 362 to 365)

Golkow Technologies, Inc. - 1.877.370.DEPS

Confidential - Barry David Charles Arnold

Page 366 Page 368 1 1 That is correct. that you've made an assumption that it's Α. 2 2 O. And then "TX" -- that's normalized afterwards. I'm not saying 3 treatment, isn't it? 3 that that's not a reasonable assumption. 4 4 I'm just saying it's an assumption, A. That would stand for 5 treatment. 5 rather than a statement of fact. 6 6 Q. It says, "equals oral Q. Well, let's go to the next 7 7 anti-diabetic med (unspecified). one then. See, this is 2004UW08948. 8 Seroquel discontinued. BS normalized," This is a 7-year-old male, correct? 8 9 "BS" being blood sugar, correct? 9 A. It appears that way, yes. 10 A. That's correct. 10 Q. This is a 7-year-old male taking 300 milligrams daily, correct? 11 Q. So, again, after Seroquel 11 12 12 was discontinued, blood sugar normalized, A. Yes. 13 Q. It says the PTs is 13 correct? 14 "Hypoglycemia, Hyperglycemia, Lipids 14 A. It states that blood sugar 15 was normalized. It implies that it was 15 increased," right? A. That's correct. after Seroquel was discontinued. It 16 16 17 Q. It then says, "Patient had 17 doesn't state that factually, whereas the 18 decreased blood sugars and increased 18 first patient that you indicated to me 19 was very factual, reported to resolve 19 blood sugars"? 20 that same day. 20 A. Yes. 21 21 Q. Well, it says "Seroquel О. "BS fluctuating from 42 discontinued," and then the next sentence 22 (fasting) to 202 (1 hour after fruit), 22 23 says "BS" or blood sugar "normalized," 23 HbA1c equals 4.9%, GTT equals 99 (2 hours post glucose). Patient also had 24 24 right? Page 369 Page 367 1 1 increased lipids (no lab data). Seroquel A. Yes. I'm just being very precise because you tried to use the word 2 discontinued within one week positive 2 3 3 "then." That's an assumption or an blood sugars back to normal." 4 Do you see that? 4 implication. 5 5 A. Yes. Q. Okay. So, when you're reading 6 Q. Is that a case of a positive 6 7 this, the blood sugar did not normalize 7 dechallenge? after the Seroquel was discontinued? 8 8 A. It's an apparent case of 9 A. No. I think it's an 9 positive dechallenge, but I'm not sure 10 assumption that it normalized after 10 what it's a positive dechallenge to, because it says blood sugar back to 11 discontinuation of Seroquel, but that's 11 not -- should not be stated as a matter normal, but we don't know whether that's 12 12 13 of fact, based upon the summary that's 13 referring to the decreased blood sugar, 14 provided in this comments column. hypoglycemia, or the increased blood 14 Q. Well, we could look at the 15 15 sugar, hyperglycemia. 16 original adverse event report, couldn't 16 I'd also remark that the 17 we? 17 HbA1c of 4.9 percent, to my knowledge, 18 18 that does not equate with a HbA1c level A. Yes, we could, and that 19 perhaps might be more informative. 19 that matches hyperglycemia. Patients who 20 Q. And do you really think that 20 are hyperglycemic who may be tending 21 it was normalized before Seroquel was 21 towards diabetes, you would expect a 22 22 higher HbA1c than that. So, yes, it discontinued? 23 A. I'm just dealing with facts 23 appears to be a positive dechallenge, but 24 for the purpose of this jury. I think 24 I'm not sure what event is actually being

93 (Pages 366 to 369)

Golkow Technologies, Inc. - 1.877.370.DEPS