

November 19, 2013

Dear Senator,

We write to urge you to support the Guantanamo transfer provisions in the FY2014 National Defense Authorization Act as passed out of the Senate Armed Services Committee (Senate NDAA). Since 2008, we have jointly spent nearly 1000 hours in Guantanamo and evaluating detainees and their medical records. We have witnessed first-hand the inevitable: the men are aging, their health is deteriorating, and, after more than a decade in captivity, the medical needs are outstripping the available resources. Some detainees' lives are at serious risk right now.

The United States is responsible, both legally and ethically, for providing medical care to detainees. Yet, under current restrictions imposed by Congress, no detainee can be brought to the United States for treatment, even if that treatment cannot be provided at Guantanamo and is necessary to save a detainee's life. The Secretary of Defense must have the flexibility to authorize the temporary transfer of Guantanamo detainees to a military medical facility in the United States to prevent death or imminent harm to a detainee's health. Section 1032 of the Senate NDAA provides that flexibility.

One of the detainees whose health is in jeopardy is Tarek El Sawah, an Egyptian who arrived in Guantanamo in May 2002. He is a complicated and high-risk medical patient. Mr. El Sawah currently weighs over 400 pounds, 230 pounds more than when he arrived at Guantanamo. His functional status is extremely limited by his poor physical and mental health – even walking is difficult.

Mr. El Sawah did not become morbidly obese by accident; he was a compliant detainee enticed by his interrogators with food. He now suffers with multiple medical conditions, including severe obstructive sleep apnea, and probable coronary artery disease. He has not had testing for the latter due to logistical difficulties of providing this specialized care at Guantanamo.

Mr. El Sawah is not facing any criminal charges and is waiting for his Periodic Review Board hearing, which is almost two years past due. Three former Guantanamo commanders have written declarations affirming that he does not pose a significant danger to the security of the United States and should be released. The letters reference his "compliant, cooperative, and non-belligerent attitude," his cooperation with agents of the United States, and his demonstrated lack of either an "anti-American attitude" or commitment to violent Islamic extremism.

Adnan Farhan Abdul Latif died at Guantanamo by alleged suicide in September 2012, years after he had been cleared for transfer. Mr. Latif was seriously mentally ill and suffered from traumatic brain injury. A report by U.S. Southern Command cited lapses in procedures as contributory to his death, and depicts woefully substandard medical care. Mr. Latif required tertiary neuropsychiatric care that was not available at Guantanamo, and it is possible he would be alive if he had had access to the proper care.

Guantanamo Bay does not have the capacity for sophisticated medical care necessary to treat Mr. El Sawah and others who have and are developing chronic health conditions as they age. The temporary medical transfer provision in the Senate NDAA should be passed and immediately pursued for Mr. El Sawah and others in similarly emergent health circumstances. The deterioration in health and demise of detainees will continue to damage our moral stature across the globe and further compromise the legitimacy of Guantanamo Bay as a detention facility.

Thank you for your attention to this extremely important matter.

Sincerely,

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