

# EXHIBIT G

93863 eb

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF FLORIDA  
ORLANDO DIVISION

IN RE: SEROQUEL PRODUCTS LIABILITY LITIGATION  
MDL DOCKET NO. 1769

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THIS DOCUMENT RELATES TO 6:07-cv-10112  
(Elizabeth Haynie-Whynot versus AstraZeneca LP, et al)

DEPOSITION OF DANIEL KOPPERSMITH, MD

UPON RECEIPT OF SIGNATURE, THE ORIGINAL OF THIS  
DEPOSITION WILL BE IN THE CUSTODY OF:

Brennan J. Torregrossa, Esquire  
Dechert LLP  
Cira Centre  
2929 Arch Street  
Philadelphia, Pennsylvania 19104-2808

Date Edith A. Boggs, CSR

9-25-07 HOUSTON, TEXAS

1 Q. So, she had never told you she had diabetes prior  
2 to this visit with you on -- on what date?

3 A. June 30th, 2007.

4 Q. -- June 30th, 2007?

5 A. Yes, sir. To my best recollection, I did not  
6 hear of it before then.

7 Q. Okay. Did you prescribe her Seroquel despite her  
8 report of diabetes and a lawsuit with respect to  
9 diabetes and Seroquel?

10 A. Well, I asked her about that, and she was adamant  
11 that Seroquel had been an excellent medication for her  
12 and she wanted to continue it.

13 Q. So, she wanted to continue taking the medication  
14 despite the lawsuit that she told you about?

15 MR. FIBICH: Object to form.

16 A. That's what she told me, yes, sir.

17 Q. (BY MR. TORREGROSSA) And did you on this day  
18 prescribe Seroquel for her?

19 A. Yes, sir, I did.

20 Q. And did you, as a medical doctor, consider the  
21 risks and benefits of the drug on this day?

22 MR. FIBICH: Object to form.

23 A. Yes, sir.

24 Q. (BY MR. TORREGROSSA) And did you believe that  
25 the benefits of Seroquel outweighed the risks?

1 A. Yes, sir.

2 MR. FIBICH: Object to form.

3 Q. (BY MR. TORREGROSSA) And do one of those risks  
4 include the very lawsuit that she brought with respect  
5 to diabetes and Seroquel?

6 A. Yes, sir. I actually discussed it with her  
7 since, I mean, I thought she should be part of that  
8 decision.

9 Q. Okay. When is the next time that you saw  
10 Ms. Whynot?

11 A. That would be the last time, which was August  
12 24th, 2007.

13 Q. So, that was just a month ago?

14 A. Yes, sir.

15 Q. Okay. Do you have an appointment coming up with  
16 her at all?

17 A. According to my notes, I should be seeing her 12  
18 weeks from that date, which would be about 2 months from  
19 now.

20 Q. Okay. And, in fact, she's still a current  
21 patient, correct?

22 A. Yes, sir.

23 Q. Now, on this last visit, what took place?

24 A. I had switched her previously from Zoloft because  
25 Zoloft didn't seem to be working well for her

1 to prescribe Seroquel to your patients today?

2 A. Yes, sir, I have many patients on Seroquel.

3 Q. Why is that?

4 A. Because it's an effective medication, and the  
5 risk of diabetes is very minimal and, as I have said,  
6 the risks -- the benefit outweighs the risk.

7 Q. And have you learned anything since 2002 about  
8 Seroquel that would change your course of treatment for  
9 her and her use of Seroquel?

10 A. No, sir, I can't say I have.

11 Q. And do you still today consider Seroquel the best  
12 course of treatment for Ms. Whynot?

13 MR. FIBICH: Object to form.

14 A. Yes, sir.

15 Q. (BY MR. TORREGROSSA) Okay. Some follow-up,  
16 Doctor. Are you visited by AstraZeneca sales  
17 representatives from time to time?

18 A. Yes, sir.

19 Q. Okay. Is that a standard part of the practice?

20 A. Yes, sir.

21 Q. Okay. When you make determinations about the  
22 drugs that you use, what do you rely on?

23 A. Primarily, I rely on my personal experience.

24 Q. Do you also rely on the experience of your peers?

25 A. Yes, sir.