

**UNITED
NATIONS**



International Residual Mechanism
for Criminal Tribunals

Case No.: MICT-13-56-ES

Date: **2 June 2025**

Original: English

BEFORE THE PRESIDENT

Before: The Honorable Judge Graciela Gatti Santana

Registrar: Mr. Abubacarr M. Tambaou

Date Filed: 2 June 2025

PROSECUTOR

v.

RATKO MLADIĆ

Public Redacted
With Public Redacted Annexes A & B

**URGENT DEFENCE MOTION SEEKING (ALTERNATIVELY) PROVISIONAL OR EARLY
RELEASE OF MR. RATKO MLADIĆ BASED ON HUMANITARIAN GROUNDS**

Counsel for Ratko Mladić

Mr. Dragan Ivetić
Mr. Branko Lukić

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RATKO MLADIĆ by and through undersigned counsel of record, hereby submits the instant Motion, and in support thereof states as follows:

I. INTRODUCTION & BACKGROUND

1. This motion is brought based on the fact that the UNDU medical service have told Mr. Mladić and his family that his medical conditions cannot be cured, and that they are shifting to palliative care and end-of-life considerations, and that his remaining life expectancy is measured in months (specifically[REDACTED]).

2. This motion is brought, alternatively, as either a request for provisional release, or conditional early release, insofar as the ICTY/IRMCT caselaw has regarded either as an appropriate means for the relief being sought. Under either Rule, the Defence submits that Mr. Mladić's limited life expectancy is a central humanitarian consideration which should be accorded decisive weight. Similarly, given his medical condition, Mr. Mladić is not a flight risk. In this regard the *Hadžić* Trial Chamber found that the very nature of palliative care and serious illness negate the flight risk of one who was previously a fugitive, as incompatible with a life on the run.¹ As discussed herein, the UNDU medical service has shifted Mr. Mladić to palliative care.

¹ *Prosecutor v. Hadžić*, IT-04-75-T, Decision on Urgent Motion for Provisional Release Filed on 289 April 2015, 21 Maz 2015, para. 28.

3. Given the seriousness and urgency of the situation, Mr. Mladić accordingly requests that the receipt of any medical evidence sought by the President be expedited and not delay the expeditious and prompt determination of this instant motion. In that regard, President Meron expedited matters in the *Beara* case on similar grounds.² Likewise, Madam President expedited matters in the *Simatović* matter.³

4. Likewise, leave is respectfully sought to exceed the word limit to present and quote highly relevant jurisprudence to assist the President in considering this motion. In this regard, former President Meron has previously found “[...] I consider that there are exceptional circumstances that justify the oversized filing of the Application, including the urgency of the Application and the nature of the humanitarian concerns raised by Nikolić.”⁴ Similarly, in the *Hadžić* case, the defense was granted leave to exceed the word limit under similar circumstances (ie. a terminal diagnosis and limited remaining life expectancy).⁵

5. Mr. Mladić’s fragile and precarious health has been the subject of several prior motions filed before the President and has been the subject of regular reporting to the President.⁶ We therefore will not, for purposes of the instant motion, repeat *ad nauseum* the medical history, beyond highlighting some of the most relevant/recent.

6. It should be recalled that on 10 May 2024, Madam President Denied the Prior Motion for Release at that time but expressed agreement on "the importance of a strict monitoring regime of Mladić's health, and I will consider the details of his proposal in the event that future developments give rise to the need for adjustments to the existing regime." Respectfully, we now have reached those developments that require an adjustment and different outcome (ie. the short-term terminal diagnosis of Mr. Mladić).

7. Since March of 2024, Mr. Mladić has suffered through no fewer than 3 medical incidents

² *Prosecutor v. Beara*, MICT-15-85-ES.3, Public Redacted Version of 7 February 2017 Decision of the President on the Early Release of Ljubiša Beara, 16 June 2017, para. 11.

³ *Prosecutor v. Simatović*, MICT-15-996-ES.1, Decision on the Application for Early Release of Franko Simatović, 29 August 2023, pg. 3.

⁴ *Prosecutor v. Drago Nikolić*, MICT-15-85-ES.4, Public Redacted Version of the 20 July 2015 Decision of the President on the Application for Early Release or Other Relief of Drago Nikolić, 13 October 2015, para 20

⁵ *Prosecutor v. Hadžić*, IT-04-75-T, Decision on Urgent Motion for Provisional Release Filed on 289 April 2015, 21 Maz 2015, para. 11, 35(a).

⁶ See, e.g. Decision on the Application for Release of Rako Mladić, 8 November 2024 (hereinafter “Second Decision”) at para. 7.

that have been termed by the Registry and UNDU medical officers as “life threatening” and/or “potentially life threatening” in nature:

- a. On 22 March 2024, Mr. Mladić was hospitalized due to a worsening of this “**potentially life-threatening**” [REDACTED].⁷
- b. In April 2024, Mr. Mladić suffered a [REDACTED] requiring his admission to the civilian hospital.⁸ Upon his release from the civilian hospital, on 23 April 2024, Mr. Mladić was transferred to the prison hospital.⁹ He continues to have issues from “**acute and potentially life-threatening [REDACTED] failure where the cause is still unclear.**”¹⁰
- c. In September 2024, Mr. Mladić suffered from complications of the [REDACTED] described by the UN medical services as of “precarious nature” and of “potentially life-threatening consequences,”¹¹ while also suggesting [REDACTED] may be necessary. It should be noted that this condition has most recently resulted in [REDACTED].

8. The UNDU medical service repeatedly warned, since the aforementioned “life threatening” episodes, that “Mr. Mladić’s serious illness episodes in the last few months may herald a new and **even more vulnerable phase** in Mr. Mladić’s general health condition,” while cautioning that “as mentioned before, it is **highly unlikely** that Mr. Mladić will regain the level of independence necessary to be able to return fulltime to the UNDU.”¹² He remains in the prison hospital.

9. Mr. Mladić is regularly seen by the IME Neurologist, [REDACTED], who (among other things)¹³ has stated – “*A report of the UNDU medical officer on the 24th of July 2024 noted that his ability to be incarcerated is highly dependent on the intensive and specialized care he is receiving in the prison hospital. Without this level of care, his health could deteriorate rapidly,*

⁷ See, Urgent Defence Motion for Provisional Release of Ratko Mladic Based on Compassionate and Humanitarian Grounds, or in the Alternative, Allowing him to Serve the Remainder of his Sentence in Serbia, filed 26 April, 2024 (“Prior Motion”), **Annex E**.

⁸ Prior Motion **Annex I**.

⁹ Prior Motion **Annex J**.

¹⁰ Prior Motion **Annex A**.

¹¹ “Registrar’s Submission in Relation to the ‘Third Order on Medical Reports’ of 15 September 2022”, filed 18 September 2024, Annex.

¹² Id., paras. 10 and 0 (emphasis added).

¹³ “Registrar’s Submission in Relation to the ‘Third Order on Medical Reports’ of 15 September 2022”, filed 16 September 2024, Annex A. (“Cras Report”)

making incarceration incompatible with his health condition.'(emphasis added)

10. That same, IME Neurologist has, repeatedly, since at least May 2024 recommended that Advanced Care Directive, palliative care and end-of-life discussions/preferences be sought from Mr. Mladić, in **seven** reports sent to the President. According to the Registrar and UNDU medical service, the last **five** reports of this IME Neurologist have also noted the deterioration of Mr. Mladić's condition "to such an extent that his short-term life expectancy is significantly reduced".¹⁴

11. It is also instructive that all the most recent reports from the UNDU medical service likewise have adopted similar conclusions as to the significant reduction of Mr. Mladić's short term life expectancy.¹⁵

12. On 24 May 2025, the Registrar filed the Interim Medical Report, prepared by the UNDU medical service, which, among other things, stated:

- a. "Despite optimal treatment, the decline and aging process continues in a frail individual such as Mr. Mladic, and at one point will surpass the limits of medical intervention, leading to an eventual end of life, for which no clear prognosis can be made. In light of the above, and in his last five reports, IME professor of neurology, [REDACTED] has observed/noted the deterioration of Mr. Mladic's condition 'to such an extent that his short-term life expectancy is significantly reduced.' In these reports he further pointed out the need for discussion and documentation of palliative care and end of life decisions"¹⁶
- b. "It was also explained to Mr. Mladic that he is presently receiving care for and treatment of his symptoms, **but that it is now very unlikely that he can be cured of his serious ailments** (a palliative care pathway)."¹⁷
- c. "Palliative care" is an interdisciplinary medical caregiving approach aimed at

¹⁴ Registrar's Submission in Relation to the "Third Order on Medical Reports" of 15 September 2022, 26 May 2025, Annex, pg. 1. ("Interim Medical Report")

¹⁵ See, e.g Registrar's Submission in Relation to the "Third Order on Medical Reports" of 15 September 2022, filed 2 May 2025, 4 April 2025, 7 March 2025, 31 December 2024.

¹⁶ Interim Medical Report, Annex pg 1.

¹⁷ Ibid. pg 2 [emphasis added].

optimizing quality of life and mitigating suffering among people with serious, complex illness. Regardless of the age of the patient, it is commonly the case that palliative care is provided towards the end of life. Palliative care is primarily focused on symptom management rather than treatments with the aim of curing, and can therefore be provided over an extensive period of time.”¹⁸

- d. “According to the abovementioned definition, and in line with a multidisciplinary considerations and discussions, Mr. Mladić is currently receiving palliative care for his chronic medical conditions.”¹⁹
- e. Several meeting to discuss ACP and his health with Mr. Mladić and the UNDU medical staff occurred throughout May 2025, including Mr. Mladić’s wish that they contact his son to inform him similarly.

13. [REDACTED]²⁰

14. In fact, the recent medical developments, arise from the substance and details of multiple meetings merely mentioned and/or omitted in the Interim Report, and set forth in a Defence email to the UNDU, (wherein Mr. Mladić, and his son were advised of a short-term life expectancy not to exceed [REDACTED]months).²¹ Specifically, the Defence email related to questions about various meetings with the UNDU medical staff, including:

- a. Members of the UNDU medical service meeting with Mr. Mladić and advising him that he has a remaining life expectancy of [REDACTED] months (specifically, [REDACTED]);
- b. The Chief Medical Officer and her deputy meeting Darko Mladić to advise that his father’s remaining life expectancy was [REDACTED] months (specifically, [REDACTED])
- c. The Chief Medical Officer and her deputy also telling Darko Mladić in that meeting

¹⁸ Ibid, pg. 3.

¹⁹ Ibid, pg. 3.

²⁰ [REDACTED]

²¹ See, Redacted Annex A, hereto

that their written reports would not reflect what he was being told orally.

- d. Member of the UNDU medical service called Darko Mladić to tell him that palliative care was commencing and end-of-life discussions were had with Mr. Mladić, due to the short-term remaining life expectancy and terminal diagnosis (ie. [REDACTED]), and that reanimation will not be implemented in case of need.

15. The UNDU Commanding Officer responded to the Defence email, promising that an Interim Medical Report was being prepared responsive to that email.²²

16. Thus, the Interim Medical Report was responsive to the concerns raised in the Defence email, and while confirming that the communications with Mr. Mladić and those with his son **did in fact take place**, likewise (true to their statement to Darko), the written reports do not fully reflect what had been relayed orally (namely the short-term terminal prognosis with a limited life expectancy).

17. Serbian medical experts have stated that Mr. Mladić is suffering from the onset of total failure of systems of his body.

18. [REDACTED]

19. [REDACTED] Due to the urgency of this request, out of an abundance of caution, we have chosen to file before [REDACTED], to maximize the time available to Madam President, in considering this Urgent Motion and seeking any additional information you may deem to be necessary.

20. [REDACTED].

21. For the foregoing reasons, and the submissions below, it is requested that either Provisional Release or conditional Early Release on a humanitarian basis is justified and appropriate, under these new and serious circumstances.

²² See, Redacted Annex B, hereto

II. APPLICABLE LAW

22. Ample caselaw supporting either provisional release or conditional early release in the case of a terminal diagnosis with limited remaining life expectancy exists in the ICTY and IRMCT jurisprudence.

23. ICTY jurisprudence has provided guidance that “...when the medical condition of the accused is such as to become incompatible with a state of continued detention, it is the duty of this Tribunal and any court or tribunal to intervene and on the basis of humanitarian law provide the necessary remedies. [...] It would be inappropriate for this Trial Chamber to wait until Talić is on the verge of death before considering favourably his application for provisional release...”²³ It should be noted that at the time of that decision, Talić had a life expectancy better than that of Mr. Mladić’s current life expectancy.

24. While Madam President has previously ruled that provisional release does not apply post-conviction,²⁴ the relevant jurisprudence is, at the very least, inconsistent on that point. The *Tolimir* case found that provisional release applies, *mutatus mutandis*, to convicted persons who are in the custody of the Mechanism pending transfer to an enforcement state.²⁵ The *Tolimir* case likewise recognizes that special circumstances, including either an acute medical crisis or life-threatening medical condition constitute a basis for such release.²⁶

25. Additionally, former President Meron denied early release of Drago Nikolić, but instead granted provisional release, stating “I note that in 2005, in my capacity as President of the ICTY, I rejected a request for provisional release by a convicted person, on the basis of the ICTY Rules of Procedure and Evidence did not grant this power to the President of that court. The Mechanism’s Rules similarly do not explicitly provide for the possibility of provisional release for a convicted person awaiting transfer to an enforcement State. However, other Rules and procedures applicable

²³ *Prosecutor v. Talić*, IT-99-36 “Decision on the Motion for Provisional Release of the Accused Momir Talić,” (20-Sep-2002), para. 32. (presided by predecessor President, Carmel Agius) citing ECtHR case *Mousel v. France*, 67263/01 (Finding a breach of Article 3 where medical treatment was incompatible with continued imprisonment and thus inhumane.)

²⁴ Decision on the Application for Release of Rako Mladic, 10 May 2024, para. 18. (“First Decision”)

²⁵ *Prosecutor v Tolimir*, MICT-15-95-ES, “Decision on Motion for Provisional Release” (23-February-2016), para. 7.

²⁶ *Id.*, para. 9.

to proceedings before the trial and/or appeal chamber have also been adopted in the context of proceedings related to enforcement of sentences. Further, I note that neither the Statute nor Rules explicitly prohibit the President from granting provisional release. In these circumstances, I believe there are cogent reasons to depart from the *Radić* decision, and consider the provision of provisional release even after final sentencing, in the context of particularly compelling circumstances and acting *sua sponte*. [...] Accordingly I am of the view that Rule 68 of the Rules can be applied *mutatus mutandis*, in the particular circumstances of Nikolić's case."²⁷ It is instructive to note that Nikolić had not yet served 2/3 of his sentence (in fact, he had served less than 1/3).

26. As to early release, we would note that Madam President has previously ruled²⁸ that on the issue of early release for humanitarian purposes which if proven would override any eligibility concerns, especially when the seriousness of the medical condition makes it inappropriate for the convicted person to remain in prison any longer, that: a) it is not necessary to receive submissions from the Prosecution²⁹; b) it is immaterial whether any of the factors set out in Rule 151 weigh in favor or against early release³⁰; and c) where submissions are exclusively based on compelling humanitarian grounds, determination of the Application is solely guided by whether the information indicates that the allegations about Mladić's health are sufficient to overcome any eligibility concerns that must otherwise be considered for early release.³¹

27. We would stress that, despite Madame President's prior focus on the availability of high-quality care in the Netherlands weighing against release,³² the jurisprudence directs that such a position is erroneous, when there is a terminal diagnosis (as in the instant case). Specifically, in the *Hadžić* case, the Appeals Chamber found the Trial Chamber's focus on the availability of adequate treatment in the Netherlands and conditions in detention erroneous –

“Specifically, in focusing on whether or not Hadžić received adequate medical treatment in The Netherlands and whether the conditions of his detention were adequate, the Trial Chamber placed insufficient weight on the fact that Hadžić is

²⁷ *Prosecutor v. Drago Nikolić*, MICT-15-85-ES.4, Public Redacted Version of the 20 July 2015 Decision of the President on the Application for Early Release or Other Relief of Drago Nikolic, 13 October 2015, para 38-19

²⁸ Relying on prior jurisprudence.

²⁹ First Decision, para. 19.

³⁰ First Decision, para. 29.

³¹ First Decision, para. 30.

³² Second Decision, para. 18, 26, 18.

suffering from a terminal form of cancer and thus has limited life expectancy. In particular, the Trial Chamber failed to consider whether these facts constituted sufficiently compelling humanitarian grounds to warrant provisional release. The Trial Chamber, instead, focused its analysis on the sufficiency of the medical treatment provided to Hadžić at the UNDU, on whether the treatment is compatible with Hadžić's medical needs, and on the need for continuation of his trial. In doing so, the Trial Chamber failed to sufficiently address the issue at the heart of its consideration of compelling humanitarian factors, namely, whether an accused with a limited life expectancy may, as a humanitarian matter, be provisionally released to his family while his trial remains adjourned, irrespective of the sufficiency of the treatment received at the UNDU.”³³

28. Though not a case dealing directly with release sought by the Defence, in the case of General Djukić, when the Prosecution withdrew its indictment against him, while noting that the medical experts “cannot say specifically when the accused will die” still argued that given the medical condition of the accused, it would be unjust and inhumane to enforce detention and trial.³⁴ We note in the instant circumstance, where the UNDU medical service is apparently unwilling to put a precise timeframe for Mr. Mladić's life expectancy in the written records, this stance is acutely relevant. In the case of Djukić, it should be recalled the estimated life expectancy was between 2 to 9 months.³⁵

29. Madam President has previously noted (in the *Simatović* case) that the procedural steps for early release can be dispensed with or accelerated to meet the urgency of a humanitarian release.³⁶ Likewise, Madam President has noted that the state of a person's health may be taken into account in the context of early release especially when the seriousness of the condition makes it inappropriate for the convicted person to remain in prison any longer.³⁷ Madam President has further noted that even for those not yet meeting the 2/3 threshold for early release, exceptional circumstances could arise such that the President, in the exercise of their discretion, may overcome

³³ *Prosecutor v. Hadžić*, IT-04-75-AR65.1, Decision on Urgent Interlocutory Appeal from Decision Denying Provisional Release, 13 April 2015, para. 16.

³⁴ *Prosecutor v. Djukić*, IT-96-20-T, Motion to Withdraw Indictment, 19 April 1996, p. 2.

³⁵ *Ibid*, pg. 2

³⁶ *Prosecutor v. Simatović*, MICT-15-996-ES.1, Decision on the Application for Early Release of Franko Simatović, 29 August 2023, pg. 3.

³⁷ *Ibid*, pg. 3

any eligibility concerns.³⁸ Simatović was conditionally released, having served 8.5 years of his 15-year sentence.

30. Former President Meron, in the *Beara* case granted the release of Beara (who had not served 2/3 of his sentence), noting, among other things:

“I am of the opinion that the ongoing enforcement of Beara’s sentence, in such present conditions that (i) [REDACTED]; (ii) [REDACTED]; (iii) curative medical care is no longer medically-indicated and [REDACTED]; (iv) Beara is socially isolated; and (v) his life expectancy is estimated at a few weeks at most, would be tantamount to a violation of Beara’s internationally guaranteed human right not to be subjected to inhuman or degrading treatment or punishment. [...] the severity of Beara’s health condition, and the rapid deterioration of his health, have presently become irreconcilable with having his prison sentence executed at a correctional facility. [...] I am of the view on humanitarian grounds, and in accordance with human rights principles, that clear and compelling reasons exist that make it no longer appropriate, at this time, for Beara to remain in prison, notwithstanding the significant factors which weigh against release.”³⁹

31. Recent caselaw (in the *Kabuga* case) has also focused on the Mechanism being required to rely on voluntary cooperation of Member States and releasing acquitted/convicted persons only to states voluntarily willing to receive them, or where the person has a legal right to reside, if released.⁴⁰ In the instant case, it is our understanding that Serbia has expressed a voluntary willingness to receive Mr. Mladić, if this motion is granted.

32. When it comes to early release, the prior jurisprudence supports the position that the Rules mandate there should be consistency of treatment of similarly situated prisoners.⁴¹

³⁸ Ibid, pg. 3-4.

³⁹ *Prosecutor v. Beara*, MICT-15-85-ES.3, Public Redacted Version of 7 February 2017 Decision of the President on the Early Release of Ljubiša Beara, 16 June 2017, para. 45-47.

⁴⁰ *Prosecutor v. Kabuga*, MICT-13-38-T, Decision on Defence Request for an Article 28 Order for Provisional Release., 29 February 2024, pg. 3-6.

⁴¹ *Prosecutor v. Simba*, No. MICT-14-62-ES.1, Public Redacted Version of the President’s 7 January 2019 Decision on the Early Release of Aloys Simba (7 January 2019) at para. 33; *Prosecutor v. Coric*, No. MICT-17-112-ES.4, Decision of the President on the Early Release of Valentin Coric and Related Motions (16 January 2019) at para. 41

33. Outside the ICTY and IRMCT context, convicted persons afflicted with short-term fatal prognosis are generally released on humanitarian grounds.

a. The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment advises against prisoners facing “a short-term fatal prognosis” insofar as “[t]he continued detention of such persons in a prison environment can create an intolerable situation.”⁴²

b. Article 147 of the Italian Code of Criminal Procedure confers discretion to postpone enforcement where the convicted person is affected by a serious physical infirmity:

*[W]hen a motion for the postponement of the enforcement of the sentence for serious physical infirmity is filed, Courts shall determine whether the health condition of the offender is compatible with reeducative purposes of the sentence and the concrete possibilities of social re-integration following re-education. When – given the nature of the illness and the poor prognosis (short life expectancy due to terminal illness) – the enforcement of the penalty goes against the idea of humanity for the excessive suffering due to the deprivation of liberty, or the enforcement of the penalty becomes meaningless for re-educative purposes (given that it is impossible for the penalty to have future effects on the offender), the postponement shall take place”.*⁴³

c. In Germany, detention following conviction **must** be interrupted “if imminent risk to the convicted persons life is to be feared in the case of execution”;

⁴² Third General Report on the CPT's activities covering the period 1 January to 31 December 1992 (Section III – Health care services in prisons), available at <http://rm.coe.int/doc/0900001680696a40> (last accessed 30 May 2025), para 70

⁴³ Italy, Judgement of the Italian Supreme Court - Cassazione penale sez. I, dated 19 October 1999, number 5715. See Italy, Judgement of the Italian Supreme Court – Cassazione penale sez., dated 4 November 2014, number 48328 (“[p]ostponement of the enforcement of the judgment must be allowed when the offender is at the terminal stage of the disease or if the offender (when released) could benefit from the treatment he could not benefit from in prison nor in civil hospitals or when considering the seriousness of the illness, the enforcement of the judgement is against the principle of humanity”).

and **may** be interrupted if the illness will last a long time.⁴⁴ The Constitutional Court of the State in Berlin, in the *Honecker* proceedings, due to the defendant's short-term life expectancy, held that it was "incompatible with the principle of respect of for the dignity of the human being to hold in detention a person who is affected by severe and incurable disease, or death nearby."⁴⁵

d. In France, courts have likewise exercised discretion to release convicted persons "suffering from a fatal illness"⁴⁶

e. The ECtHR in *Mouisel*, while acknowledging there was no general obligation to release detainees on health grounds, also recognized that situations may arise where a detainee's state of health is "in itself incompatible with detention."⁴⁷ The ECtHR found the further detention of Mouisel was inhuman and degrading treatment by France.

III. SUBMISSIONS AND ARGUMENTS

A) The Humanitarian Circumstances of the Short-Term Terminal Prognosis Justify Release

34. Mr. Mladić's current medical condition, respectfully meets the criteria for humanitarian release, insofar as he has been given a terminal diagnosis and short-term life expectancy:

a. The Interim Medical Report confirms that (at least) the last **five** reports of IME

⁴⁴ Germany, Section 455 of the German Code of Criminal Procedure, in the version published on 7 April 1987, official English translation available at:

https://www.gesetze-im-internet.de/englisch_stpo/englisch_stpo.html (last access on 30 May 2025).

⁴⁵ Germany, BVerfG 55/92, (Constitutional Court of the State of Berlin, 12 January 1993), paras 24(a), 25 ("[d]as Strafverfahren wird damit zum Selbstzweck; für die weitere Durchführung eines solchen Strafverfahrens gibt es keinen rechtfertigenden Grund. Auch der eine Untersuchungshaft anordnende Haftbefehl ist nicht Selbstzweck, sondern hat die ausschließliche Funktion, die Durchführung eines geordneten Strafverfahrens zu gewährleisten und die spätere Strafvollstreckung sicherzustellen") (*"Honecker Decision"*). See also Germany, BVerfG, 2 BvR 1349/01102, decision of 20 September 2001, p. 1

⁴⁶ France, Article 720-1-1, Criminal Procedure of the French Republic, available online at https://legislationline.org/sites/default/files/documents/ca/France_CPC_am2006_en.pdf (last accessed on 30 May 2025).

⁴⁷ ECtHR, *Case of Mouisel v. France*, Application no. 67263/01, Judgment, 21 May 2003, paras 38, 40-41. 64 *Id.* paras 14-17, 33-35, 45, 48.

Neurologist [REDACTED] have noted the deterioration of Mr. Mladić's condition "to such an extent that his short-term life expectancy is significantly reduced." (and that ACP and end-of-life decisions should be discussed with him)

- b. All the most recent reports from the UNDU medical service likewise have adopted similar conclusions as to the significant reduction of Mr. Mladić's short term life expectancy.
- c. The Interim Medical Report states that "Despite optimal treatment, the decline and aging process continues in a frail individual such as Mr. Mladic, and at one point will surpass the limits of medical intervention, leading to an eventual end of life, for which no clear prognosis can be made." In essence this confirms a terminal diagnosis.
- d. The Interim Medical Report states that "It was also explained to Mr. Mladic that he is presently receiving care for and treatment of his symptoms, **but that it is now very unlikely that he can be cured of his serious ailments** (a palliative care pathway)."⁴⁸ In essence this confirms a terminal diagnosis.
- e. The Interim Medical Report confirms palliative care has commenced for Mr. Mladić. In essence this confirms a terminal diagnosis and that end-of-life is approaching.
- f. The Interim Medical Report confirms that ACP and end-of-life decisions have been increasingly discussed with Mr. Mladić.
- g. (though not recorded in the Report) The UNDU medical service has told Mr. Mladić that he has a remaining life expectancy of [REDACTED] months (specifically, [REDACTED]);
- h. (though not recorded in the Report) The Chief Medical Officer and her deputy told Darko Mladić that his father's remaining life expectancy was [REDACTED] months (specifically, [REDACTED])
- i. The UNDU medical service called Darko Mladić that palliative care was commencing and end-of-life discussions were had with Mr. Mladić, due to the short-term remaining life expectancy and terminal diagnosis (ie. [REDACTED]).
- j. Mr. Mladić is socially and linguistically isolated in the Prison Hospital, which negatively impacts on his quality of life and end-of-life palliative treatment.

⁴⁸ Ibid. pg 2 [emphasis added].

- k. Serbian medical experts have stated that Mr. Mladić is suffering from the onset of total failure of systems of his body.

35. Given the nature of the terminal and incurable medical condition of Mr. Mladić and his short-term life expectancy, continued detention serves no legitimate purpose, and approaches inhuman treatment, and punishment, as reflected in the aforementioned legal authorities from the ICTY, the IRMCT, and other national/international jurisdictions.

36. Palliative care in a prison or detention setting is medically disadvantageous. The palliative care options are intended to include the family⁴⁹, and treatment options and comfort and quality of life are obviously better in a non-detention, non-prison setting.

37. [REDACTED]

38. Due to his terminal diagnosis, short-term life expectancy, the requirements of palliative care, and his status as bed-ridden, Mr. Mladić cannot be a flight risk, nor a risk to any victims/witnesses. In any event, release [REDACTED] would be geographically distant from any victims/witnesses.

39. Treatment of Mr. Mladić in [REDACTED] would save the IRMCT and United Nations the considerable expense of palliative care and would allow Mr. Mladić to explore all medical options available to prolong his life and quality of life as well as comfortably and humanely approach end-of-life with his family. Release [REDACTED] would save the IRMCT from criticism or backlash for failing to release Mr. Mladić even after a terminal diagnosis and short-term life expectancy.

40. Mr. Mladić is entitled to be treated similarly to other terminally-ill accused and convicted persons that were released by the ICTY and/or IRMCT. This is especially given that others who were similarly charged with serious crimes, were previously fugitives and/or had not yet completed 2/3 of their sentence were granted release on humanitarian grounds. It is worth noting that, Nikolić, Beara, Talić, Tolimir and Galić were convicted of some of the same serious crimes as those Mr. Mladić has been convicted of. Therefore, the jurisprudence and the humanitarian rationales

⁴⁹ See, e.g. Annex A, hereto, footnote 4.

employed by the ICTY/IRMCT in those proceedings should apply equally to Mr. Mladić. Further, Nikolić, Beara, and Talić were ordered released on humanitarian grounds, as should Mr. Mladić.

IV. CONCLUSION AND RELIEF SOUGHT

41. Despite the reluctance of the UNDU medical service to give a definitive end-of-life expectancy prognosis on paper, it is undeniable and not in dispute that Mr. Mladić is imminently approaching the end of his life. Regardless of if that is [REDACTED], such a short-term terminal diagnosis where there is no prospect of curing his illnesses supports his release on humanitarian grounds.

42. The end-of-life treatment of Mr. Mladić, including palliative care is incompatible with his continued detention at the UNDU, and such continued detention would amount to cruel, inhumane punishment, as per the legal authorities cited hereinabove. It is without question that end-of-life treatment, and palliative care to improve quality of life can be better accomplished outside of a jailhouse setting, among family and caretakers that speak the same language as Mr. Mladić.

43. If released [REDACTED] ACP discussions can be undertaken with Mr. Mladić in a language he understands, and answer questions he may have, so that he may make a fully informed and meaningful decision with his family as to what treatment options to accept and/or refuse, understanding the consequences of such difficult decisions.

WHEREFORE, for the foregoing reasons, RATKO MLADIĆ respectfully requests that the President Grant either provisional release or conditional early release [REDACTED] on an expedited basis.

Word Count: 5090

RESPECTFULLY SUBMITTED BY:

A handwritten signature in blue ink, appearing to read 'Dragan Ivetić', with a stylized flourish at the end.

Dragan Ivetić
Lead Counsel for Ratko Mladić

Dated this 2nd day of June, 2025
Chicago, IL, USA

**UNITED
NATIONS**



International Residual Mechanism
for Criminal Tribunals

Case No.: MICT-13-56-ES

Date: **2 June 2025**

Original: English

BEFORE THE PRESIDENT

Before: The Honorable Judge Graciela Gatti Santana

Registrar: Mr. Abubacarr M. Tambaou

Date Filed: 2 June 2025

PROSECUTOR

v.

RATKO MLADIĆ

Public Redacted

**ANNEX A
(DEFENCE EMAIL)**

From: Dragan Ivetic [REDACTED]
To: [REDACTED]
Cc: "Dragan (Dan) Ivetic" [REDACTED]
Bcc: "Darko Mladić" [REDACTED]

Date: Monday, May 19, 2025 10:18AM

Subject: Urgent Inquiry as to General Mladic's HealthCare (Request for written confirmation)

Dear [REDACTED]:

I write to you regarding General Mladic, and his medical care at the UNDU. General Mladic, his family, and I have some rather significant concerns, and would therefore request that we receive written confirmation, so that we may know how to proceed.

In short – the doctors treating General Mladic as part of the UNDU Medical Services Unit at the UNDU have recently conveyed orally to both General Mladic[1] and his son[2], that my client's medical condition has worsened, such that their prognosis is terminal in nature and that he has a remaining life expectancy of [REDACTED]

[REDACTED] As you can imagine, such a dire diagnosis and prognosis is a serious matter. You will also recall that the latest medical reports (from both the UNDU and IME's) have consistently stated that General Mladic wishes to have his son and his spouse take over decision-making as well as expressing his wish for life-saving re-animation efforts.

General Mladic's son had a call earlier today from certain medical officers from the UNDU Medical Service (he did not catch their names, but they were neither the Chief nor Deputy he spoke with earlier). In today's call the doctors confirmed that:

A) They had a meeting with General Mladic on Friday

B) That at that meeting [REDACTED]

C) That the care being provided to General Mladic has shifted to Palliative, end of life care to lessen suffering, and that he **will no longer be receiving standard/regular care for his underlying conditions** aimed at improving his condition, as such care was considered (by the doctors) to be "only prolonging suffering."

During the call, Darko (again) requested that this information be provided in a written report to himself and his father and the president of the Mechanism. He was told written reports would not reflect what he was being told orally.

[REDACTED]

Palliative Care (at least how it is understood in the US) does not **replace** the standard/regular medical treatment and care, rather it is meant to supplement that existing regular medical treatment (whereas **Hospice Care** does mean replacing regular treatment). [3] Palliative care is also supposed to provide support to the patient **and their family.**[4] It is therefore unclear whether the UN Detention Unit Medical Services Unit was talking of palliative care

or hospice care (and/or accurately describing what that would mean and how it would be provided to both the patient **and his family**).^[5]

[REDACTED]

Toward that end, I would urgently request that you convey the following request to the UNDU Medical Service for a written confirmation of the following items:

- A) What is the most accurate prognosis as to remaining life expectancy of General Mladic given his current medical condition?
 - B) What is the recommended medical care and treatment that is being planned and/or currently being pursued by the UNDU Medical Services as to General Mladic?
 - C) Is palliative care being actively provided; or is it being considered/recommended?
 - D) What is their precise definition of palliative care?
 - E) Does palliative care mean that they will be ceasing the standard, regular medical care and treatment of General Mladic's underlying medical treatment.?
 - F) When can we expect that a terminal diagnosis/prognosis and the decision to enact palliative care will be reported to the President of the IRMCT?
- If such written confirmation is not provided to my client, and his son before the end of this week, we shall have no option but to escalate this matter and raise it with other relevant authorities and/or stakeholders.
- Kindly confirm your receipt, and that you have conveyed the above to the UNDU Medical Services Unit.

Regards
 Dragan Ivetic
 Counsel for General Mladic

^[1]Unknown members of the care team.

^[2] The Chief Medical Officer and her Deputy, during the recent visit of Darko to the UNDU.

^[3] See, <https://www.nia.nih.gov/health/hospice-and-palliative-care/frequently-asked-questions-about-palliative-care> ; <https://my.clevelandclinic.org/health/articles/22850-palliative-care> ; <https://cdn.who.int/media/docs/default-source/integrated-health-services-%28ihs%29/palliative-care/palliative-care-essential-facts.pdf>

^[4] See, <https://www.who.int/news-room/fact-sheets/detail/palliative-care> ; <https://getpalliativecare.org/handouts-for-patients-and-families/>; <https://my.clevelandclinic.org/health/articles/22850-palliative-care>

^[5] Let alone an assessment of whether such care can be best provided at the UN Detention Unit and/or prison hospital

=====

Dragan Ivetic
Defence Counsel

[REDACTED]

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**UNITED
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**ANNEX B
(UNDU EMAIL)**



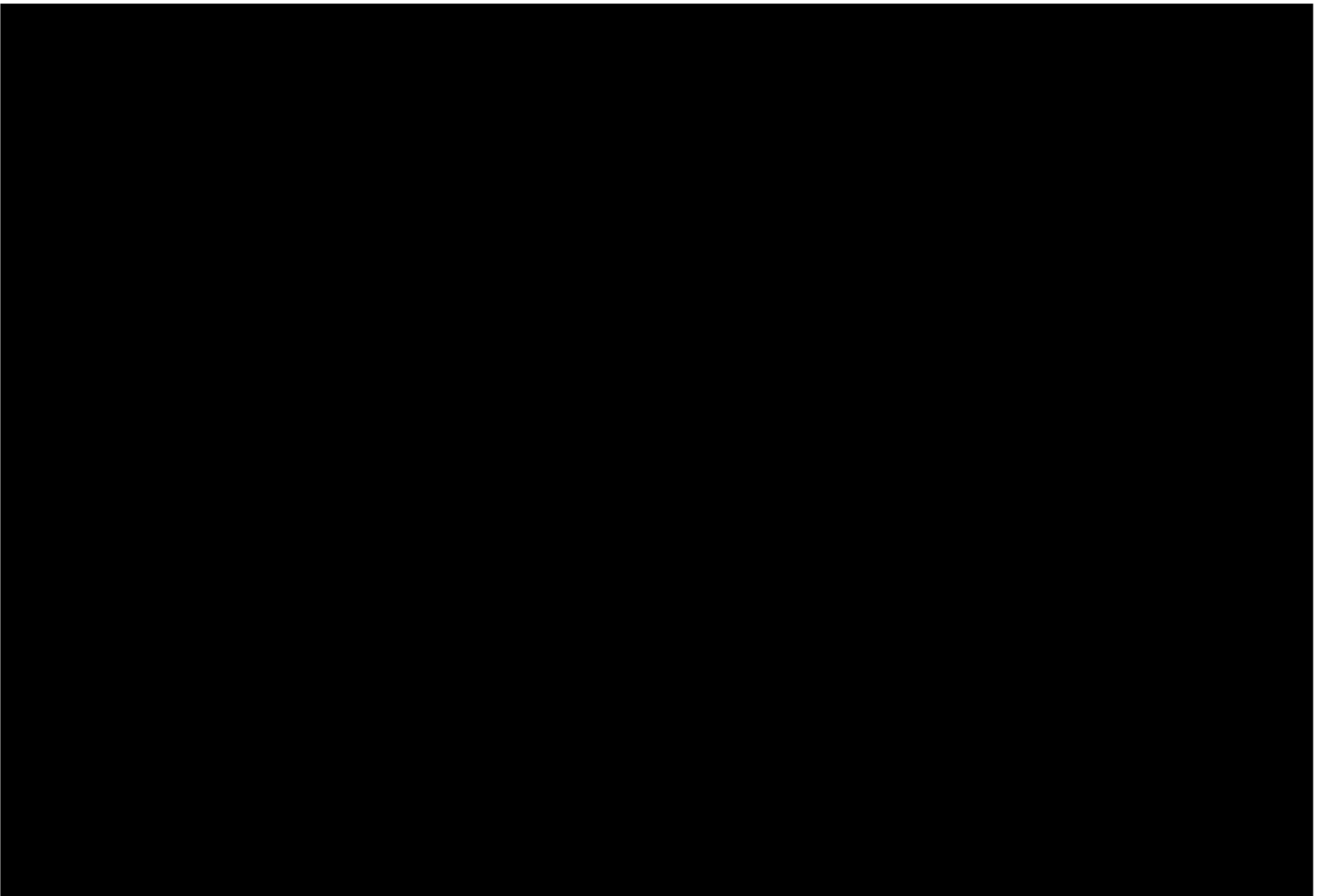
Dragan (Dan) Ivetic <[REDACTED]>

Urgent Inquiry as to General Mladic's HealthCare (Request for written confirmation)

[REDACTED] <[REDACTED]>
To: Dragan Ivetic <[REDACTED]>
Cc: "Dragan (Dan) Ivetic" <[REDACTED]>

Tue, May 20, 2025 at 10:19 AM

Dear Mr Ivetic,



As a consequence, I would expect that the interim report will provide the clarity you seek. However, I appreciate that these developments can be difficult for family members to hear, and also for counsel with a longstanding relationship, and therefore should you or the family have any additional questions at this time, I will do my best to provide you with responses, although we may need to await the report for some of the more medical information.

Regards,

A rectangular area of the signature is redacted with a solid black box.

Commanding Officer



TRANSMISSION SHEET FOR FILING OF DOCUMENTS / FICHE DE TRANSMISSION POUR LE DÉPÔT DE DOCUMENTS

I - FILING INFORMATION / INFORMATIONS GÉNÉRALES

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From/ De :	<input type="checkbox"/> President / <i>Président</i>	<input type="checkbox"/> Chambers / <i>Chambre</i>	<input type="checkbox"/> Prosecution/ <i>Bureau du Procureur</i>	<input checked="" type="checkbox"/> Defence / <i>Défense</i>
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Case Name/ Affaire :	Prosecutor v. Ratko Mladić		Case Number/ Affaire n° :	MICT-13-56-ES
Date Created/ Daté du :	2 June 2025	Date transmitted/ Transmis le :	2 June 2025	No. of Pages/ Nombre de pages : 24
Original Language / Langue de l'original :	<input checked="" type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda <input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre</i> (specify/préciser) :
Title of Document/ Titre du document :	URGENT DEFENCE MOTION SEEKING (ALTERNATIVELY) PROVISIONAL OR EARLY RELEASE OF MR. RATKO MLADIĆ BASED ON HUMANITARIAN GROUNDS			
Classification Level/ Catégories de classification :	<input checked="" type="checkbox"/> Unclassified/ <i>Non classifié</i>	<input type="checkbox"/> Ex Parte Defence excluded/ <i>Défense exclue</i>		
	<input type="checkbox"/> Confidential/ <i>Confidentiel</i>	<input checked="" type="checkbox"/> Ex Parte Prosecution excluded/ <i>Bureau du Procureur exclu</i>		
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Document type/ Type de document :				
<input checked="" type="checkbox"/> Motion/ <i>Requête</i>	<input type="checkbox"/> Judgement/ <i>Jugement/Arrêt</i>	<input type="checkbox"/> Book of Authorities/ <i>Recueil de sources</i>	<input type="checkbox"/> Warrant/ <i>Mandat</i>	
<input type="checkbox"/> Decision/ <i>Décision</i>	<input type="checkbox"/> Submission from parties/ <i>Écritures déposées par des parties</i>	<input type="checkbox"/> Affidavit/ <i>Déclaration sous serment</i>	<input type="checkbox"/> Notice of Appeal/ <i>Acte d'appel</i>	
<input type="checkbox"/> Order/ <i>Ordonnance</i>	<input type="checkbox"/> Submission from non-parties/ <i>Écritures déposées par des tiers</i>	<input type="checkbox"/> Indictment/ <i>Acte d'accusation</i>		

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Translation/ Traduction en	<input type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda <input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre</i> (specify/préciser) :
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