

# **Court of King's Bench of Alberta**

**Citation: College of Physicians and Surgeons of Alberta v Makis, 2026 ABKB 159**

**Date:** 20260304  
**Docket:** 2503 14555  
**Registry:** Edmonton

Between:

**College of Physicians and Surgeons of Alberta**

Applicant

- and -

**Viliam Makis, also known as William Makis**

Respondent

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**Reasons for Decision  
of the  
Honourable Justice Douglas R. Mah**

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### A. What this case is about

[1] The College of Physicians and Surgeons of Alberta (CPSA) seeks to have Mr. Makis cited in contempt of this Court for defying an Interim Injunction Order granted by Justice Yamauchi on August 15, 2025.

[2] The evidence on which the CPSA relies consists primarily of screenshots from social media and copies of videos and podcasts extracted from the internet, copies of email, as well as his questioning on affidavit. Mr. Makis challenges the authentication of the internet and email evidence.

[3] If the Court agrees that the contempt is founded, the CPSA requests that Mr. Makis be jailed and that a Permanent Injunction be granted.

[4] Mr. Makis contends that there has been no breach and the application should be dismissed in its entirety. In the alternative, if there is a breach of the Injunction Order, then he says it is unintentional or trivial and should, in the circumstances, attract no sanction.

[5] The evidence discloses that Mr. Makis is a proponent of the drug ivermectin as a cancer treatment. This case is not about the therapeutic efficacy of ivermectin for that purpose. As Justice Yamauchi observed, that is a question for science to address, not for the Court on this injunction matter.

### B. Statutory Background

[6] The CPSA is one of the bodies established by statute to regulate the health professions in Alberta. It is mandated to regulate the practice of medicine within the province in a manner that protects and serves the public interest: *Health Professions Act*, s 3(1).

[7] For regulated health professions in Alberta (such as medicine), registration as a regulated member with the relevant college and a valid practice permit are mandatory requirements for the provision of regulated professional services to the public: see part 2 of the *HPA*.

[8] Under the *HPA*, Schedule 21, s 3(1) the following activities fall within the scope of the practice of medicine:

- assess the physical, mental and psychosocial condition of individuals to establish a diagnosis,
- assist individuals to make informed choices about medical and surgical treatments,
- treat physical, mental and psychosocial conditions,
- promote wellness, injury avoidance, disease prevention and cure through research and education, and
- engage in research, education and administration with respect to health.

[9] Only regulated members of the CPSA may use the following titles and abbreviations as set out in Schedule 21, s 2 at ss (a), (q), (ll), (mmm), (zzz) & (iiii) respectively: physician, diagnostic radiologist, nuclear medicine specialist, medical doctor, MD and radiologist.

[10] Statutory prohibitions against using protected titles and abbreviations, unless one is a regulated member, are found in various subsections at s 128 of the *HPA*. There is an exception at ss 8 that permits the use of “doctor”, “surgeon”, “pathologist” or “oncologist” or the abbreviation “Dr.” where the person uses the term in connection with teaching, research or administration.

### **C. Factual Background**

[11] Viliam Makis obtained an MD degree from McGill University in 2005. His CV is attached as Exhibit A to his August 12, 2025 affidavit. It reveals that he continued his training and worked continuously in the medical field from graduation until 2013 when he secured a position with Alberta Health Services as a nuclear medicine physician practicing at the Cross Cancer Institute in Edmonton.

[12] He deposes to having over 15 years of experience in cancer diagnosis and treatment and writing over 100 peer-reviewed articles. The articles are listed in the CV.

[13] Mr. Makis was properly licensed by the CPSA for the period 2013 to 2019. Because of workplace issues, he stopped working at the Cross Cancer Institute in 2016. On February 12, 2019 the CPSA cancelled his practice permit because of failure to renew the permit and to pay the annual registration fee and late payment fee, as well as the hearing costs that were awarded against him as a result of a disciplinary proceeding in 2018. He was expressly told at the time by the CPSA that without a valid registration and practice permit, he was not permitted to practice medicine in Alberta.

[14] I realize that Mr. Makis disputes the finding of the hearing tribunal and believes the imposition of hearing costs is illegal.

[15] The CPSA contends that since the cancellation of the practice permit, Mr. Makis is in breach of the *HPA* by continuing to offer medical services to the public (in the form of providing consultations to cancer sufferers regarding diagnosis and treatment) and referring to himself in public by titles and terms he is no longer entitled to use: physician, radiologist, oncologist, MD and Dr.

[16] The concerns on the part of the CPSA resulted in the initial injunction application before Justice Yamauchi.

[17] Much of the CPSA’s evidence in this regard is gleaned from the internet or from email. There is also Mr. Makis’ own questioning transcript from November 3, 2025. The CPSA now alleges that despite the Interim Injunction previously issued, Mr. Makis has maintained his online presence much as before and continues to engage in the unauthorized practice of medicine in Alberta, thereby breaching the Injunction Order.

[18] Mr. Makis asserts that he does not practice medicine. Rather, he shares his interest and research in cancer treatment with the public as a Substack author and helps people with cancer as an International Cancer Coach. He derives a living from doing so.

[19] On the day of the hearing before me, his counsel produced a document dated February 12, 2026 from the State of Florida Board of Medicine entitled “Notice of Intent to Approve Licensure With Conditions” indicating that Mr. Makis’ application for licensure in that state is approved, subject to his procurement of a US social security number. She also advised that Mr. Makis intends to physically relocate his residence to the State of Florida as soon as he buys a

home. She suggested that in light of these developments, the whole rationale for granting the injunction in the first place has to be revisited.

#### **D. Litigation History**

[20] The CPSA's initial application was for a Permanent Injunction. In deciding that initial application, Justice Yamauchi specifically refrained from granting a Permanent Injunction. He preferred instead to issue an Interim Interlocutory Injunction, pending a special application for a Permanent Injunction. His concern at the time was the lack of a fully developed record before the Court which meant that any final remedy was premature. Questioning on the July 16, 2025 and August 12, 2025 affidavits of Scott McLeod (then Registrar of the CPSA) had taken place and the transcript was referenced during argument, but it had not been filed, and Justice Yamauchi had not read it in advance. Mr. Makis' response affidavit was only filed on August 12, 2025 (same day as the application) and no questioning had occurred. Justice Yamauchi felt the issue of a Permanent Injunction should be reserved for a special application.

[21] The request by Mr. Makis to Justice Yamauchi for an adjournment was refused. The Court felt that the public required protection from the unauthorized practice of medicine and granted an injunction on an interim basis.

[22] The August 15, 2025 Order was styled as interim and interlocutory and prohibited Mr. Makis from:

- representing or implying that he is a regulated member of the CPSA or otherwise licensed to practice medicine in Alberta;
- using any of the titles, abbreviations or initials set out in section 2 of Schedule 21 (Profession of Physicians, Surgeons, Osteopaths and Physician Assistants) of the *Health Professions Act*, RSA 2000, c H-7 (HPA) alone or in combination with other words;
- using the title "doctor" or "oncologist" or the abbreviation "Dr." alone or in combination with other words in connection with providing a health service; and
- offering or providing any health services to the public including, but not limited to, offering or providing advice or consultations regarding cancer treatment.

[23] He was given until September 22, 2025 to make his social media profiles compliant with the foregoing.

[24] During argument before me, it was suggested by Mr. Makis' side that the CPSA has dragged its feet in bringing the matter back before the Court. The record does not indicate to me that the CPSA has delayed the matter. Justice Yamauchi put the obligation on both sides to bring the matter back (Transcript, p 9 25, lines 8-16). In denying the adjournment, he seemed to be giving Mr. Makis the option of simply living with the Interim Injunction, if granted (Transcript, p 9, lines 11-15).

[25] I conclude that delay is not a factor.

[26] On February 14, 2026, Mr. Makis made application to the Court of Appeal for permission to appeal the August 15, 2025 decision, both as to the refusal of the adjournment and the granting of the Interim Interlocutory Injunction itself: *College of Physicians and Surgeons of Alberta v Makis*, 2026 ABCA 17 (*Makis CA*).

[27] As noted at para 3 of *Makis CA*, permission to appeal was necessary because Mr. Makis had been declared a vexatious litigant: *Makis v Alberta Health Services*, 2018 ABQB 976, partially varied at *Makis v Alberta Health Services*, 2020 ABCA 168.

[28] Per Feehan JA at para 15 of *Makis CA*, the Injunction Order granted by Yamauchi J was intended to be temporary only and the proper forum for dealing with the set aside of that Order was the Court of King's Bench in the context of considering whether a Permanent Injunction should be granted, which was the process contemplated by Yamauchi J. The stay request was denied because of public interest concerns. Feehan JA noted at para 27 that the Permanent Injunction application combined with a contempt application could be heard as a special application.

[29] I heard that combined special application on February 18, 2026. I had the benefit of a robust record, to which the following had been added: transcript from questioning of Mr. Makis on his August 25, 2025 affidavit; affidavit of Colleen Forestier (current CPSA Registrar) of December 19, 2026; affidavits of Stephanie Lanz dated January 8, February 4 & 6 attaching email, screenshot and video exhibits; additional affidavits of Mr. Makis of January 16, 2026 and February 12, 2026 and, of course, briefs from both counsel.

## **E. Evidence of Allegations**

### **(i) Initial Application**

[30] In support of the initial application before Yamauchi J, then CPSA Registrar Scott McLeod in his July 16, 2025 affidavit discussed Mr. Makis' disciplinary history and dealings with the CPSA and subsequent litigation between Mr. Makis and the CPSA. He expressed concern that following cancellation of his practice permit, Mr. Makis continued:

- to hold himself out as a physician, radiologist, and oncologist,
- referring to himself as MD and Dr., and
- providing medical services directly to members of the public in the form of consultations related to cancer diagnosis and treatment.

[31] These concerns arose from Mr. Makis' own social media postings between February 2023 and November 2024 and a series of inquiries made to the CPSA from members of the public concerning the apparent unauthorized practice of medicine on Mr. Makis' part. Dr. McLeod sent him a "Cease and Desist" letter on February 10, 2025.

[32] Mr. Makis' direct communications with Dr. McLeod and the CPSA's counsel (Ms. Tiessen) were non-responsive to the allegations and consisted of *ad hominem* attacks against them and others: exhibits to affidavit of Mr. McLeod sworn August 12, 2025.

[33] However, once Mr. Makis retained counsel, he replied to the allegations in a substantive way. In a response affidavit of August 12, 2025, he deposed that:

- he was not practicing medicine but rather limiting himself to independent research, writing Substack articles and sharing information on alternative cancer treatments;
- he has no direct patient relationships himself and does not provide medical consultations; his Substack articles are specifically disclaimed as medical advice and persons to whom he provides health coaching services are advised through a “Health Coaching Informed Consent and Waiver” that he is not dispensing medical advice nor prescribing treatment; and
- since he is not a member of the CPSA, it has no jurisdiction over him.

[34] During his August 14, 2025 questioning of affidavit, Dr. McLeod provided this further evidence:

- Mr. Makis’ online statements confirming that he provides consultation for cancer care and runs the largest ivermectin cancer clinic show that he engages in the unauthorized practice of medicine under the *HPA*: Transcript, p 10, lines 8-15.
- While there are no specific examples of Mr. Makis’ activities causing harm to someone, the CPSA believes that there is a significant risk of causing harm by practicing medicine without a license: Transcript, p 11, lines 1-5.
- Consultation for the purposes of practicing medicine consists of a licensed physician providing a patient with specific information to advise and guide that person in their course of treatment. Consultation may but does not necessarily involve ordering tests, diagnosing and writing prescriptions. Providing someone with information in the context of being a physician and claiming to have the skills and qualifications of a physician while telling patients how they should be receiving their care, as part of that consultation, is the practice of medicine: Transcript, p 16, lines 5-22.
- A person claiming to be a physician and using the restricted titles of Dr. and MD in the provision of information to influence a course of treatment would be doing a consultation: Transcript, p 17, lines 3- 9.

(ii) This Application

[35] In her December 19, 2025 affidavit, current CPSA Registrar Colleen Forestier deposed that:

- Mr. Makis, on his social media, described Yamauchi J as a “corrupt Judge from Calgary” who forced him to remove MD from his Twitter account in order to prevent terminally ill cancer patients from getting help from Mr. Makis about ivermectin, fenbendazole and mebendazole, as part of a conspiracy by the government of Alberta and the CPSA to criminalize ivermectin.
- Despite the Interim Injunction Order, Makis continues to practice medicine in Alberta without a license by providing advice and

consultations regarding cancer treatments to members of the public, and he continues to hold himself out as a medical doctor, a physician, oncologist, radiologist, and nuclear medicine specialist, as evidenced by his social media posts.

- Mr. Makis continues to promote himself online as MD, radiologist, and oncologist.
- Mr. Makis has created several Facebook profiles on which he promotes his services, including creating individualized treatment protocols using ivermectin and other drugs and claims that he runs the world's largest ivermectin cancer clinic.
- Since August 15, 2025, Mr. Makis has appeared as a guest on several podcasts or videos in which he refers to himself as a Canadian physician, doctor and MD and states that he operates a cancer clinic, has developed dosing protocols for ivermectin and other anti-parasitics for use in cancer treatment, has developed cancer protocols and has over 6,500 patients. Digital copies of the videos were attached to the affidavit on a USB.

[36] The Affidavit of Stephanie Lanz of January 8, 2026, references Facebook posts attributed to Mr. Makis taking place on December 26, 2025, in which he is described as an MD, radiologist and oncologist. The three posts each contain a video created by Ms. Makis in December 2025 that discusses his cancer clinic and services.

[37] Ms. Lanz swore a further affidavit on February 4, 2026. In that affidavit, she attached emails sent by Mr. Makis to Dr. McLeod between October 10, 2025, and January 1, 2026. In these emails, Mr. Makis appears to forward news releases from his own online news service. For example, one headline reads: "BREAKING NEWS: Our Ivermectin Cancer Clientele has just reached 7500 Cancer patients!" Another headline reads: "BREAKING NEWS: I am launching a YOUTUBE Channel! Youtube.com/@MakisW." One of the releases offers discount Fenbendazole powder and another discount Mebendazole and both provide Mr. Makis' own promo code for purchase over the internet. Two of the news releases describe Premier Danielle Smith's efforts to criminalize ivermectin in Alberta and persecute Mr. Makis, and his resistance efforts in that regard. Another is an announcement that:

We have been helping cancer patients from around the world for 500 days now!  
From USA to Dubai to Australia, to Japan, to Brazil, to Montenegro ...7500  
Cancer patients including 100 CHILDREN. We have the world's largest cutting  
edge Cancer Program, utilizing the most promising repurposed drugs: ivermectin.  
Mebendazole. Fenbendazole & more. There is nothing like it anywhere in the  
world! Coming soon to Florida ...Thank you all for your incredible support!!

[38] The February 4, 2026, affidavit of Ms. Lanz also references X posts extracted from Mr. Makis' X account on February 2, 2026, that discuss his ivermectin work. One post discusses how a 67 year old Minnesota man with Stage 4 pancreatic cancer came to Mr. Makis for a course of ivermectin and mebendazole, becoming cancer-free after 6 months. There are many other testimonials. Another is a rebuttal to some negative comments from Scott Adams about Mr. Makis' ivermectin cancer clinic. Many of the posts contain the line: "I have the world's largest Ivermectin Cancer Clientele." One has the additional line: "We are revolutionizing Cancer

Care!” while another says: “I have the world’s largest Ivermectin Cancer Clientele, and we are at the cutting edge of Cancer Treatment.”

[39] In one posting dated November 21, 2025, Mr. Makis and a cancer client discuss that person’s dosages. Mr. Makis comments: “You’re doing heavy doses of both Ivermectin and Mebendazole but if you’re tolerating them well, keep going!!”

[40] The affidavit also attaches screenshots of videos from Mr. Makis’ YouTube channel and the videos themselves, retrieved on February 4, 2026, on another USB exhibit. There is lastly a screenshot of Mr. Makis’ LinkedIn page from January 29, 2026, that references a video called “BREAKING NEWS Major UPDATE on our World Leading CANCER CLINIC: 8000+ Cancer Patients & growing!” The video itself is on the same USB device that is an exhibit.

[41] Further specific examples pointed out by the CPSA at para 19 of its brief are found in Appendix A to these reasons. I point out that Mr. Makis denies that any of the Facebook posts in the evidence originate from him and that he is the victim of impersonation in that regard. However, the content of the Facebook posts is consistent with his remaining social media presence which he does not disavow.

[42] The February 6, 2026, affidavit of Ms. Lanz indicates that she visited Mr. Makis’ YouTube channel on February 6, 2026, and the videos mentioned in her February 4, 2026, affidavit and the December 2025 video remain posted. Specific examples of offending material in these videos as listed at para 21 of the CPSA brief are found in Appendix A hereto. The evidence brought to bear by the CPSA is voluminous, even excluding the Facebook material.

[43] I have viewed the videos and listened to the podcasts.

[44] Also on the Court file is a series of 10 testimonial-type affidavits filed February 13, 2026 from deponents in Canada, the United States, the United Kingdom and Spain who say they learned of Mr. Makis’ research on repurposed drugs and the protocol he has developed and that under the guidance of a licensed physician, elements of the protocol have been incorporated into the cancer treatment of the deponent, a spouse or relative (and in one instance a 17 year old English Bull Terrier) and they have all experienced significant improvement. The deponents state that no direct advice was taken from Mr. Makis and that the treatment was based on his publicly shared research.

[45] In his January 16, 2026 affidavit, Mr. Makis asserts that:

- He has not breached the Interim Injunction in that he has only engaged in public discourse and shared information, which constitute protected expression under s 2(b) of the *Charter*.
- Many of the media appearances occurred outside of Alberta or Canada, beyond the territorial jurisdiction of this Court and the CPSA’s regulatory scope.
- He does not control how third parties, such as media hosts or outlets, apply titles or descriptors to him and he has not personally used or endorsed any titles in breach of the Injunction Order.

- The Facebook posts relied upon by the CPSA are fake. He has been the victim of impersonation and has demanded that fraudulent websites be taken down: Exhibit “A” to the January 16, 2025 affidavit.
- The CPSA is unable to show that anyone has been harmed. To the contrary, many have benefited from Mr. Makis’ work.

[46] In the February 13, 2026 affidavit, Mr. Makis refers to having obtained a medical license in the State of Florida as of February 6, 2026. He contends that the YouTube videos, X posts, emails and LinkedIn profile relate to his Florida-based research and practice. He states that he is in the process of establishing a practice and moving his family to Florida where he intends to reside full-time.

[47] He suggests in the last affidavit that any breaches of the Injunction Order are technical or inadvertent and not worthy of serious sanction, if any.

[48] After the hearing, I asked Mr. Makis’ counsel to prepare and file a further affidavit from Mr. Makis for the simple purpose of properly adducing the “Notice of Intent to Approve Licensure With Conditions” as evidence. Counsel promptly obliged.

[49] The record includes the transcript from Mr. Makis’ questioning on November 3, 2025 on an affidavit sworn by him on August 25, 2025 in Court of Appeal Action No. 2503-0164AC. During that questioning, he stated:

- Since September 7, 2025 he had stopped referring to himself with any of the titles, abbreviations and initials protected under Schedule 21, s 2 in his various social media profiles or otherwise: Transcript, p 6 line 14 to p 7, line 5.
- Since 2019 he has published 6 peer-reviewed articles, three of which pertain to cancer: Transcript, p 9, line 4 to p 10, line 2.
- He has not actually worked at the Cross Cancer Institute since 2016 but remains under an active contract with Alberta Health Services: Transcript, p 10 line 17 to p 12, line 11.
- He started providing health coaching services in July 2024, operates from his home, has all interactions with health coaching clients over email or Zoom, and has three assistants who are not health professionals. At the time, he had 7,000 health coaching clients: Transcript, p 16, line 14 to p 17, line 26.
- Some of the clients have cancer. The clients pay for the services. Mr. Makis declined to disclose how much: Transcript, p 17, line 27 to p 19, line 9.
- As part of health coaching, Mr. Makis reviews the test results and treatment records and patient records of clients with cancer: Transcript, p 18, lines 19-27.
- In providing health coaching services, Mr. Makis does not provide advice but rather information and research. In doing so, he relies on his medical knowledge and his expertise: Transcript, p 19, line 23 to p 20, lines 1-27.

- The information shared is broad and includes information about ivermectin and other repurposed drugs and how to access such drugs through public websites: Transcript, p 21, lines 1 to p 22, line 6.
- Mr. Makis has clients sign a consent and waiver form before he provides information: Transcript, p 24, lines 6-13.

#### F. Legal Test and Process for Contempt

[50] The legal test for contempt is set out in the well-known case of *Carey v Laiken*, 2015 SCC 17 at paras 32-35. Under that test, three elements must be established by the Applicant beyond a reasonable doubt:

- The Order alleged to have been breached must state clearly and unequivocally what should and should not be done;
- The party alleged to have breached the Order must have had actual knowledge of it; and
- The party allegedly in breach must have intentionally done the act that the Order prohibits or intentionally failed to do the act that the order compels.

[51] See also: *Envacon Inc v 829693 Alberta Ltd*, 2018 ABCA 313 at para 8 and *Alberta Health Services v Pawlowski*, 2022 ABCA 254 at para 44. Further, *Lymer v Jonsson*, 2025 ABCA 423 at paras 10 & 11 confirms:

Contempt of court “rest[s] on the power of the court to uphold its dignity and process ... The rule of law is directly dependent on the ability of the courts to enforce their process and maintain their dignity and respect... Contempt powers emanate from the superior court’s inherent jurisdiction but have been codified under rules of civil procedure ...

Civil contempt is focused on the coercion of private litigants to comply with court orders and the protection of private interests. The purpose of a contempt order is “first and foremost a declaration that a party has acted in defiance of a court order”, although another purpose of sanctioning for civil contempt is punishment for breach of a court order ...

[citations omitted]

[52] The Rules engaged are Rules 10.52 and 10.53. The process for adjudicating contempt matter is confirmed at para 13 of *Lymer*:

Civil contempt proceedings are generally bifurcated into a liability phase and a penalty phase: *Carey* at para 18. The case on liability proceeds first, including the presentation of any defence. If liability is established, the party found in contempt is usually afforded an opportunity to purge their contempt before the penalty or sanction phase proceeds: *Miner v Cooke*, 2025 ABCA 226 at para 15. If civil contempt is purged the court may waive or suspend any

sanction or may vary or remit a sanction already imposed: rule 10.53(3); *Braun* at para 27.

[53] The CPSA asks that both phases of adjudication be dealt with in a single decision. It says that all three elements of the test have been proven beyond a reasonable doubt. It says that a stern message must be instilled in Mr. Makis that Court Orders are not to be defied. Accordingly, it seeks a sanction of imprisonment against Mr. Makis per sub-para (a) of Rule 10.53(1).

[54] Mr. Makis defends on the basis that he has not breached the Injunction Order or that any breach is unintentional or *de minimis*.

### G. Authentication

[55] Counsel for Mr. Makis argued that screenshots of Mr. Makis' social media activity, video and email evidence had not been properly authenticated and therefore could not be relied upon where the applicable standard is proof beyond a reasonable doubt. She asserted that:

- the CPSA did not furnish metadata, hash values, timestamps from the platform, or expert forensic analysis to confirm authenticity;
- the simple assertion of having looked at certain webpages and taking screenshots is not enough;
- no continuity has been established;
- there is no evidence that the social media accounts are actually controlled by Mr. Makis, but rather that he has experienced impersonation and fake accounts; and
- emails are presented without header information, IP logs, or verification that they were actually sent by Mr. Makis.

[56] This evidence consists of printed copies of electronic documents (or copies of other media) extracted from the internet. This form of evidence is commonplace in Courts today, including criminal cases where the standard of proof is always that of proof beyond a reasonable doubt. The Courts have developed a practical approach for admission of such evidence, applying the electronic documents provisions of the *Canada Evidence Act* (sections 31.1 – 31.8). There are corresponding and substantively identical provisions in the *Alberta Evidence Act* (sections 41.1-41.8).

[57] The Court of Appeal of Newfoundland and Labrador in *R v Martin*, 2021 NLCA 1, after reviewing the case law in Canada, stated at para 43:

In summary, common law principles respecting admissibility of evidence and the provisions of the *Act* govern the admissibility of electronic documents. Authentication of electronic documents for the purpose of admissibility under section 31.1 is established by meeting the low standard of “some evidence of the tendered document is what purports to be”.

[58] Thus, the requirement is not onerous and moreover may be established by either or both direct and circumstantial evidence: *R v C B*, 2019 ONCA 380 at para 66; *Martin* at para 31. In essence, authentication under section 31.1 of the *Canada Evidence Act* is sufficient where the

witness or deponent tenders some evidence that the copy or screenshot exhibit is what it purports to be, which can consist of going to the source (website, email platform, text message program, cell phone photo gallery etc.), viewing the item and printing (or copying) it: *R v S P*, 2025 ONCA 60 at para 10; *R v S M*, 2025 ONCA 18 at paras 27-30; *R v Shaw*, 2024 ONCA 119 at paras 251, 253 and *R v Farouk*, 2019 ONCA 662 at para 60; and would be so even if the witness did not view the material directly: *R v Hirsch*, 2017 SKCA 14 at paras 18-21.

[59] The corresponding section in the *Alberta Evidence Act* [section 41.3] is identically worded.

[60] The affidavits of Dr. McLeod, Dr. Forestier and Ms. Lanz can only be interpreted as those persons having gone to the respective website or email platform and viewing the exhibits in question in their electronic form. In the case of the emails in Ms. Lanz's February 4, 2026 affidavit, she is acting on information and belief but nonetheless the low authentication threshold is met.

[61] Even if the electronic evidence is authenticated, there remains the question of weight. Mr. Makis did say that he has been victimized by impersonators and fraudulent websites. He attached as examples to his February 12, 2026 affidavit three instances where he had to demand the removal of fake or impersonator websites. He also deposed that he does not have any Facebook accounts, so all the Facebook posts tendered by the CPSA are fake. He did not specifically state that any of the other CPSA electronic document evidence was fake but rather challenged the CPSA to prove he controls those accounts.

[62] Mr. Makis admits that he does operate X, LinkedIn and YouTube accounts. He does not deny that the content proffered by the CPSA from those platforms was authored or posted by him. He does not deny the authenticity of the emails to Dr. McLeod. He simply asserts that the CPSA cannot prove they originate with him.

[63] The evidence advanced by the CPSA in this regard is consistent in expressing Mr. Makis' world view. Generally, that world view is that conventional cancer treatments are inadequate for some patients and mainly serve the interests of the medical establishment and the pharmaceutical industry and that the less conventional treatment propounded by him, mainly in the form of therapeutic application of repurposed drugs, is supported by scientific research and real-life experience. As the proponent, Mr. Makis intends to revolutionize cancer treatment.

[64] This consistent messaging throughout all of the online and email material attributed to Mr. Makis is circumstantial proof that it originates from him. It is also branded with his name and image. Taken in totality, this evidence supports a logical and common-sense inference that he is the author. The activity described in this material is corroborated by Mr. Makis' own questioning evidence in which he discusses his health coaching business. Even the Facebook posts which he disavows is consistent in terms of content.

[65] Where Mr. Makis can specifically disassociate himself from certain websites, he has. He provided three instances in Exhibit "A" to his February 12, 2026 affidavit. He denies making the Facebook posts. But nowhere else does he say that the material put forward by the CPSA is not his. Rather, he simply challenges the CPSA to prove it is.

[66] As Applicant, the CPSA has the burden of establishing proof to the required standard. That may be done directly or circumstantially. Mr. Makis as Respondent has no obligation to say anything. But he has chosen to say something. He has disavowed some material but not said

anything about the authenticity of the rest of it. Apart from the three instances in Exhibit “A” and the Facebook posts, which I will set aside from consideration for the moment, I say the CPSA has proven the origin of the remaining material at least on a circumstantial basis. If Mr. Makis is not the originator of any of the other material, then it is up to him to tell the Court. This is not a case of shifting the burden of proof to Mr. Makis. Rather, whether any of the remaining material is fake or made up by someone else is uniquely known to Mr. Makis.

[67] The Court of Appeal in *Freyberg v Fletcher Challenge Oil and Gas Inc*, 2005 ABCA 46 (citing *Farrell v Snell*, 1990 CanLII 70 (SCC), [1990] 2 S.C.R. 311) said at para 79: “where a subject matter lies particularly within the knowledge of one party, that party may bear the burden of proof on that issue.”

[68] I am not shifting even the evidential burden to Mr. Makis. Even though he has no obligation to adduce evidence, he has decided to do so through affidavit. He argues that the CPSA cannot prove all of the online material originates from him, inviting the Court to conclude that the whole of the material might be fake or at least that there is reasonable doubt as to its genuineness. Yet he only identifies specific limited material as not his and says nothing about the rest of it, which is the bulk. In the context of a contempt application, the Court of Appeal said this at para 48 of *Envacom*:

In our view, the addition of the words “without reasonable excuse” in rule 10.52 (3)(a) do not change the burden on the party alleging contempt. But, although the alleged contemnor has no persuasive or evidentiary burden, nonetheless the court is entitled to presume that the alleged contemnor acted with knowledge of the facts, unless there is some evidence to the contrary from the alleged contemnor who alone can know on what belief he acted and on what ground the belief, if mistaken, was held: *Sweet v Parsley*, [1970] AC 132 at 164, [1969] UKHL 1, citing *Woolmington v Director of Public Prosecutions*, [1935] AC 462, [1935] UKHL 1. Consequently, as a matter of tactics and prudence, in order to avoid a finding of contempt, the alleged contemnor may be compelled by the weight of adverse evidence establishing contempt, to put forward countervailing evidence either to provide a reasonable excuse or to prove that it did what was required of the order.

[69] In *Envacom*, the issue was whether there was a reasonable excuse for the breach giving rise to the contempt application. Here, Mr. Makis is trying to establish something different, that is, to leave doubt in the Court’s mind as to whether he is the author of any of the material. Having elected to testify (in the form of submitting an affidavit), he is behooved to at least state what is uniquely in his knowledge, which is whether the material is fake or not. He has stated that discrete pieces of the material are fake but says nothing about the rest of it.

[70] The Court in *Envacom* points out that this approach is not a shifting of even the evidential burden (at para 49):

However, this is not a “shifting of a burden” because the alleged contemnor is not obliged to do anything. “The decision of a party to go forward with evidence because the risk of an adverse verdict

is too great is not a question of law but a matter of common sense. Since the [alleged contemnor] is not required by law to do anything, this tactical decision to adduce evidence is not an evidential burden (using the definition in this text) and thus there is no shifting of the evidential burden.” Sopinka, Letterman & Bryant, *The Law of Evidence in Canada*, 4th ed. (Markham, Ont: LexisNexis Canada, 2014) at para 3.53 and cases cited therein.

[71] In the criminal realm, the availability of inferences arising from circumstantial evidence is governed by the Supreme Court of Canada’s decision in *R v Villaroman*, 2016 SCC 13 at para 55: Where the Crown’s case depends on circumstantial evidence, the question becomes whether the trier of fact, acting judicially, could reasonably be satisfied that the accused’s guilt was the only reasonable conclusion available on the totality of the evidence. Circumstantial evidence need not totally exclude other conceivable inferences to provide proof beyond a reasonable doubt, and the inferences must be reasonable in the circumstances and not just possible: *Villaroman* at para 42, *R v Vernelus*, 2022 SCC 53 at para 5, *R v Dipnarine*, 2014 ABCA 328 at paras 24-25. An inference must be viewed “logically in light of human experience” to determine if it is reasonable when considered with all the evidence.

[72] Here, the CPSA has circumstantially proven that Mr. Makis is the originator of all the online material extracted from the internet, and the emails to Dr. McLeod, except the three instances referred to in Exhibit “A” and (possibly) the Facebook posts. Mr. Makis has specifically disavowed the three Exhibit “A” instances and the Facebook posts. He has not disavowed the remainder of the material, which is the bulk of it. Based on the totality of the evidence, it would be illogical and unreasonable to infer that all of the evidence adduced by the CPSA from the internet and through email has been faked or even that such an inference is reasonably available on the whole of the evidence so as to give rise to reasonable doubt.

[73] From this, I conclude that Mr. Makis is the originator of all of the online and email material put in evidence by the CPSA, except for the three instances referred to in Exhibit “A” of his February 12, 2026, affidavit. I make no finding about the Facebook posts.

## H. Jurisdiction

[74] Mr. Makis asserts that the CPSA has no jurisdiction over him since he is not a regulated member. He is correct about that. The CPSA cannot regulate him as if he were a regulated member because he is not a regulated member. However, the CPSA is not purporting to do so.

[75] Rather, the CPSA as a private litigant, but in the exercise of its public interest mandate, asked the Court to restrain unlawful conduct. The Court granted an Interim Injunction in that regard. It is the Court that is regulating Mr. Makis’ conduct. This application for contempt and a Permanent Injunction is a continuation of the Court’s regulation of that conduct.

[76] Change in status (from regulated to non-regulated) is not relevant to this Injunction. As the Court of Appeal said in *Law Society of Alberta v Beaver*, 2021 ABCA 163 at para 40 with regard to a suspended lawyer who was later disbarred: “The foundation for the injunction, being a desire to protect the public from such unauthorized practice, remained unaffected, and existed independently of his change in status.”

## I. Extra-territoriality

[77] Mr. Makis further makes the further argument that some of his activities take place in the US and many if not most of his clients reside outside of Alberta and even Canada. He contends that the Injunction Order previously granted cannot have reach beyond the borders of Alberta.

[78] It was agreed during the hearing that the Court has *in personam* jurisdiction over Mr. Makis so long as he resides in Alberta. The fact that the internet is involved and people from outside Alberta interact with Mr. Makis while they are outside of Alberta does not take away from the fact that he is physically in Alberta when these interactions occur. Nor does it matter that podcast or social media interviews take place outside of Alberta when Mr. Makis is physically in Alberta when he posts the interviews on his YouTube channel. Besides, the Supreme Court of Canada dealt with how injunctions can have extra-territorial effect when the internet is engaged in *Google Inc v Equustek Solutions Inc*, 2017 SCC 34. The *Google* case has quite a different factual context and the offending party had actually ceased being physically present in the province, but the Court found that, as a matter of practicality, it was necessary for the injunction to have extra-territorial effect. At para 47, the Court stated:

In the absence of an evidentiary foundation, and given Google’s right to seek a rectifying order, it hardly seems equitable to deny Equustek the extraterritorial scope it needs to make the remedy effective, or even to put the onus on it to demonstrate, country by country, where such an order is legally permissible. We are dealing with the Internet after all, and the balance of convenience test has to take full account of its inevitable extraterritorial reach when injunctive relief is being sought against an entity like Google.

[79] Here, the CPSA does not seek to have the Injunction extend extra-territorially. It seeks only to enjoin Mr. Makis from the unauthorized practice of medicine and using protected titles while he is a resident of Alberta and not a regulated member of the CPSA. Thus, the fact that his clients do not live in the province or that he engages in some activities in Florida is not a defence to a contempt charge if he is breaching the Injunction Order in Alberta. The CPSA would not pursue these proceedings if Mr. Makis were not a resident of Alberta.

## J. Freedom of Expression

[80] There is a further argument that Mr. Makis’ internet activities constitute protected speech within the meaning of section 2(b) of the *Charter*. I note that a cross-application for a declaration under section 24(1) of the *Charter* was not brought nor any notice given to the Attorneys General. I don’t think any parties will incur prejudice if I deal with this argument substantively based on what is before me.

[81] If Mr. Makis had restricted himself to talking about ivermectin and other repurposed drugs, I would say he has a point. But he has not. He also provides a service to the public which the CPSA says constitutes the unauthorized practice of medicine in Alberta and he is also using protected terms and titles, in reference to himself, which the CPSA says he is not legally entitled to do. Further, the CPSA alleges breach of a Court Order that specifically restrains him from doing either and that is why the parties are back in Court before me.

[82] The Supreme Court of Canada decision in *Google* is also useful for its discussion of freedom of expression in the injunction context, particularly where that right also exists in another country. Mr. Makis also asserted a right to free speech under the First Amendment to the US Constitution in respect of his American activities. At paras 45 & 48, the Court says:

[45] And while it is always important to pay respectful attention to freedom of expression concerns, particularly when dealing with the core values of another country, I do not see freedom of expression issues being engaged in any way that tips the balance of convenience towards Google in this case. As Groberman J.A. concluded:

In the case before us, there is no realistic assertion that the judge's order will offend the sensibilities of any other nation. It has not been suggested that the order prohibiting the defendants from advertising wares that violate the intellectual property rights of the plaintiffs offends the core values of any nation. The order made against Google is a very limited ancillary order designed to ensure that the plaintiffs' core rights are respected.

. . . the order in this case is an interlocutory one, and one that can be varied by the court. In the unlikely event that any jurisdiction finds the order offensive to its core values, an application could be made to the court to modify the order so as to avoid the problem.

...

[48] This is not an order to remove speech that, on its face, engages freedom of expression values, it is an order to de-index websites that are in violation of several court orders. We have not, to date, accepted that freedom of expression requires the facilitation of the unlawful sale of goods.

[83] The Court's point in *Google* is that freedom of expression cannot be used to excuse profiteering off the theft of intellectual property. I say the same in this case that freedom of expression is not a justification for engaging in the unauthorized practice of medicine and the unauthorized use of protected titles within a Canadian province. I don't see how a Court in Florida or Floridians themselves would object to an Order in Alberta that prohibits a person from engaging in the unauthorized practice of medicine in Alberta or making unauthorized use of protected titles in Alberta.

### **K. Third Parties**

[84] Another defence or partial defence that Mr. Makis asserts is that he cannot control how third parties refer to him. That is true. As the examples, both above and in the Appendix show, Mr. Makis both refers to himself and allows others to refer to himself using titles that are forbidden to him. He does control what biographical information he provides to third parties. He does have the ability to correct erroneous or misleading information about his status in Alberta

and Canada. He does have the ability to correct information uttered by third parties by disclaimer or correction before he posts it. But the internet evidence does not show that he does this. He endorses the incorrect information by silence.

[85] Where he does, as in one instance, admit to having lost his medical license in Alberta, he says that his license is being “held hostage” or illegitimately withheld for the purpose of silencing him. He does not say that his license was cancelled because he failed to take the requisite steps outlined by the CPSA to maintain that licensure.

### L. Florida Licensure

[86] I take no issue with the fact that Mr. Makis has been granted conditional licensure in the State of Florida and upon obtaining a US social insurance number will have full licensure. That does not detract from the fact that he is not licensed in Alberta and therefore is prohibited from practicing medicine and using protected titles and terms while a resident of Alberta and subject to the *HPA* and this Court’s jurisdiction.

### M. Credibility

[87] I am entitled to make adverse credibility findings and draw inferences from the affidavit evidence where that evidence is undermined by cross-examination or by other contrary evidence that I do accept: *Janvier v 834474 Alberta Ltd*, 2010 ABQB 800 at para 15 & *Liberty Mortgage Services Ltd v Shaw*, 2024 ABKB 92 at para 43. Also, as *Liberty Mortgage* says at para 44:

Affidavit evidence that is general, vague, or superficial may also be given reduced weight: *Geophysical Service Inc v Falkland Oil and Gas Ltd*, 2020 ABCA 21 at para 61; *MNP Ltd (Eco-Industrial Business Park Inc) v Symmetry Asset Management Inc*, 2023 ABKB 429 at para 87. Affidavit evidence that is self-serving and otherwise unsupported can be given no weight and does not give rise to a genuine need for trial: *Guarantee Co of North America v Mr. Tayloron Capital Corp*, 1999 CanLII 664 (SCC), [1999] 3 SCR 423 at 436-437 [*Mr. Tayloron*] at 436-437. Other descriptions of this type of evidence include a “bare denial”, a “bald assertion”, or having no “air of reality”: *Goodswimmer v Canada (Attorney General)*, 2017 ABCA 365 at para 40 citing to *Lameman* at para 11 and *Floden* at para 23; *Fitzpatrick v The College of Physical Therapists Alberta*, 2020 ABCA 164 at para 22.

[88] Mr. Makis’ evidence suffers from some of these defects. It is self-serving and evasive. His assertion that he does not provide treatment, or advice is contrary to the language he uses in his posts and what his own clients say. It is directly contrary to Dr. McLeod’s evidence that a physician treats a patient when the physician applies medical knowledge and skills to address a health concern. The evidence shows he is making recommendations to clients that is individualized and based on his clinical judgment.

[89] There are other factors that detract from Mr. Makis’ credibility. One is engaging in personal insults directed at people whose actions displease him: accusing Dr. McLeod and others

of being pedophiles; accusing the CPSA, its employees and its counsel in engaging in a conspiracy with Danielle Smith (Premier of Alberta) to criminalize ivermectin and “murder” cancer patients; calling Justice Yamauchi “corrupt” and accusing him of taking part in a “rigged” or fraudulent hearing. Some of these insults were published on the internet and indicate a reckless indifference to truth.

[90] Another concern is a certain looseness in the presentation of pertinent facts. His CV shows him obtaining his medical degree in 2005. He agrees that he left the Cross Cancer Institute in 2016. In his August 12, 2025, affidavit, he states that he has not engaged in the practice of medicine since 2019. Yet the “Notice of Intent to Approve Licensure With Conditions,” which is based on his application file, indicates that his background includes “His practice of medicine in Canada of more than twenty years ....” The math does not add up, unless one counts activity since 2019. He speaks of having obtained a medical license in Florida as of February 6, 2026, but the “Notice” clearly indicates that the licensure is subject to a condition that he obtain a US social security number and, by its own terms, as of February 12, 2026, had yet to issue.

[91] I appreciate that the testimonial deponents are trying to be helpful. I don’t know nor can I discern from their affidavits whether the difference between providing medical advice and treatment and providing health information was explained to them and by whom. Moreover, they are only ten people out of universe of a reported 8,000 or so and I don’t know what criteria were used for selecting them or whether they had the same experience as all the others.

[92] In the result, I cannot rely on Mr. Makis’ denial of providing medical treatment to members of the public.

## N. Outcome

[93] Mr. Makis is a well-educated person. The August 15, 2025 Order is clear. There is no ambiguity about what it requires him to do or how it should be understood. Mr. Makis was represented by his current counsel at the time. He deposes that he has taken steps to comply with the Order. Accordingly, I am satisfied beyond a reasonable doubt that the first two requirements of *Carey* framework are met. What I must determine is whether the third element has been proven: that he has deliberately breached the Order.

[94] Mr. Makis uses semantics to skirt the operation of the Injunction Order. He says he has “clients” rather than “patients” although he does use the word “patient” as well to refer to the people to whom he provides services. He says he is only providing “information” and “research” and not “advice” or “treatment”. Yet the evidence is clear that the information given is intended to and does influence or induce a change in the course of treatment for some individuals, even where other health professionals are involved. He concedes that he receives and reviews patient records and test results in individual cases and does individual consultations by email or online. I take judicial notice here that medical doctors these days typically use alternative communication modes such as email and Zoom in place of and in addition to traditional office visits. Mr. Makis did not challenge or controvert Dr. McLeod’s characterization of “practicing medicine” as including consultations where the skill and qualifications of a physician are held out and advice given to guide the course of care.

[95] I also agree with the CPSA that the activities of Mr. Makis, described by himself on X, YouTube and LinkedIn fall within the definition of the “practice of medicine” as set out in s 3(1) of Schedule 21, in particular “assess[ing] the physical, mental and psychosocial condition of

individuals to establish a diagnosis, “assist[ing] individuals to make informed choices about medical and surgical treatments, and “treat[ing] physical, mental and psychosocial conditions.” He might try to use different words than those in section 3(1) to characterize his activities, but the effect is the same. These activities occur in the context of Mr. Makis purporting to operate a “clinic”. He said in questioning that he does not operate a clinic even though his online material states that he does.

[96] One must look at the substantive nature of the impugned activity, not the labels used by the actor. Calling something “health coaching” does not mean that someone is not practicing medicine as defined in the *HPA*.

[97] During his questioning, Mr. Makis described what he does when he conducts a consultation, which includes reviewing a client’s test results and patient records and giving advice. He provides customized treatment protocols. All of this activity cannot be anything other than deliberate. Nor are they accidental or trivial as Mr. Makis would have me believe.

[98] What Mr. Makis has done is test the limits of the Order. He tests the tolerance of the CPSA for the unauthorized practice of medicine in the Province and that of Court for non-compliance with its Order.

[99] Having regard to the totality of the evidence on the record, I am satisfied beyond a reasonable doubt that since the granting of the Injunction Order, Mr. Makis has engaged in the “offering or providing any health services to the public including, but not limited to, offering or providing advice or consultations regarding cancer treatment” contrary to the express language of the Injunction Order. I am further satisfied that in so doing, Mr. Makis has as an unauthorized person engaged in the practice of medicine, as that term is characterized by Dr. McLeod and defined in the *HPA*. This conclusion emerges not just from reviewing the social media extracts that I say are proven to originate from Mr. Makis and the emails forwarded to Dr. McLeod, but also in large measure his own oral questioning evidence concerning the health coaching consultations.

[100] I also find that based on the CPSA evidence extracted from the internet but excluding the Facebook posts, the CPSA has proven beyond a reasonable doubt that Mr. Makis continues to make use of or apply prohibited titles and terms to himself, whether directly, by implication or by omission, and has done so deliberately.

[101] Therefore, I find that the third element of the *Carey* test is established beyond a reasonable doubt and that Mr. Makis is in contempt of the August 15, 2025 Order.

[102] To be clear, the risk to the public lies in the unauthorized practice of medicine, which consists of providing medical services to the public without a license and otherwise representing himself to the public as a licensed physician, not in disseminating research or other information about ivermectin or any other drug. Proof of actual harm to one or more actual persons is not required if there is proof of the prohibited act. It is the act itself that is the harm.

[103] I take no issue with the health improvements reported by the testimonial deponents. The effectiveness or not of any cancer drug, whether it is a repurposed drug or otherwise, is beyond the purview of this Court to comment upon.

## O. Sanction

[104] The CPSA asks that, based on the contempt power found in the Rules as interpreted in *Dreco Energy Services Ltd v Wenzel*, 2004 ABQB 517 at para 52 citing *Hover v Metropolitan Life Insurance Co.* (1999), 1999 ABCA 123 at p 34, that I immediately impose a sanction of imprisonment. The imprisonment sanction under Rule 10.53(1) contains options: an indeterminate period until the contemnor purges the contempt or not more than two years. The CPSA suggests that based on the history of Mr. Makis' conduct, nothing short of imprisonment will send the message.

[105] The Court of Appeal said in *Demb v Valhalla Group Ltd*, 2016 ABCA 172 at para 55 that the degree of contumacy (or stubborn refusal to follow a Court Order) defines penalty. The Court stated:

Contumacy, or lack thereof, goes to the penalty to be imposed after a finding of contempt: *Carey* at para 38. In assessing contumacy, context is important. In *McDonald Estate*, 2012 ABQB 704, 552 AR 308, the court, at para 55, lists a number of factors to be taken into account in determining the penalty for contempt. These include:

1. Whether there was deliberate defiance of a Court order or whether there was an inadvertent failure to comply with the Court order;
2. The role of legal counsel;
3. Where there has been a failure to give discovery, the object of the exercise is more to secure the discovery rather than to punish;
4. Attempts to purge contempt or to apologize are relevant;
5. The entire context in the history of the litigation;
6. The amount of reasonable thrown-away costs properly incurred;
7. The nature of the contempt; and
8. The degree of culpability of the contemnor.

See also *Michel v Lafrentz*, 1998 ABCA 231, 219 AR 192 at paras 31-32 and *Dreco Energy Services Ltd v Wenzel*, 2005 ABCA 185, 371 AR 11 at para 12.

[106] As stated, Mr. Makis' persistence in providing medical advice and treatment without a license and using prohibited titles and terms is deliberate. He has attempted to outsmart the Court and the CPSA by relying on "weasel words" to avoid accountability and gloss over the substance of what he is actually doing.

[107] I agree that a fine or costs award is not a sufficient deterrent. Mr. Makis has already disregarded a substantial costs award made against him by the CPSA because he does not agree with it.

[108] Nonetheless, imprisonment is drastic without at least giving the contemnor a chance to right the wrong. Accordingly, I will apply the bifurcated process set out in *Carey* and *Lymer* to provide Mr. Makis with the opportunity to purge his contempt before imposing a drastic sanction.

[109] With regard to the health coaching business, Mr. Makis must immediately cease providing medical advice and treatment and otherwise practicing medicine without a license. With respect to Mr. Makis' online presence, he shall have 72 hours within which to remove all offending titles, initials and abbreviations, regardless of whether the content was originally posted by him or reposted by him. The 72 hours will start at 12:01 a.m. on the day after the issuance of this decision.

[110] Mr. Makis is therefore afforded a reasonable opportunity to purge his contempt. In the event he does not do so, or reoffends, the CPSA may, upon proof by affidavit of his non-compliance with the Injunction Order, obtain a warrant from a Justice of this Court for the arrest and detention of Mr. Makis and he shall thereafter be brought before the Court to answer. This is the same approach I employed in *West Edmonton Mall Property Inc v Proctor*, 2020 ABQB 477 at paras 24 and 25. As I said in that case, the the risk of arbitrary detention is adequately mitigated by the requirement that a KB Justice first be satisfied that a breach has occurred before the warrant issues, when balanced against the risk of Mr. Makis breaching the injunction Order, which is substantial based on a demonstrated record of contumacy.

## **P. Permanent Injunction**

[111] The Court of Appeal in *Katelnikoff v Irricana (Town)*, 2024 ABCA 205 at paras 32-34, 37 stated that the most important factor in a permanent injunction application is the existence of a legal right on the part of the Applicant. The presence of irreparable harm and whom the balance of convenience favours are factors to be considered in the Court's determination of whether final injunctive relief ought to be granted. See also: *Giesbrecht v Prpick*, 2025 ABCA 222 at para 15; *Google* at para 66.

[112] The CPSA, in the discharge of its public interest mandate, has the right to insist that all those practicing medicine and using protected titles in Alberta are properly licensed as regulated members under the *HPA*. In my view, the legal right is clearly established. As a regulatory body, the CPSA has standing and the Court has jurisdiction to grant a Permanent Injunction for public protection purposes to restrain unauthorized persons from practicing a regulated profession: *Law Society of Alberta v Beaver*, 2016 ABCA 290 at para 28.

[113] At one point in his video entitled "2025-12-09 Update on the largest Ivermectin Cancer Group in the world. 500 days and 7500 patients!" (found at Exhibit D of Ms. Lanz's February 4, 2026, affidavit), Mr. Makis is heard rhetorically asking why the government, the Courts and the medical regulator aren't able to stop him from helping cancer patients. He answers the question by saying "the reality is that they're the evil people, they're the bad guys, the villains, the people breaking the law." He is basically telling his video audience that he cannot and will not be stopped from engaging in his activities by any institutional authority, including the Courts. This

is a declaration of his contempt. It is clear evidence of his intention to continue breaching the existing Order and why a Permanent Injunction is necessary.

[114] In exercising discretion, I have regard to the following:

- In terms of irreparable harm, there is no way the CPSA or the public interest can be adequately compensated by damages;
- The balance of convenience clearly favours the CPSA as Mr. Makis has no claim to being able to practice medicine or use protected titles in Alberta without being a regulated CPSA member. No one is prevented from seeking out information about ivermectin or accessing care and treatment from a properly licensed health professional.
- That Mr. Makis has proven persistent and unrelenting in practicing medicine in Alberta without a license despite the Injunction Order.

For other examples where permanent injunctions were issued to curtail persistent, unrepentant behaviour, see *West Edmonton Mall* at para 15; *Durand v Higgins*, 2024 ABKB 108 at para 167.

[115] I grant a Permanent Injunction on the same terms as the Interim Injunction. The Permanent Injunction is enforceable in the manner described above (i.e. the warrant process).

[116] A Permanent Injunction is named as such because it is a final order, not because it lasts forever: *Muslim Counsel of Calgary v Mourra*, 2018 ABQB 118 at para 99. It is in effect until such time as Mr. Makis is reinstated as a regulated member of the CPSA or so long as Mr. Makis is a resident of Alberta.

[117] I wish to be clear that I am not directing Mr. Makis to leave the province or the country. He has the right to live anywhere he wishes in Canada. But he does not have the right to practice medicine or use protected titles without a license, at least in Alberta and likely every other Canadian jurisdiction. Similarly, he does not have the right to breach explicit court Orders.

[118] From viewing his posts and videos, I well appreciate that Mr. Makis is passionate about and committed to his work with cancer patients. Equally, I understand that he believes profoundly in the validity and efficacy of the therapies that he promotes. But at its core this case is not about promoting or discouraging the use of any drug or therapy in the cancer realm. No matter what Mr. Makis may think, it is not a case about silencing a vocal advocate who espouses a therapy that might be considered controversial by the mainstream. It is a case about regulation of the medical profession in Alberta and who, under law, is entitled to practice medicine and dispense medical advice and treatment while in Alberta.

#### **Q. Costs**

[119] The CPSA is the successful party on both aspects of its application. It is presumptively entitled to costs. Matters that do not involve a specific sum, like this injunction and contempt application, generally fall under Column 1 of Schedule C. I have regard to the factors listed in Rule 10.33. The matter was pursued by the CPSA in the public interest and was therefore important. While the issues were not complex, the evidence was voluminous. The CPSA's counsel was put to considerable work. The entirety of the litigation was unnecessary because Mr.

Makis was at all times unlicensed by the CPSA and had no right to practice medicine or use protected titles in Alberta.

[120] I direct that Mr. Makis pay costs to the CPSA for all steps in this matter on the basis of 3X Column 1.

[121] I thank both counsel for their clear and concisely written briefs and able in-court presentations.

Heard on the 18<sup>th</sup> day of February, 2026.

**Dated** at the City of Edmonton, Alberta this 4<sup>th</sup> day of March, 2026.

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**Douglas R. Mah**  
**J.C.K.B.A.**

**Appearances:**

Mylène D. Tiessen, Peacock Linder Halt & Mack LLP  
for the Applicant

Catherine Christensen, Valour Law  
for the Respondent

## Appendix A

### Examples of social media extracts cited by the CPSA in its brief. (Note: Mr. Makis denies posting any of the Facebook material.)

#### Paragraph 19

19. Specific examples, in chronological order, may be summarized as follows:
- (a) September 11, 2025: On “TalkTruth” Makis, among other things, speaks about how busy he is with his clinic including with his cancer patients, neurological patients and patients with Parkinsons, dementia and autoimmune diseases and how “the attacks from government have not slowed him down”; about how he has been operating for about 1 year. He says that he helps patients with ivermectin, fenbendazole and mebendazole – antiparasitic drugs and how ow he has a large clientele. He describes how the Premier is trying to “destroy my cancer clinic” and “destroy my patients”. He refers to himself as a “Canadian physician”.<sup>8</sup>
  - (b) September 12: Makis reposts a post from another account holder that states “And yes, “@MakisMedicine is an MD oncologist”
  - (c) September 24 and October 5: Makis posts about his attendance at a speaking engagement and attaches a poster with his photo where he is described as “Dr. William Makis Radiologist, Oncologist, Cancer Researcher”<sup>10</sup>
  - (d) September 30: On “The Broken Truth.tv” Makis refers to himself as a “Canadian physician, board certified in nuclear medicine, radiology and oncology”; that he “developed dosing protocols” for Ivermectin and other antiparasitics for use in cancer; references the drugs he “uses” in his “cancer protocols”; and discusses his “cancer clinic” and his “patients”.<sup>11</sup>
  - (e) October 3: On “The Matt Gaetz Show” Makis is introduced as “Doctor William Makis”. Makis states that over the past year he has “built the largest Ivermectin cancer clinic in the world.” He adds:

We have over six thousand five hundred patients  
what we follow directly. It’s been extremely busy.

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<sup>8</sup> Affidavit of C. Forestier, filed December 19, 2025, at Exhibit “L” – “Talk Truth” (starting at 01:38 and at 04:44 and 09:55)

<sup>9</sup> Affidavit of C. Forestier, filed December 19, 2025, at Exhibit “D”

<sup>10</sup> Affidavit of C. Forestier, filed December 19, 2025, at Exhibit “D”

<sup>11</sup> Affidavit of C. Forestier, filed December 19, 2025, at Exhibit “L” – “The Broken Truth.tv” (at 03:00-06:30; 14:45- 16:00; 32:30-35:30; and 39:30-50:00)

I get cancer patients coming to me from every corner of the globe. Obviously, as you know most of my cancer patients are from the United States and Canada...<sup>12</sup>

- (f) October 6 and 14: Makis posts a testimonial regarding Ivermectin and Fenbendazole and includes an advertisement about Ivermectin “and other essential medications”. The advertisement contains his photograph and below it “Dr. William Makis MD”.<sup>13</sup> It should be noted that in Canada, Ivermectin, Fenbendazole and Mebendazole must be prescribed by a regulated health professional and dispensed by a pharmacist.<sup>14</sup>
- (g) October 22: On “The Shannon Joy Podcast”, Makis is again introduced as “Doctor William Makis”. He states:

I always tell cancer patients, you know, come early, don’t wait, don’t get talked out of trying repurposed drugs like Ivermectin, Mebendazole, Fenbendazole. Get them as early as you can, start them as early as you can. And you can do them with other treatments, you can do them with radiation, you can do them with chemotherapy, immunotherapy, you don’t have to skip any of your conventional treatments...

Makis goes on to discuss individual patients and the results they had in his clinic. He states:

In my clinic, I have a response rate of about 75 to 80 percent, which means about 75 to 80 percent of cancer patients have some sort of benefit ... most patients come to me when they are at stage 4 ... we still maybe get a quarter of these patients completely cancer free, and then the rest of them we can stop the cancer growth ...<sup>15</sup>

- (h) November 1 and 19: On his X account, Makis states that he is on the “cuttingedge of Cancer Treatment”<sup>16</sup>

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<sup>12</sup> Affidavit of C. Forestier, filed December 19, 2025 at Exhibit L – “The Matt Gaetz Show” (starting at 0:55:00)

<sup>13</sup> Affidavit of C. Forestier, filed December 19, 2025, at Exhibit “D”

<sup>14</sup> Affidavit of C. Forestier, filed December 19, 2025, at para 8

<sup>15</sup> Affidavit of C. Forestier, filed December 19, 2025 at Exhibit L – “The Shannon Joy Podcast” (0:37:30 – 1:03:00, 43:30-45:10; 46:55-48:20; and 50:20-52:00)

<sup>16</sup> Affidavit of Stephanie Lanz sworn February 4, 2026, at Exhibit B

- (i) November 4: Makis posts, “It’s full time work for me, cleaning up mainstream Oncology’s disasters.”<sup>17</sup>
- (j) November 10: Makis posts about treating children.<sup>18</sup>
- (k) November 10: Makis advertises that he is giving a “Keynote Speech at the Reclaiming Health and Longevity Symposium being held on November 11-12, 2025!”. A copy of webpages for the symposium includes a photo and a caption describing Makis as Dr. William Makis, MD, FRCPC (Canada) Nuclear Medicine Oncologist and Radiologist.<sup>19</sup>
- (l) November 17: Makis posts, “I am very excited to be part of shaping the future of Cancer Care.”<sup>20</sup>
- (m) November 24: Makis participates in an online discussion as an “expert guest” with “The World Council for Health. On the screen, Makis is identified as “Dr. William Makis MD” and is introduced as a “triple board-certified medical oncologist, diagnostic radiologist and nuclear medicine specialist”.<sup>21</sup>
- (n) December 7: Makis sends an email to former CPSA Registrar, Dr. Scott McLeod, with the following subject line, “BREAKING NEWS: Our Ivermectin Cancer Clientele has just reached 7500 Cancer patients” and in the email he states:

We have been helping cancer patients from around the world for 500 days now!...7500 Cancer patients including 100 CHILDREN We have the world’s largest cutting edge Cancer program, utilizing the most promising repurposed drugs: Ivermectin, Mebendazole, Fenbendazole & more. There is nothing like it anywhere in the world! [Emphasis in original]<sup>22</sup>

### **Paragraph 21**

21. Makis breaches continue to the present. For example, as at February 6, 2026, Makis’ “official” YouTube channel contained various videos which include:

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<sup>17</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “B”

<sup>18</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “B”

<sup>19</sup> Affidavit of C. Forestier filed December 19, 2025, at Exhibits “F” (page 79) and “H”.

<sup>20</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “B”

<sup>21</sup> Affidavit of C. Forestier, filed December 19, 2015 at Exhibit L – “The World Council for Health, Oncologists Sounds the Alarm: Investigating the ‘Turbo-Cancer and Vaccine Link’ (at 24:12 and 26:30-44:17)

<sup>22</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “A”

- (a) The Florida Surgeon General speaking about Ivermectin and his discussions with “Dr.” Makis from Canada and “Dr.” Makis’ experiences treating thousands of cancer patients.<sup>23</sup>
- (b) Interview of Makis where the interviewer asks Makis about his experience “as being someone who spends a lot of your time actually treating these turbo cancers”. He also asks Makis regarding what results he is seeing and what he recommends.<sup>25</sup>
- (c) A video of Makis himself where he introduces himself as “Dr. Makis” and describes himself as “a Canadian physician living in Edmonton, Alberta” and goes on to say that he is a radiologist, oncologist and cancer researcher and how he has devoted the last 18 years of his life to helping 1000s of cancer patients not just in Alberta but all over the world.<sup>26</sup>
- (d) Interview of Makis where his name is listed as “Dr. William Makis x @MakisMD - MakisMD.substack.com” and where he speaks about the use of Ivermectin, Fenbendazole and Mebendazole. He also speaks about how he started doing consultations with Ivermectin and cancer patients, that he has the largest Ivermectin Cancer Clinic in the world and has over 6000 patients.<sup>27</sup>
- (e) A December 9, 2025 video of Makis himself where he provides an update on the “largest Ivermectin Cancer Group in the world” and that in 500 days he has helped 7500 patients.<sup>28</sup>
- (f) Makis providing a Christmas update by video claiming to have 7800 cancer patients. He describes how it’s been the busiest year of his life.<sup>29</sup>

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<sup>24</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” - “Florida Surgeon General Dr. Joseph Ladapo

discusses my Cancer Research and work and new Florida Funding!” (at 0:20 – 01:07)

<sup>25</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” – “Man in America Interview with William Makis (aired Nov. 18, 2025)” (starting at 00:01)

<sup>26</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” – “William Makis legal fund defending vs Alberta Premier Danielle Smtih and Alberta Health Services” (starting at 00:01 -00:26)

<sup>27</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” – “Alex Jones Show interview aired on August 12,2025 – how my deep dive into repurposed drugs started” (at 00:48 and starting at 03:09)

<sup>28</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” – “2025-12-09 Update on the largest Ivermectin Cancer Group in the world. 500 days and 7500 patients!”

<sup>29</sup> Affidavit of Stephanie Lanz, sworn February 4, 2026, at Exhibit “D” – “MERRY CHRISTMAS 2025! A little update...” (at 00:23-00:55 and 01:48-01:58)