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# When medicine went wrong: how Americans were used illegally as guinea pits

## USA Today (Society for the Advancement of Education), March, 1995 by Judith Braffman-Miller

Ms. Braffman-Miller is a free-lance journalist whose articles have appeared in Consumer Reports, The Humanist, Ms., Science Digest, New York, and USA Today.

IN JANUARY, 1946, a four-year-old Australian, Simeon Shaw, was diagnosed as having a highly malignant form of bone cancer. In a desperate effort to save the boy's life, his parents decided to bring him to the U.S. for further diagnosis and treatment. The family had been referred to the University of California Hospital in San Francisco.

Once in America, Simeon did not receive the life-saving medical treatment his parents desperately sought. Instead, he was ensnared in a hush-hush, extremely unethical medical experiment. Simeon was one of 18 supposedly dying patients injected with deadly, radioactive plutonium by scientists working for the Manhattan Project, the organization that produced the atomic bomb. Concerned about the dangers of radioactive material on nuclear workers, U.S. government officials wanted to discover how the human body eliminated plutonium.

Simeon was two months short of his fifth birthday when he was injected on April 26, 1946, with 0.169 microcuries of plutonium 239, a dose of radiation nearly 24 times what the average person receives in 50 years. About a week later, bone, blood, and tissue samples were taken from the child. Samples were collected at other times as well. Simeon Shaw died eight months after the injection.

Many unsuspecting Americans were exposed to radiation in experiments which provided no medical benefit to the subjects. In the years following the atomic bombings of the Japanese cities Hiroshima and Nagasaki, the U.S. military and nuclear weapons production industry sought data concerning the biological effects of plutonium and radioisotopes of the fallout resulting from atmospheric nuclear tests. Plutonium injections in human subjects, such as Simeon Shaw, had no purpose other than providing information for determining safety standards for weapons production. Plutonium has no medical uses.

According to Rep. Philip R. Sharf (D.-Ind.), former chairman of the House Subcommittee on Energy and Power, "For the public at large, the evidence that some of these experiments were scientifically and ethically irresponsible is chilling. Today, as in the 1940s, there are few settings in which any of us is more vulnerable than in dealing with the medical establishment."

Some human radiation experiments were conducted in the U.S. in the 1940s and 1950s, but others were performed during the supposedly better enlightened 1960s and 1970s. It is possible that the program involved more than 1,000 people. These experiments were conducted by the Manhattan Project, the Atomic Energy Commission (AEC), and the Energy Research and Development Administration, all predecessor agencies of the Department of Energy.

During 1945-47, as part of the Manhattan Project, patients who were diagnosed as having diseases that gave them life expectancies of less than 10 years were injected with plutonium. Besides the University of California Hospital, such studies were carried out at the Manhattan District Hospital, Oak Ridge, Tenn.; Strong Memorial Hospital, Rochester, N.Y.; and the University of Chicago. Despite the original diagnoses, seven of the 18 patients lived longer than 10 years and five survived for more than 20. Internal investigations by the AEC found that informed consent was not granted in the initial experiments, since even the word "plutonium" was classified during World War II, and living patients were not informed that they had been injected with plutonium until 1974.

On July 18, 1947, three doctors and a nurse entered Ward B at the University of California Hospital and injected plutonium into 36-year-old Elmer Allen's left leg. Three days later, the leg was amputated at mid-thigh. His hospital chart states that the limb was sent to pathology for radiological study. Allen had been misdiagnosed as having a pre-existing bone cancer. In fact, he had fallen from a train in the late summer of 1946 and had injured his left knee. Hence, his condition was far from terminal. Allen lived until June 10, 1991, with horrible complications resulting from the plutonium experiment. He suffered from alcoholism, epileptic seizures, and eventually was diagnosed as paranoid schizophrenic, which his family doctor believes resulted from his feelings about how he had been exploited in the plutonium experiment.

Most of what the public now knows about the plutonium experiments was uncovered by Albuquerque Tribune reporter Eileen Welsome, who won the Pulitzer Prize for national reporting on April 12, 1994. Welsome spent more than six years tracking down victims whose names long had been classified as top secret.

In 1987, she chanced upon a brief reference to the plutonium experiment involving human objects in a footnote to a declassified report on animal experimentation at what was called the Weapons Laboratory at Kirtland Air Force Base in Albuquerque, N.M. According to Welsome: "I was stunned by the idea that human beings had been injected with plutonium and began gathering as much available information as I could.... I wanted to learn more. Who were these people?"

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Unearthing the secret

Fighting the government all the way, Welsome looked for the patients who were known only by such code numbers as "CAL-3," "HP-3," and "CHI-1." She sought help from historians, genealogists, and cemetery employees. "Eventually, I identified five of the 18 plutonium patients. They were a homemaker, a laborer, a house painter, a railroad porter, and a minor political official in upstate New York. Since our series was published in mid November [1993], two other names have been identified. NBC's `NOW' uncovered the name of Simeon Shaw.... Valerie Williams, a reporter for WFAA in Dallas, fin early 19941 uncovered the identity of Arthur B. Hubbard, a Texas man injected with plutonium in the 1940s at Billings Hospital at the University of Chicago."

A November, 1986, Congressional Report, American Nuclear Guinea Pigs: Decades of Radiation Experiments on U.S. Citizens, revealed that there were 31 experiments in which there was "the frequent and systematic use of human subjects as guinea pigs for radiation experiments.... The chief objectives of these experiments were to directly measure the biological effects of radioactive material; to measure doses from injected, ingested, and inhaled radioactive substances; or to measure the time it took radioactive substances to pass through the human body." The report further notes: "Human subjects were captive audiences or populations that experimenters might frighteningly have considered expendable': the elderly, prisoners, hospital patients suffering from terminal diseases or who might not have retained their full faculties for informed consent. For some human subjects, informed consent was not obtained or there is no evidence that informed consent was granted. For a number of these same subjects, the government covered up the nature of the experiments and deceived the families of deceased victims as to what had transpired."

According to Christine K. Cassel of the University of Chicago Department of Medicine and past president of Physicians for Social Responsibility, "Every major ethicist writing about human research argues that it is dangerous to the moral fabric of society to consider potential social goals as higher values than respect for the individual, especially in the framework of research potentially

affecting the physical or psychological integrity of the person. Individuals are called on to relinquish autonomy in society for goods such as civic government, education, and public health standards. Becoming the subject of someone else's experiment, however, is such a dramatic infringement on personal civil rights, that it may only be done ethically in the context of fully informed consent and voluntary altruism."

During the Cold War, the U.S. military wanted to know, in the event of a nuclear detonation, how much radiation a soldier could endure before becoming disabled. The Pentagon turned to the University of Cincinnati for help. There, from 1960 to 1971, radiologist Eugene L. Saenger and his associates tried to answer the Pentagon's question by performing experiments on 88 cancer patients aged 9-84, exposing them to massive doses of radiation and then recording their physical and psychological responses.

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The Cincinnati study probably resulted in more deaths than any other government-sponsored experiment. Saenger's patients were given the highest doses of whole body radiation, and it is believed that more than 20 patients died as a result. Furthermore, the Cincinnati study selected subjects who were uneducated, had low intelligence, did not know how to follow instructions, had tumors that were resistant to radiation therapy, and were of relatively good nutritional status. Sixty-two of the Cincinnati patients were black.

One of Saenger's subjects was William L. Larkins, who died in 1971. According to his son, Joe Larkins, who was 30 years old when his father died, "I know that my father knew something was very wrong with the treatments being given to him at Cincinnati General. He even asked me, `Son, what are they doing to me? They're trying to kill me!' That's how bad the pain he endured was. He suffered so needlessly."

What angers Joe Larkins is that the Pentagon contacted the doctors and hospital in order to test the effects of radiation on the human body. "Everyone realizes that Cincinnati General Hospital, now the University of Cincinnati Hospital, treated many low-education, low-income patients. I guess they felt that, in some way, the fact that these patients were not rich, upperclass citizens, gave them the right to experiment with them."

A 1972 report by three University of Cincinnati faculty members who evaluated the experiment noted that as many as 25% of the patients died of radiation poisoning. The experiment finally was stopped in 1972, after the details were publicized extensively and Sen. Edward Kennedy (D.-Mass.) started investigating it.

Assistant professor of English Martha Stephens was one of the faculty members. After Edward Gall, director of the university's medical center, reluctantly released the desired documents to Stephens to be reviewed by the Junior Faculty Association, she went back to campus and "read for about an hour, and ... it was as if I could hardly recognize what was around me. Everything I saw looked different to me. I was used to reading in plays and novels about tragic deaths, full of pity

and sorrow, but I was not used to this pity, this sorrow. I felt that these experiments had to be stopped."

Although the medical school claimed that the cancer patients they used were terminal and expected to live only a few months, Stephens notes: "This does not appear to be the case. The patients who survived the radiation often lived several years. One woman with cancer of the tongue was irradiated in 1961 and lived at least five years after the radiation. The exact cause of her death is uncertain. A later group of subjects were chosen specifically because they were in relatively good shape, were not elderly, and could be interviewed in their homes and workplaces about coming in for this `treatment.' They were working, eating normally, with good blood counts. They were definitely not bed-ridden, extremely feeble, or about to die." Medical researchers from the 1930s through the 1950s at several centers, including

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Memorial Sloan-Kettering in New York, already had determined that whole body radiation (WBR), such as that used in Saenger's studies, was not effective in the treatment of most cancers. Hence, the medical usefulness of Saenger's study was questionable and misrepresented. Even though Saenger and his colleagues contended that cancer treatment was the purpose of their study, the researchers themselves described another purpose for their experiments in their reports to the Department of Defense: "To provide knowledge of combat effectiveness of troops and to develop additional methods of diagnosis, prognosis, prophylaxis, and treatment of these injuries."

An examination of the so-called "treatment" methods used by Saenger in his studies reveals much about the true purpose of the experiments. Patients received treatment while sitting with legs raised and head tilted slightly forward. This position mimics that of a soldier in a protective fetal position. The powerful single doses that each of the cancer patients received resembled the dose rate of a nuclear blast. In fact, the researchers wrote in 1969: "Whenever possible indirectional radiation will be attempted since this type of exposure is of military interest." This procedure was not the way physicians used radiation in therapeutic applications.

Moreover, in real cancer therapy, the ill-effects of successful irradiation consist of symptoms from the radiation, as well as from the widespread destruction of tumor cells. Saenger's irradiated cancer patients had radioresistant tumors, allowing researchers to be sure that the symptoms they suffered were caused by the radiation only, not complicated by the effects of the tumor destruction.

In addition, the Cincinnati researchers denied the patients treatment for the nausea and vomiting that resulted from WBR. This was apparently so abhorrent to the hospital staff, used to caring for patients, that the researchers had to concoct a special form to ensure that the doctors, nurses, and other personnel would not perform their habitually compassionate job of caring for the sick. The form instructed hospital staff to ignore their normal feelings of humanity and not ask Saenger's patients about the signs and symptoms of radiation poisoning. It stated: "Do not ask the patient whether he has these symptoms." The form went on to order the staff to record the time, duration, and severity of these symptoms, but the researchers offered no treatment.

### Isolating patients

According to another Defense Department report, the researchers sought to isolate the patients psychologically. The subjects resided in the psychiatry unit instead of the tumor ward. The report states: "The environment is far more attractive and there are no other patients receiving radiation therapy with whom the patient can exchange experiences."

The patient population chosen by Saenger probably was incapable of giving informed consent and was not told about the experimental risks. In their 1969 paper, the researchers stated that pre-irradiation analysis of the experimental subjects revealed that they would have difficulty obtaining true informed consent from the study's unknowing participants because "Relevant intellectual characteristics of the patient sample were as follows: a low educational level ... and a strong evidence of cerebral organic deficit in the baseline [preirradiation] measure of most patients."

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Stephens noted that "We are a class-ridden country, and eventually it should not surprise us when our class conflict results in grievous actions like those of the [Cincinnati] doctors, actions, that is, of one potent and protected class against another that is powerless. It is a question here of conflict between wealthy doctors and administrators--in a public institution insulated against public accountability-and common working people who could not afford doctors of their own choosing."

One of the most repugnant of Cold War era experiments was carried out on mentally retarded children at the Fernald State School, Waltham, Mass., during the 1940s and 1950s. Nineteen boys believed they were members of a science club, but they actually were drinking radioactive milk. Secretary of Energy Hazel O'Leary had this to say about such experiments after declassifying the reports: "The nation has now begun to debate important questions raised by some of these experiments--questions about the role of secrecy in a democratic society as well as the need to have proper safeguards in place to ensure the rights of individuals to determine their own fates. We must prevent anyone in America--whether they are uneducated or poor or mentally retarded or incarcerated--from being used as guinea pigs."

Christine Cassel points out that "the ethical principles of scientific research were not invented yesterday. The Nuremberg Principles arising from the trial of Nazi war criminals for crimes including human experimentation were well-known to all American scientists as soon as they were published."

Furthermore, in 1958, the United Nations adopted Article 7 of the draft Covenant on Civil and Political Rights. It stated that "No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation."

However, during 1945-75 in the U.S., there appears not to have been clear standards or monitoring of the process of informed consent and its documentation. Doctors were considered

trustworthy, and when complete disclosure was not provided, rationalizations about the "patient's peace of mind" or "minimal risk" were given. In some cases, "national security" was considered over-all permission for secrecy and even deception in research practices. According to Cassel, "Foregoing the Nuremberg Principles was done with a `larger good' in mind. For these reasons, when the individual studies are examined, particularly those with clear military sponsorship and purpose, it may be difficult to establish their compliance with Nuremberg Principles."

In January, 1994, the White House launched a full-scale investigation into these Cold War radiation studies. Pres. Clinton issued an executive order to establish an Advisory Committee on Human Radiation Experiments. Composed of outside-government experts in medicine, science, and ethics, it provides advice and recommendations on human radiation experiments conducted by the U.S. government since the 1940s. This is part of a wider push by the Clinton Administration to open aspects of the government to the public and declassify some Cold War mysteries. Recommendations by the Administration's task force could lead to proposals for compensation of nuclear victims.

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As Martha Stephens asks, "if sacrifices were necessary, why could not the investigators have experimented on other doctors or on themselves?"

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