Fat Control Campaign is Badly Flawed

"Eating right isn't just important to you. It's important to [those] who love you." — NCEP radio spot, Eating Right

"Does thou think, because thou art virtuous, there shall be no more cakes and ale?" — Sir Toby Belch, Twelfth-Night

Cholesterol is on the tip of every tongue — where calories once cavorted — because of a public health drive to curtail the amount of this stuff that reaches peoples’ tummies, bloodstream, and coronary arteries. The laudable aim of this effort, called the National Cholesterol Education Program (NCEP), is to reduce the grim toll of chest pain (angina pectoris), heart attack, and death that appear to be due to high cholesterol levels in the body.

The reason for targeting cholesterol is this:

When a pathologist, at the autopsy table, slits a heart attack victim’s coronary arteries with a blade and pokes inside with an instrument or gloved fingertip, he or she often finds a wad of fatty, porridge-like stuff clogging one of the vessel walls, narrowing or wholly blocking its lumen. This is atherosclerosis. The final narrowing may be due to a blood clot. But the porridgy stuff, or atheroma, that has built up through the years is composed largely of cholesterol.

Increasing consumption of cholesterol and, more important, of a class of fats called saturated fatty acids, has been shown to cause atherosclerosis, and increase coronary heart disease (CHD) risk, as does obesity. So, the researchers and doctors who orchestrate NCEP’s campaign think that lowering body cholesterol burdens — mainly by diet or drugs — as well as weight reduction, if necessary, will lower the risk and save lives.

This cholesterol hypothesis seems to make sense. Much of it now is supported by data. If Americans could subsist on vegetables and rice flavored with a little chicken or fish, as lean, low-heart-risk Asian peasants do, they probably would lower their CHD risk accordingly. But can they? Will they?

The NCEP experts, speaking through the National Institutes of Health (NIH) for the federal government, and, professionally, through the American Heart Association (AHA), American Medical Association (AMA) and other such groups, seek more moderate goals in terms of dietary change and reduction of cholesterol in the body. But: One key problem is that they propose it for everybody — all Americans — albeit many are not at heightened CHD risk.

A second problem is that radical dietary change will be required to attain even modest benefits. Americans will have to eat far fewer steaks, eggs and pizzas, and consume far less butter, cheese, milk and ice cream — all good foods that most people love. We will have to eat billions fewer burgers and tons more tofu or other low-cholesterol and low-fat foods.

Nevertheless, 200 million or so Americans who have no apparent signs of heart disease now are being “educated” — meaning they are being advised, frightened and cajoled — into changing the way that they live, and abandoning many simple and nutritious pleasures.

A major problem is that the feasibility of this approach has continued on page 2

Cholesterol Program Needs More Scrutiny

The NCEP crusade against cholesterol affects all Americans. The means proposed is a spartanism that many — including this writer — find distasteful at best. Changing radically the way all Americans eat is one of the most pervasive efforts ever attempted to change personal behavior.

Yet, as journalist Thomas J. Moore noted in his critique, Heart Failure (Random House, 1989), by classifying this effort as “education”, rather than policy, NCEP has been able to proceed without mandate or sanction from Congress or any other representative body. Even among physicians and other scientists, debate on NCEP has been rare outside of its advocates’ home precincts. The press, by and large, has followed, docilely, printing and elaborating NCEP handouts without challenge. The goals of this campaign, and the means proposed to attain them, contain significant flaws. These problems will be analyzed in future issues of PROBE.

This is not to say that the case against cholesterol, broadly speaking, is all wrong. It is not. Neither is it to deny the risk-reducing benefit of lower cholesterol. But many people may not need the measures that NCEP now proposes for everyone. What is more, better corrective methods than stringent diets may be available for those who do.

This PROBE analysis of NCEP thus should not be construed as inviting middle-aged Americans to throw all caution to the wind and pig out at every meal. Our aim is to raise questions and spur critical thinking about this and other issues at the interface between science and medicine on the one hand, and public policy and personal health on the other.

Good eating! Good reading! Good health!

We invite you to keep reading PROBE!
Is This A Menu for Hungry Americans?

A close colleague, and exponent of the NCEP-AHA guidelines, insists we are wrong — and that Americans will not have to subsist on tofu and other dull, lo-cal stuff to be healthy. Ms. Genell Subak-Sharpe, who is co-editor of the Mount Sinai School of Medicine Complete Book of Nutrition (St. Martin’s, 1990), agrees with us that dietary cholesterol is a relatively minor concern. Americans’ total fat intake and the fact that many are overweight are more important, she says.

“Should the feasibility of implementation affect dietary recommendations?” Their answer, basically, was no.

In proposing a regimen similar to NCEP’s, in a huge report entitled Diet and Health — Implications for Reducing Chronic Disease Risks, they said:

“Should the feasibility of implementation affect dietary recommendations?” Their answer, basically, was no.

In proposing a regimen similar to NCEP’s, in a huge report entitled Diet and Health — Implications for Reducing Chronic Disease Risks, they said:

“Should the feasibility of implementation affect dietary recommendations?” Their answer, basically, was no.

Fat Control . . . .

continued from the preceding page

never been tested. There is no direct evidence it will work.

Twenty years ago, a federally sponsored “task force” of experts decided that a population-based study — meaning one conducted with ordinary free-living men, women and children — of whether CHD risk can be lowered by diet would be too costly and too difficult to do. So, says internist Basil M. Rifkind M.D., an NCEP official at NIH:

“No large-scale, long-term, double-blind controlled clinical trial of dietary-induced cholesterol lowering and CHD has been conducted, nor is it likely that such a study is feasible.”

But: These rigors might not all be needed to produce a convincing study. More important, Dr. Rifkind’s doubts about the feasibility of testing a dietary reform that he proposes for all Americans suggest he fears this reform will fail in everyday gustatory practice. He writes in an editorial, in a (12/19) special issue on lowering cholesterol, of the Journal of the American Medical Association (JAMA):

“Those of us whose medical experience is predominantly clinical” — which means they mostly take care of patients — “may harbor some doubts as to whether Americans can be induced to change their diets.”

What is more, buried deep in a newly-published study by Dr. Rifkind and colleagues (Archives of Internal Medicine, April) is this revelation: Half of a large group of physicians whom they surveyed think “the current emphasis on high serum cholesterol [is] producing needless anxiety in their patients.”

The experts not only do not know, but some even seem not to care if their dietary proscriptions can be followed. A Committee on Diet and Health of the National Research Council, recently asked themselves, rhetorically:

“Should the feasibility of implementation affect dietary recommendations?””

In proposing a regimen similar to NCEP’s, in a huge report entitled Diet and Health — Implications for Reducing Chronic Disease Risks, they said:

“Should the feasibility of implementation affect dietary recommendations?” Their answer, basically, was no.

In proposing a regimen similar to NCEP’s, in a huge report entitled Diet and Health — Implications for Reducing Chronic Disease Risks, they said:

“The committee carefully considered the feasibility of designing nutritionally-balanced diets based on its recommendations and, to a limited extent, [considered] the factors involved in the implementation of its recommendations. In general, continued on page 3
however, its recommendations are based on ... scientific principles." Not on what real people realistically can do!

The physicians who direct NCEP have sworn, in the Hippocratic Oath, to “never do harm to anyone.” Like all doctors, they have been told that the benefit of any intervention must far exceed its risk. But they seem to exclude freedom, gustatory pleasure, and human capabilities as outside their professional purview and risk/benefit equations.

This is driven home by a comment made by one critical contributor to the JAMA cholesterol issue. Pediatrician Thomas Newman, M.D., of the University of California School of Medicine, in San Francisco told the New York Times (12/19) the “sad” story of a five-year-old girl who went to McDonald’s with her mother. She held up a french fry and asked:

“Mom, if I eat this fry will my heart get all clogged up with cholesterol, and will I die?”

Psychiatrists Urged To Lead The Fight Against Animal Rightists, Scientology

New Orleans

The biomedical community’s point man in the struggle against anti-scientific and anti-intellectual attacks, psychiatrist Frederick K. Goodwin, M.D., has urged his professional colleagues to play leadership roles in this counterattack. Dr. Goodwin is director of the federal Alcohol, Drug Abuse, and Mental Health Administration. He told participants in the American Psychiatric Association (APA) annual meeting here that, as one group of medical specialists who still are patient-oriented, rather than procedure-oriented, they have the capacity to understand the hold that Scientology and the Animal Rights Movement (ARM) gain on their adherents — and so help find ways to break it.

Dr. Goodwin said he put this challenge to the APA leadership during its meeting here — and was awaiting an answer.

An APA spokesman, John Blamphin, said the organization is concerned by continuing “untruthful” allegations against psychiatry by Scientology and ARM leaders. He cited as “lies” Scientologists’ charges that psychiatrists “use terror and murder,” and are “terrorists.” The APA has agreed to develop a strategy to counteract these charges, he added.

In his talk to some 300 APA members, and in a press conference, Goodwin said he was “particularly worried” by indications of support by Scientology for ARM. He showed as evidence a flyer called “Animal Rights Bulletin,” from the Citizens Commission on Human Rights (CCHR), in Los Angeles; he and Time (May 6) identify CCHR as a Scientology front.

The flyer condemns “inhumane ... animal vivisection,” including “painful and invasive experimentation on animals.” The CCHR’s international research director, Michael O’Brien, discounts Dr. Goodwin’s concern. He said, by phone, that someone in CCHR’s local Los Angeles office had prepared “the animal rights thing” in the flyer. Animal Rights is “not a major concern” of CCHR he said. CCHR, rather, “investigates and exposes psychiatric violations of human rights.”

Mr. O’Brien said CCHR is a separate corporate entity set up by the Church of Scientology. He said he could not comment on Dr. Goodwin’s charge that Scientology is harmful to Americans’ mental health without seeing his speech.

Psychiatrist Goodwin said he can envision a new era of rational, “scientific psychiatry” that will restore mental health for many despairing Americans.

A major stumbling block, Dr. Goodwin declared, is ARM, which is successfully blocking studies necessary to understand and treat these disorders, and Scientology — which, he said, has a long-standing animosity toward psychiatry.

**PROBE Launched**

This is the first regularly-published issue of PROBE. Our special thanks to several individuals who have contributed to this launch: Mia Feroledo, Tom Gilgut, Fred Jerome, Judy Myersen, Jon Stark, Genell Subak-Sharpe.
SCIENCE FRAUD: IS THERE MORE—

Lloyd Harbor, N.Y.

The cry "Science fraud!" is in the air. Some current charges may be true.

This, nevertheless, is a cautionary essay — a warning against rushing to judgment — because the meaning and implication of scientific fraud are not as clear-cut as, say, bank fraud may be. A notoriously fraudulent experiment may be based on a valid scientific hypothesis — and even may stimulate further productive research.

This irony was remarked on recently by a science advisor to fraud-busting congressman John T. Dingell (D-Mich.), who brought low the Nobelist biologist David Baltimore, Ph.D. and his former colleague at the Massachusetts Institute of Technology, in Cambridge, immunologist Thereza Imanishi-Kari, Ph.D. The Dingell advisor, biochemist Lesley M. Russell, Ph.D., attended a recent briefing for science journalists and Washington science aides, at the Cold Spring Harbor Laboratory here. The subject: controversial issues in biology and society.

A proponent of one such controversial method, the use of fetal tissue from abortuses to replace lost insulin-producing cells in sufferers of early-onset diabetes, was describing how he developed the scientific basis for this projected therapy. (It is may be true.

M. Russell, Ph.D., attended a recent briefing for science journalists and Washington science aides, at the Cold Spring Harbor Laboratory here. The subject: controversial issues in biology and society.

A proponent of one such controversial method, the use of fetal tissue from abortuses to replace lost insulin-producing cells in sufferers of early-onset diabetes, was describing how he developed the scientific basis for this projected therapy. (It is stymied by the continuing Reagan-Bush ban on federal funding for fetal research.)

This researcher is an Australian-born Irishman, a bearded, burly bear of a man, and a rebel: microbiologist Kevin J. Lafferty, Ph.D., now at the University of Colorado in Denver. He and Russell, it turned out, had trained together in Australia.

"Given that you're talking about politics and science," Russell said, "I wonder if you would want to talk about the ideas that you got from Summerlin ...

"Oh, dear! Yes!" Lafferty exclaimed, "Now you're into the really thick part of the story!"

The name William T. Summerlin, M.D., was instantly remembered by several of the scientists and journalists gathered here at the Cold Spring Lab's conference center: As described in Joseph Hixson's book, The Patchwork Mouse (Doubleday, 1976), Bill Summerlin, 35, a dermatologist, had been caught out in a patent and pathetic scientific fraud.

Skin Soaked in Broth

Summerlin believed, contrary to the prevailing dogma in immunology, that he could soak a tissue transplant — a piece of mouse skin in the experiment that was his downfall — in a broth of the recipient's body fluids and chemicals, thereby leaching away the transplant antigens, or cell surface proteins, that give each organism's unique biological identity. It is this identity, however, that frustrates transplantation of organs and tissue between individuals — except when the recipient is heavily treated with immunosuppressive drugs.

Bill Summerlin had come to the Memorial Sloan-Kettering Cancer Center in New York City from the University of Minnesota, accompanying his mentor and chief, the meteoric immunologist Robert A. Good, M.D. Good recently had been appointed director of the Sloan-Kettering Institute for cancer research. He had encouraged Summerlin's research, but he also was a tough — Summerlin would later say brutal — taskmaster, in a system in which bright young researchers must make big, fast discoveries to earn their keep.

Bob Good was a manic, indefatigable man who began work at 5 a.m. The morning of March 26, 1974, was Bill Summerlin's time to produce his results, or, he feared, fail the program.

Fur Was Pale

He needed to show that pieces of skin from a black mouse he had treated in his special way had "taken" as grafts on two white mice — yielding what Hixson later called "patchwork" mice. Unfortunately, as dawn approached, the evidence was not clearly there. Hixon reports that in the elevator, en route to Good's office, Summerlin took a black felt-tipped pen from his pocket and darkened the fur of the fading black grafts.

Good did not detect the fraud. But when Summerlin brought the mice back, a lab assistant, James Martin, noticed the color change — and wiped the black ink off onto an alcohol swab.

He notified Good, who immediately called Summerlin on the carpet with a witness present. Hixon quotes Good as saying: "'Bill, it's come to my attention that you painted the skins black on some of the mice you showed me this morning to make them look as if they'd had successful transplants. He (Summerlin) admitted having done that.'"

Good suspended Summerlin; an investigation followed. Summerlin defended himself by bad-mouthing Good. He soon left town, disgraced.

The patchwork mouse story is often rehashed as a morality tale in science, as an example both of the horrors of a system that forces researchers to cheat, and of the professional death that awaits one who does (and is caught). Few scientists stopped to consider that Summerlin might have been right — that grafts could be pre-treated to make them tolerable to a transplant host.

One who did so consider was Kevin Lafferty.

He told his Cold Spring audience this May that as a Laborite and Socialist — and as an Irishman — he had resisted the prevailing dogma, expostulated by Nobelist immunologists Sir Peter Medawar, an Englishman, and Sir Mcfarlane Burnet, a fellow Australian, who insisted that each piece of living tissue is genetically immutable — like the prevailing social order. To the radical young Kevin Lafferty, these reactionary and elitist views were unacceptable.

He set out to overturn them. He chose as his target the belief that grafts cannot be accommodated to their transplant hosts. He would come to agree that once a host has been exposed to — immunized by — a tissue from another animal, a second exposure will cause a severe rejection reaction. But, he said, when grafts first are presented to a host, they are not very efficient immunizers.

Graft rejection thus requires two distinct reactions:

The first immunizing reaction, Lafferty argued, requires both the foreign antigens and a helper step, in which the antigens
are presented to white cells, called lymphocytes, the immune system's foot soldiers, so they hence forward will identify the antigens as "prey"—much as hound pups are trained to hunt by bloodying their faces in the carcass of a fresh-killed bunny.

Once immunization has occurred, however, then even a tiny amount of the transplant antigens, present in a graft, will stimulate a vigorous graft rejection. The trick, then, would be to treat the graft in some way before the transplant, to remove the helper cells—thereby forestalling immunization.

It was at this point in his thinking and research that Lafferty visited the U.S., stopped at the University of Minnesota, and told colleagues there his ideas.

"I said, 'If we knew how to remove these cells, it would be possible to transplant without immunosuppression,'" he recalled. The colleagues he was visiting said: "Go see Bill Summerlin—he's in this building; he's doing this sort of thing!"

"He was cookin' up tissues, to try to kill the immunogenic reaction," Lafferty adds.

Lafferty paid the visit—and became tight with Summerlin. They had different notions of what they were trying to do when they were "cooking" the grafts in broth before a transplant. But either way, the result might be the same: The graft would not be rejected.

Lafferty told his Cold Spring audience:

"What Bill Summerlin thought he was doing was getting rid of the antigens off the graft—and that was one thing that Medawar was so critical of, because he knew you couldn't. My theory was that it was those helper cells—that were the problem:"

"I assumed that Summerlin had stumbled on a way of getting rid of them."

Lafferty returned home, but could not duplicate Summerlin's experiments with mouse skin grafts. He said he assumed he was foiled by a technical problem; perhaps the exposed skin patches simply were drying out and dying. So he switched to internal tissues—thyroid gland, which he transplanted into a convenient, moist location under the recipient mouse's kidneys. It then was not a long leap from thyroid to fetal adrenal tissue.

One day he picked up Time and read of Summerlin's debacle. Lafferty said he was shocked. But his own experiments in non-skin tissues, meanwhile, had begun to pan out. So he did not abandon his pursuit. He stayed the course through two decades, first in Australia and more recently in the U.S.—until his insight, and Summerlin's, carried him to the cusp of a major breakthrough.

Continued on the following page

---

**Disputed 'Cell' Data Is Confirmed In Japan**

Bethesda, MD

Key findings in the controversial report by molecular biologist David Baltimore, Ph.D., and immunologist Thereza Imanishi-Kari, Ph.D., have been corroborated by Japanese researchers using state-of-the-art molecular biologic methods that probably were not available to the original authors.

The original paper, in the journal Cell (April 26, 1986), has now been retracted by Baltimore, but not by Imanishi-Kari—who continues to defend her work's integrity.

The corroborative findings, by molecular biologist Tasuku Honjo of Kyoto University and several colleagues, appear in the June Journal of Experimental Medicine; they have been reported elsewhere as well.

An American immunologist, Polly Matzinger, Ph.D., of the National Institutes of Health (NIH) here, said recently that she and her research associates discussed the two papers at a recent Journal Club meeting. Matzinger said she counted Imanishi-Kari as a professional colleague—but not as a friend.

"Honjo gets essentially the same kind of results as Thereza," Matzinger said in an interview in her lab.

The Honjo group, she added, "are very good and respected scientists."

Both sets of experiments showed—surprisingly—that an animal's immune system can be permanently changed by introducing antibody-producing genes from another organism into some or all of its cells. In these transgenic experiments, genes introduced into one strain of mouse came from another mouse strain (Imanishi-Kari) or from humans (Honjo).

The two research teams did "very, very different" experiments, Matzinger's NIH co-worker, molecular biologist Kurt Brorson, Ph.D., said here. Honjo, he and Matzinger explained, purported to show that mouse B lymphocytes (of the immune system) will express both the mouse and the transgenic human genes on their cell surfaces, as antibodies. This is essentially what Imanishi-Kari described. Others, too, have found this.

But Imanishi-Kari also reported that some of these antibodies looked like they were made by a gene from the transgenic mouse combined with a gene from the recipient. Honjo, too, found some antibodies (immunoglobulins) made of a piece of mouse DNA and a piece of transgenic human DNA.

"As far as I know with respect to these findings of mosaics [antibodies made from genes from both organisms], Honjo is the only other one," besides Imanishi-Kari, to have published this, Matzinger said.

Asked how Honjo's work affects the current controversy, Matzinger said: "There always was a likelihood that Imanishi-Kari's data were right, and that is strengthened, in that Honjo had similar data—especially since he didn't go looking for that data. So:

"Maybe her original data were correct!"

What is the probability that this is fraud? she was asked.

"Pretty slim!"

Asked, then, whether she thinks Imanishi-Kari's work is careless or fraudulent, Matzinger replied:

"Sloppy? Yes! Fraudulent?"

She shook her head vigorously no.
Fraud...

continued from the preceding page

transplant strategy for humans.

Others, independently, also have pursued what National Institutes of Health immunologist Polly Matzinger, Ph.D. at another Cold Spring Harbor conference called the two signal hypothesis for lymphocyte activation, and the reason — which is to prevent one from rejecting one’s own tissues (autoimmunity) — it is an essential natural mechanism.

Matzinger applauds Lafferty’s courage:

“’He was the only one who had the guts to redo Summerlin’s experiment!’” she explained recently by phone.

In the intervening years, Lafferty said, when he would cite Summerlin’s work in his papers, editors would phone to say “’Take this out — this is expurgated from the literature!’” He adds, “We rewrite history all the time.”

But Lafferty acknowledges his intellectual debt:

“I would never have tried organ culture if I hadn’t been in Bill Summerlin’s lab. That’s what tipped me off in that direction!”

Summerlin’s painted mouse fraud thus provided a key link in what is turning out to be a fruitful chain of scientific development. In a way, Lafferty said, Summerlin’s error was to have chosen the wrong tissue, skin, which is easy to see but difficult to transplant, for his model.

(Matzinger points out that researchers at Cambridge and U.S. co-workers recently have published dramatic studies showing that skin grafts from the same, or even from different species can be “tolerized” to transplant hosts by immunologic manipulations. These grafts survive indefinitely.)

Ex-SG Koop Endorses Anti-AIDS Syringes

A major — but tragically belated — breakthrough has occurred in the effort to develop and deploy single-use, self-destruct (SD) hypodermic syringes to stop AIDS’ spread.

The SD syringe has been an obvious public health strategy since 1984. Reports then of AIDS among intravenous drug users (IVDU’s) and blood transfusion and blood products recipients proved that it is spread by blood. Even before the causative agent, HIV, was identified, therefore, it was clear that transmission could be stopped by keeping one person’s infected blood from reaching others.

The tragedy and scandal is that very little has since been done by medicine, government or industry to implement this strategy. There has been no social will or commitment to do it. The result: Hundreds of thousands of Americans have become infected with AIDS via contaminated needles; tens of thousands already have died.

The welcome breakthrough is a letter in the April 4 New England Journal of Medicine (NEJM). In it, the former Surgeon General of the U.S. Public Health Service, C. Everett Koop, M.D. and two colleagues (one is an official of the National Institute on Drug Abuse) endorse the concept of SD syringes:

“Control of HIV infection lends itself to a technological solution. The development and widespread production of a syringe truly designed only for one-shot use could break chains of infections dependent on syringe reuse.”

Beyond Summerlin’s salutary influence on Lafferty, and perhaps others who read his pre-debacle research reports, there is this further deeper problem to ponder:

Summerlin’s hypothesis was correct: Graft rejection does require two stages of host sensitization, and it can be attenuated by pre-treating the graft to accommodate it to the host’s immunologic defenses.

That others ultimately succeed does not exonerate those, like Summerlin, who earlier may have proposed the hypothesis, but then cheated in the attempt to prove it. The essential element in science, as immunologist William Pollack, Ph.D., an inventor of the Rh vaccine, has remarked, is the data — not the idea.

Nevertheless, the successful performance of an originally fraudulent experiment does indicate that that original scientist’s creative insight was astute, not contrived, and suggests that he did not deliberately set out to perpetrate a hoax. The later success, by others, thus is a small measure of vindication.

###

Reached by phone in Rogers, Arkansas, where he now practices dermatology and allergy, Dr. Summerlin said:

“’It is a pleasure to hear that people can benefit from [my] work. I am happy that the work has been confirmed.

’’I knew it was true from the start.

’’I had many questions — and still do. But I knew that the work that I had done was solid.

’’But when you’re dealing with the furor that somebody very carefully creates to carry out a professional character assassination, you leave it alone, and that’s what I did...

’’I went into medical practice.”

BULLETIN:

SD Bill Introduced In Congress

Washington

A bill to ban non-SD syringes has been introduced in Congress by Rep. Joseph P. Kennedy II (D-Mass.). It is H.R. #2951.
**SPACE GARBAGE!**

Readers with long memories will remember how the Space Program was sold to Congress and the public with promises of down-to-earth spinoffs for civilian use. Thirty years later, there have been few such benefits for the billions invested. Tang and Velcro are two of them.

Now, NASA is promoting a space station and Mars mission, which may cost $500 billion; science journalists have received a PR letter from Purdue University, that says in part:

"Purdue ... was awarded a NASA contract to develop the first ecosystem for space travel and colonization. The spinoffs ... could be an even greater leap for mankind (than reaching the moon). The results could:

• "Feed millions of hungry people with a genetically engineered rice that provides all needed proteins;
• "Offer conclusive evidence of the dangers — or nonexistence — of global warming;
• "Reduce the volume of our landfills; and
• "Provide chemical-free vegetables, possibly grown in our own kitchens."

The press material quotes a Purdue professor saying:

"The best way for man to improve himself is to have a vision .... [as] you reach for the stars, new technologies will fall at your feet."

We think we’ve heard all this before.

---

**Abortion Ban Produces Angry Moms, Unwanted Tots — And Taxpayer Costs**

Michigan stopped Medicaid payments for abortion in December 1988. The Detroit _Free Press_ recently sent reporter Patricia Chargot out to find this ban’s effect on poor women who previously had relied on Medicaid to pay for abortions.

A 42-year-old new mother, Felicia, a drug addict who has been infected with AIDS virus for 5 years, told her: "I don't need a baby. I'm sick. I can't take care of her anyway."

Felicia, like thousands of other Michigan women, couldn’t afford the $318 (av.) cost for a private, non-Medicaid abortion.

In the first year of the Medicaid ban, the total number of abortions in the state dropped by 23% — almost a quarter — to 35,000. Births rose by 5%, to 7,600. The number of children enrolled in welfare before they were born rose by a third. In an unofficial study in a Detroit hospital, a social worker found that 25% of new mothers would have chosen an abortion if they had Medicaid coverage or the necessary cash.

"Common sense would tell us," reporter Chargot quotes a state official as saying, that these changes represent a large number of women who are having babies instead of abortions.

Felicia left the hospital without her baby — who became a ward of the state. An official told Chargot that the taxpayer costs just for the births of these babies is about $15 million.

N omatter, right-to-life leader, Barbara Listing, told the _Free Press_. The campaign to end Medicaid abortions "was not about saving money," but about the state’s involvement in "the destruction of innocent life."

---

**The Hazards Of Science . . . .**

"All intellectuals are bad, but the most dangerous are the natural scientists."

Oxford intellectual historian Isaiah Berlin, in his new book _The Crooked Timber of Humanity_ (Knopf, 1991), is describing a key belief of the brilliant and reactionary 19th century French political philosopher Joseph de Maistre. His "deeply pessimistic vision," Berlin writes, "is the heart of the totalitarianism, of both right and left, of our terrible century."

Maistre believed in inscrutable power and in order. The three pillars of this social order, Berlin relates, are the Pope, the King, and the Hangman — whose lethal toil Maistre wrote about with a fearsome pornographic relish.

(Maistre, ironically, was described by friends as a sweet, sensitive family man, Berlin reports!)

Man’s lot, Maistre believed, was to obey — unquestioningly. In his view, skepticism and rationalism, like the sciences they uphold, are evil because they lead to the "disease" of atheism.

Berlin says Maistre "feared and detested science because it shed too much light, and so dissolved the Mystery, which alone resisted skeptical inquiry..."

Maistre warned of a conspiracy by an unholy "sect" of scientists and democrats, liberals and materialists, idealists, lawyers, journalists, secular reformers and "intellectuals of every breed." Also on his hate list are Protestants, Catholic heretics (Jansenists), Freemasons and Jews.

This is a catalogue of "disturbers and subverters" that the world has heard a lot about since Maistre wrote it, Berlin says.

"It assembles for the first time, and with precision, the list of the enemies of the great counter-revolutionary movement [against the English, American, French and scientific revolutions] that culminated in fascism."

Berlin describes some of the ideologic ties between Maistre and 20th century totalitarians in his book, the title of which — the _Crooked Timber of Humanity_ — expresses the idiosyncratic development of individuals and of nations, whose unique identities, he pleads, must be protected and preserved.

Meanwhile, in resurrecting Maistre’s catalogue of subversives, Berlin has served practitioners of science and reason by clearly identifying their abiding enemies — and by reminding them who their potential allies are!
Special Charter Subscription offer for PROBE

You are cordially invited to reserve your charter subscription to PROBE, the new, critical, wholly-independent newsletter of science and medicine. PROBE will publish investigative articles, analysis, and interpretation — based on available data — on science and technology and their links to public policy and personal health.

As with this first issue, PROBE will find and print the challenging, hidden stories that the established media are afraid to publish.

Probe will explore — and debunk — the policy-driving myth that AIDS is spreading through the heterosexual community, so that teenagers need not be warned off sex, and be told not to kiss their boyfriends and girlfriends. It will describe the failure by government and the health establishment to take simple, obvious steps that could significantly limit the spread of AIDS. Probe will examine the tobacco industry, the genome project, and assess whether Congress is conducting a witch hunt against Nobelist David Baltimore and other research scientists.

Reserve now to take advantage of our special charter-publication price of $53.

YES, count me among those who support independent medical and scientific reporting. Include me among PROBE's supporters:

[ ] CHARTER SUBSCRIBER: Enter my one-year subscription to PROBE; enclosed is my check for $53.

Fill out this form and mail it today:

Name:
Address:
City:
State: Zip:

Make checks payable to:
David Zimerman, Inc. — PROBE
Box 1321, Cathedral Station
New York, New York 10025

Box 1321
Cathedral Station
New York, New York 10025