**The President at AAAS:**

**A Tarnished Bill Clinton Polishes Science’s Image — and His Own**

**Philadelphia**

At last month’s annual meeting of the AAAS (American Association for the Advancement of Science) here, science seemed to slip out from behind clouds that have bedeviled it for most of this post-Cold War decade.

Many of the 5,450 scientists and 877 scribes who gathered for AAAS’s 150th anniversary meeting stood, repeatedly, to applaud as President Clinton skillfully limned his vision of a prosperous and just New America for the New Millennium, that is to be built upon educational, scientific and medical advances.

Displaying consummate political skills, Clinton pressed the flesh, talked up several crippled children who’d been wheeled in for the televised occasion — and avoided any mention of or allusion to *l'affaire* Monica, which had piqued many conference goers (including this one) to queue up and endure the two hours of security checks required to watch the President in action at an announced venue.

**Changes Coming**

Clinton told the assembled scientists about several major changes among the nation’s research chiefs: His science advisor, John Gibbons—who long has borne the burden of science’s budgetary woes — is retiring to his farm for a well-needed rest. His place will be taken by physicist Neal Lane, Ph.D., head of the National Science Foundation (NSF). Lane will, in turn, be replaced by University of Maryland biologist Rita A. Colwell, Ph.D. This appointment, the President noted, puts NSF’s top post and prestige in the hands of a biologist, rather than a hard scientist, for the very first time.

The best news announced by the President had to do with money: More of it. For basic science. And for a nixonian-sounding war against cancer, AIDS, and other major ills that blight the lives of children and other Americans.

**AIDS Vaccine Foreseen**

Through a proposed 21st Century Research Fund — “part of our gift to America in the millennium” — the President said, “I believe we’ll have an effective AIDS vaccine within a decade.” Many more cancers will be curable. And basic health care and education will be made available to all Americans.

Who could argue with that?

The President forecast major new funding for NSF, the National Institutes of Health (NIH), and other federal research agencies. Forecasts at recent AAAS annual meetings of a 30% decrease in annual research spending in the run-up years to the new millennium thus have now been tossed out the window, the President indicated. He and the budget-makers within his administration now foresee a major increase in annual research spending during these pivotal years.

This is a very significant difference. Clinton attributed it to

continued on page 3

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Low-dose AZT Helps, The Thai Study Shows

The controversial double-blind, placebo-controlled studies of low-dose AZT in stopping mother-to-infant transmission of HIV have ended successfully (PROBE, Feb.). The low-dose regimen cut HIV transmission by half, compared to dummy medication.

Specifically, the transmission rate for the placebo-treated (untreated) women was 18.6%. The transmission rate for mothers treated with a low-dose AZT regimen was 9.2%, according to the U.S. Centers for Disease Control (CDC), in Atlanta, which co-sponsored the study with the Thai government.

A similar study in the Ivory Coast, in Africa, has also been stopped, according to CDC infectious disease specialist Phillip Nieburg, M.D. All the enrollees now get the low-dose AZT regimen. In this study, however, unlike the one in Thailand, the mothers are breast-feeding their infants, as they normally would — which increases the risk of HIV transmission via breast milk. Nieburg said he and his colleagues hope that comparison of transmission rates between the now-cancelled Ivory Coast controls and the actively treated women there will indicate how much breast feeding contributes to HIV transmission rates in a Third World country.

What the study will not answer, he said, is how to curb transmission in HIV-positive women who breast feed their babies.

Objection Raised

The Thai and African studies have been bitterly opposed for almost a year by internist Sidney M. Wolfe, M.D. and his Public Citizen's Health Research Group, a Washington, D.C. advocacy organization. They demanded that the trials be stopped, and then changed (PROBE, June, July, Oct. '97). Wolfe has been supported by New England Journal of Medicine executive editor Marcia Angell, M.D., a pathologist, who concurs with Wolfe that the studies are unethical.

(For an earlier story on this controversy, see Page 7.)

The decision to stop the Thai trial, for which all patients already had been enrolled and treated with AZT or a placebo, and the similar one in Africa, was made on February 18. A Federal Data Safety and Monitoring Board (DSMB) that met late in January, with access to the coded data, decided that the results looked very promising, according to Nieburg. But the DSMB asked CDC and the Thai government to stay any decision or announcement until the last of the babies were born, and their neonatal HIV status (which can change) was determined.

Press Conference Held

This benchmark was achieved in mid-February, Nieburg told PROBE by phone. CDC, which had made unusually detailed plans for announcing the results to the public, did so at a press conference on February 18 in Atlanta.

"At the time of the earlier January meeting, we knew there were differences between the treated and the control groups," Nieburg said. "We didn't know if these differences were sufficiently large — if they had enough statistical power" to resolve the matter. Three weeks later, he added, the data were adequate.

Sidney Wolfe replied to the findings by asserting that a subset of data from the original U.S. study that showed the efficacy of high-dose AZT (Protocol 076), which he only recently has obtained, shows that federal officials knew all along that the low-dose one would work.

CDC says these data were unreliable — and that therefore the low-dose placebo-controlled studies needed to be done.

Wolfe disagrees: "This is inexcusable, sloppy research," he told the New York Times (Feb. 19). "They've wasted a large number of lives and a huge amount of money."

The researchers are relieved.

"We are all very pleased," Nieburg declared. "I'm not sure that all the political flap is over. But we continue to feel confident that we're doing the right thing. We're pleased that we're now able to move along to implement [low-dose] AZT, and can begin to think about the next issue: breast milk and AZT."

# # #

Plucked by the Internet: Shucks! We knew it was too good a story to be true! It’s the one that we plucked from the Internet last June, headlined "Cleaner Polishes Off Patient." The dispatch quoted a South African newspaper, and described a cleaning woman who entered a hospital intensive-care room every Friday morning, where she unplugged the life-support system so she could plug in her floor-polishing machine. By the time she changed the plugs back, the patient was dead.

Our colleague Serena Stockwell, editor of Oncology Times here in New York, has now faxed us a 15-page Internet file, the gist of which is that the story was rumor, and was originally reported as such. But it has travelled widely on the web and been widely reprinted as fact. South African online journalist Arthur Goldstuck tracked the tale down, and confirmed — not unexpectedly — that it never happened. He calls the story an "urban myth" (like the crocodiles in the New York City sewers!).

"Plucked from the Internet" means, to us, dubious credibility — which is why we treat it, on the back page, as humor. ■
Misconduct...

continued from page 1

there is "little progress to report," declared historian Nicholas H. Steneck, Ph.D., of the University of Michigan, who served on the ORI advisory panel. Steneck noted that of the millions of Americans who are engaged in medical and scientific research, fewer than one hundred a year are investigated by ORI, and many of these cases are dismissed; others are thrown out on appeal.

Issue Is Quiescent

"There's not much major misconduct reported, relative to the number of researchers," Steneck said. What is more, the number of ethical violations — as distinct from "errors"—still is unknown.

A White House official, Sybil Francis of the Office of Science and Technology Policy, agreed that misconduct is a minor problem, and is of little current political interest. But, because the issue is quiescent, she said, this may be a good time to define precisely what it is — which the Fed has never done. Francis indicated, nevertheless, that efforts to reach a universally applicable federal definition of misconduct have not succeeded after many tries — and may never do so.

Scientists do not object to efforts to punish falsification, fabrication, and plagiarism as misconduct, as the National Science Foundation does, she noted. But the broader category of "other..." misconduct — which is in the proposed PHS definition, but not in NSF's, and accounts for many of the PHS cases — continues to frighten researchers.

Lack of interest in "misconduct" was clear from the attendance; the ORI session here at AAAS attracted three dozen people, including reporters. Nevertheless, the problems attendant to it could return, one panelist warned. Attorney Samuel Crocker said: "Someday" NIH's "Walter Stewart and [Rep.] John Dingell" — accused scientists' Torquemadas — "will be back!"

Panel for Cleared ORI Victims Is Nixed

The American Association for the Advancement of Science (AAAS) refused to include a forum for vindicated researchers — the targets of inquiries and investigations by the Office of Research Integrity (ORI) — at its annual meeting in Philadelphia last month. A proposal for the forum was submitted to AAAS by Project Inform, a San Francisco AIDS care agency, and PROBE, last autumn, after the deadline for such submissions had passed.

The proposal had the preliminary support of two of the high-profile scientists who have tangled with ORI and with Rep. John D. Dingell (D-Mich.) over the last decade. A third researcher was reluctant to re-challenge them.

The proposal was written by Martin Delaney for Project Inform and by this writer for PROBE. The aim was to invite a half-dozen of the now exonerated victims of the scientific witch hunt to report to their AAAS colleagues and the press on the professional, fiscal, and emotional costs they sustained in fighting congressional and ORI misconduct charges.

All have now been wholly cleared.

The proposal was delayed until September, when it became apparent that the last of the accused, Pittsburgh breast cancer researcher Bernard Fisher, M.D., had been exonerated; he won a $3 million settlement from NIH and the University of Pittsburgh.

Closure Sought

The forum was designed to permit these scientists — who for the most part have remained silent through the years because of legal constraints and outright fear — a chance to relate their experiences to their colleagues, and, it was hoped, move toward closure. The aim, too, was to provide the scientific community with information to assess the decade-long series of widely-reported events and grapple with their meaning.

In deference to AAAS’s view of scientific misconduct, the proposal was framed as a critique of the politicization of the ORI process, but not as a critique of ORI per se.

PROBE had been told that if the outgoing and incoming presidents of AAAS, biologists Jane Lubchenko, Ph.D. and Mildred S. Dresselhaus, Ph.D. — approved the project, it was likely to fly. So the proposal was submitted directly to them, rather than through the usual AAAS channels. In retrospect this was an error.

Project Inform and PROBE were told, informally, that the proposed forum would be a first for AAAS, which presents Science, not scientists, at its annual meetings. We also were told that we should propose a balanced debate between the scientists and the Research Integrity forces.

Scientists Needed a Turn

We declined to do this, on the grounds that the integrity watchers long have had their say in the government, Congress, and in public — and now it was the scientists’ turn.

We also heard concern that this type of forum might detract from the AAAS 150th birthday celebration, and the President’s anticipated presence.

In January, AAAS meetings official Dr. Michael Strauss faxed us "to decline" our request, explaining that it is difficult to present a panel that has not been included in the program announcement, mailed in the autumn. He continued:

The session was presented as essentially a ‘day in court’ for a group of individuals. While the [program] committee is sympathetic with the issues of scientific misconduct (and in the misconduct of its investigation), they did feel that such sessions have the potential to simply grievance airing. There did not appear to be discussion [in your proposal] about the general issue of scientific integrity, how it is assured, and what could or should be done to monitor it in a way that would move the discussions forward.

We’re sorry AAAS demurred. If they had really wanted to hear and learn from their long-besieged colleagues, this forum could and would have happened.
An HMO’s PR Is Laced with BS

A reader in Arlington, Texas phoned last fall for help: Obstetrician Timothy N. Gorski had torn a small story about Cigna Corp.’s “Healthy Babies” program from the business pages of the Fort Worth Star-Telegram (Sept. 15). Cigna claimed it saved money and improved moms’ and new babies’ health through its on-the-job prenatal education program.

The story is reproduced in the box below.

Gorski wanted data substantiating Cigna’s claims for clinical outcomes and costs, with citations from published studies. He had obtained the name of a Cigna PR woman—who had not responded to his query. We agreed to help get the data.

Since we don’t deliver babies, we had a bit more time than he did for this project. We phoned Cigna headquarters in Philadelphia, were referred to an office in Connecticut, and after three or four calls there, were referred to a PR woman, Debbie Veney, back in Philadelphia. It had taken a month to find her.

Press Kit Sent

We requested the press release that the news story obviously was based on, and its source material. After a few more calls, a thin press kit came by mail. There was no source material. But the release stated that the info was based on work by “an independent statistical analysis firm” in Minneapolis, Mangen Research Associates.

The Mangen findings, we learned, as our probe approached the end of its second month, had not been published.

We asked Veney for the tables. She said she’d send ‘em. When she didn’t, we got her associate, Jonathan D. Flynn, on the phone. He said “Debbie” was too busy to talk, and he was sorry to say that because some material in the report was “sensitive” the “legal department said we can’t send it to you — it can’t be given out.”

We were preparing to go forward, and write about the material that we did have, the press kit, when the phone rang again: Cigna. We would get the data. But then we didn’t. We called again. It’s coming. It didn’t. It would. It didn’t.

We finally sent Veney a fax, saying we’d write the story with or without the data. We told her we’ve been a medical writer for 30 years, read thousands of press releases, and did not recall any instance in which the company or university refused to send the source material (often it’s tucked right into the press kit).

Subjects Were Employees

We got a call back: We’d get the tables.

We haven’t — yet. So we’ve studied the press release closely. This is what we found:

What the Star-Telegram neglects to say, and Cigna discloses only cryptically, in the release’s next to last paragraph, is that the study’s subjects are not randomly drawn from the HMO’s insured populations. They are, rather, Cigna employees! The tipoff is a sentence saying, “Cigna also offers a . . . hot line which assists employees in finding services . . . when school is closed but Cigna isn’t” [emphasis added]. A brochure in the kit, similarly refers to “birth experiences for Cigna employees.”

Whether they are a representative group, vis-à-vis Cigna’s clients or the larger public, and whether their employment status might skew the results, aren’t mentioned.

Indeed, it’s not clear whether anyone other than Cigna employees is eligible for Healthy Babies. If no one else is, then the press release is a fraud, since it implicitly promises a benefit that the company’s clients can’t have.

Benefits Described

The release says Mangen Research Associates studied program participants — but does not say how they were selected. Mangen compared 303 high-risk pregnancies and 165 moderate-risk pregnancies to an undisclosed number of “control” pregnancies in women who did not participate in Healthy Babies. Cigna doesn’t say where they found the controls, or how they were matched and compared to women in the two treatment groups. The press release then states:

The extensive treatment group above would have cost Cigna an estimated $1.5 million more in expenditures, such as intensive care unit (ICU) charges, had they not participated in Healthy Babies. Similarly, for the [165 women in the] moderate risk treatment group . . . $4,300 in medical costs were avoided for each pregnancy.

This is sloppy release writing. The high-risk cost is a total, $1.5 million, and the moderate-risk figure is a per-patient amount ($4,300). Doing a little arithmetic, it appears that prenatal education saved $4,954 for each high-risk patient.

Cigna does not say exactly how this money was saved. One could guess that some of the savings was in fewer post partum hospital days for mom and fewer ICU days for baby — dubious benefits according to a wide variety of critics, including Congress.

Did the women and babies benefit? They assertedly had been...
Laced...

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ter outcomes, but Cigna doesn’t explain what they were. In monetary terms, if the women’s participation saved Cigna about $4,500 per pregnancy, then these savings certainly were not equitably shared:

Each woman who finished the program was given a government bond with a $50 redemption value.

We faxed Cigna’s press release to Dr. Gorski. His comment is in the box, below.

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We’re not an expert on managed care — it’s a world of its own for journalists as well as for doctors. But we can say that sending a news release and refusing the data — which must be published in a peer-review journal before they are credible — is disingenuous, not to say dishonest press relations. If Cigna treats patients with the same disregard it treats reporters, then Caveat emptor!

Disclosure: Cigna provides our dental care. We’ve filed no claims and have no care-related complaints! — D.Z.

Doctor Comments

We faxed obstetrician Timothy Gorski the Cigna press release that the Fort Worth newspaper had picked up for its business page. Here are his comments:

“They don’t give any data at all — how they selected the people, how they compared them. In published papers, they’d have to have age-matched controls who were no different in any way other than that one group was treated, and the other not.

“They’ve made assumptions, and then don’t tell you what they are. Then they come up with a number, $2.4 million, for how much they’re saving.

“This is bad science at best, fraud at worst. They’re not forthcoming with the data!”

Polishes...

continued from page 1

the country’s current prosperity and the new freedom to spend again that flows from his proposed balanced budget. It may also represent the President’s continuing success in co-opting Republican initiatives on popular issues; the GOP has been more protective of some science budgets than the Democrats in recent years, albeit their interest often lies more toward defense than the medical and social research the President favors.

Quest Defined

In evoking AAAS’s long history, Clinton cited the “restless quest for knowledge” as one of “America’s defining traits.” More practically, he suggested, exploration and cutting-edge research spur industrial development. In an era when Third World countries quickly find ways to knock off First World inventions — including cars, planes, and atom bombs — the perception in Washington and on Wall Street is that advanced bioscience is the least-copyable, and thus possibly the most-profitable means to sustain America’s economy. Given industry’s continuing unwillingness to invest heavily in basic science, the consensus is that government can — and should — do it.

Particulars Yet to Come

The devil of course is in the details — and they’ve not yet been spelled out. What is more, politicians survive by being all things to all people; Bill Clinton is a survivor.

So it may give some enthusiasts pause to recall that in the same week that Clinton spun the scientists in Philadelphia, it also was reported that he has lent his support to the scientologists in their quarrel with the German government. The Germans regard Scientology harshly, as a cult and a fraudulent business. The reported quid pro quo is that actor John Travolta, a scientologist, who plays Clinton in the upcoming film Primary Colors, has portrayed the President more favorably than novelist Joel Klein did in his prescient novel, upon which the movie is based.
Scientists Recompute The Bell Curve

When Herrnstein and Murray's *The Bell Curve* was published in 1994, we were slow on the uptake. We wanted, first, to read it — no small job. By then, it had been scathingly criticized — and tepidly defended — throughout the media. This, however, did not halt, and indeed may have fueled, *The Bell Curve*’s rise to best-sellerdom — which suggests that racism with a Harvard pedigree appeals to upscalers; Herrnstein, now dead, was a professor there.

We didn’t — and don’t — think *The Bell Curve* is science. It’s rhetoric. But it is predicated on science — on difficult and arcane disciplines, including psychometrics (psychological testing), genetics, developmental psychology, and statistics. So definitive scientific criticism only could come from experts in these fields, who can assess the accuracy of the authors’ “facts,” and the validity of the inferences they draw from them. We lacked this expertise.

Herrnstein and Murray’s (H&M) ultimate policy recommendation, it should be recalled, is to segregate low-IQ Americans, a disproportionate number of whom are black, in a “custodial state . . . a high-tech and more lavish version of the Indian reservation . . . while the rest of America tries to go about its business.”

Many scientists, of course, did respond to *The Bell Curve*, as reported in the news. But few had the time, resources, and space to comment definitively. Now, a group of scholars in Pittsburgh — a computational geneticist, a statistician, a social scientist, and a historian from the University of Pittsburgh and Carnegie Mellon University — have edited just such an assessment. It’s called *Intelligence, Genes, & Success: Scientists Respond to The Bell Curve* (New York: Copernicus [Springer-Verlag], 1997, $27). The lead editor is computational geneticist — and biologist — Bernie Devlin, Ph.D.

Effort Explained

Devlin, who teaches at the University of Pittsburgh School of Medicine, told PROBE by phone that *Bell Curve* author Charles Murray had read the critical book that he and his associates have published — and didn’t like it.

“He was a little hurt,” Devlin said. “He thought we didn’t completely understand the motive of the book.”

Devlin added: “We understood it very well!”

The critique’s editors say they and their twenty contributors — one of whom studied under Herrnstein — provide the first “complete . . . attempt to give a fuller description of the scientific criticism [of *The Bell Curve*], with sufficient detail that the reader can also understand its implications for public policy.”

Needless to say, they pick H&M to pieces.

*Intelligence, Genes, & Success* (**IGS**) is 376 pages, and some of the essays are over our head because of their statistical and mathematical methods. But much of the criticism is within our ken. Here are just a few of the highlights:

* The general intelligence factor, IQ, technically called Spearman’s *g*, is real, as H&M say, and blacks in America have IQs that are on average 10 to 15 points lower than whites. But: There are other, important kinds of IQ — crystallized intelligence, for example, that also bear on social

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Researchers Riposte

Here are a few counterthrusts from *The Bell Curve*’s critical analysts in *Intelligence, Genes, & Success*:

“With typical assurance, H&M report that ‘only people from a fairly narrow range of cognitive ability can become lawyers.’ But to the extent that’s true, it’s because only people who get above average scores on the Law School Aptitude Test are allowed to become lawyers, not because you have to be intellectually gifted to draw up wills and deeds of sale.” — Nicholas Lemann, author

“Nowhere in Head Start’s mission statement is there a reference to IQ scores or a hint about making children smarter . . . Yet . . . scholars such as H&M — schooled at the prestigious intellectual training grounds of Harvard and MIT — erroneously describe it as ‘designed to foster intellectual development . . . [by] providing classes for raising preschoo.[l]’s intelligence.’”

— Edward Zigler, Ph.D.; and Sally J. Styfco, Ph.D.

“Evidence indicates that intelligence requires persistent nurturing, and is not fixed early in childhood. It is much like muscle mass, where good diet and exercise are needed continually, and flaccidity sets in quickly if . . . [they] are denied.”

— Douglas Wahlsten, Ph.D.

“H&M suggested . . . that there appeared to be greater weight for genetically driven, as opposed to environmentally driven, differences [in IQ]. Our own evaluation of the literature, which is not particularly abundant, suggests just the opposite.”

— Michael Daniels, Ph.D., et al.

“The most damaging — and, I think, malicious — pseudo-science is Pearson’s [on the tight heritability of IQ], for it shatters hope that science can improve the human social condition. Only revolution remedies malice, and only science remedies ignorance. Time, therefore, for a social scientific revolution!”

— Clark Glymour, Ph.D.
Disputed HIV Trials
Unlike ‘Tuskegee,’ Whistle-blower Says

One of the original whistle-blowers on the Tuskegee Syphilis Study (1932-72) says that current, controversial AIDS studies in the Third World are not comparably unethical, as is alleged (PROBE, Feb.). Nevertheless, epidemiologist William Jenkins, Ph.D. says, the contemporary studies cause him great concern.

“I don’t know the answer to that!” Jenkins replied last month to a direct question on his view of the present studies’ ethical concern.

Flattens...
continued from previous page

success. The g is not uniquely important, as H&M say that it is.
• The available data show that IQ is far less heritable than they allege.
• Contrary to H&M, IQ can be raised significantly by social interventions, without heroic efforts.
• Each year of schooling raises IQs by 2.7 points — double H&M’s calculation.
• Head Start and similar programs for disadvantaged children do not permanently raise children’s IQs (and were not designed for this purpose). But they do work advantageously, and would work better if the schools the kids attend later were improved.
• Higher IQ does not predict lower criminality rates, as H&M allege. Unlike whites, smart blacks are more likely to be criminals than dumb ones.
• IQ is not the “dominant” factor in determining life outcomes, and IQ test findings provide no basis for formulating social policy, contrary to The Bell Curve.
• The Bell Curve is pseudo-science. In a concluding chapter on public policy, editors Devlin and Stephen E. Fienberg, Ph.D., write:

H&M share the consensus among social researchers about growing inequality in America, but they stand apart ... [on] why, and what can be done about it. They also stand apart ... in the tight and directional ties they posit between the amahars people are born with and the kind of lives they lead .... Because of their principled opposition to government, H&M have denied Americans the support of public institutions in the struggle against rising inequality.

Without government, it will be a very unequal struggle.

Intelligence, Genes, & Success is a critically important report.

— D.R.Z.

March 1998
students and young black and Hispanic scientists, that the only way to avoid future studies like that at Tuskegee, in Alabama—which was accepted, and largely run, by blacks—is to “Question! Question! Question!” the ethical validity of clinical studies proposals. However, he was reluctant to answer questions about the Third World AIDS studies, noting that he works at CDC—which supports and sponsors them—and he asked one questioner: “Are you a plant?”

Jenkins, who is black, noted that his CDC boss, internist David Satcher, M.D., who also is black, was being considered for the post of Surgeon General of the Public Health Service. He was confirmed a week later. (Satcher has endorsed the Third World studies.) Jenkins implied that they both were constrained not to publicly criticize the Third World studies, even if they might do so in private.

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We think Jenkins overstates the ethical dilemma. Racial politics aside, the studies, as currently conducted, are ethical, life-saving, and urgently needed. — D.R.Z.

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**Racism Affects Health**

“Racism still is a pervasive force in the U.S. . . . Distrust and alienation among African-Americans is a major health care problem today.”

—Epidemiologist W. Jenkins, Ph.D.

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