Gleeful Curator Is Building A Museum of Greed and Folly

Minneapolis,

A public collection of colorful quackery gadgets, called the Museum of Questionable Medical Devices, is open here most days of the year. It is in an historic building near where the first bridge across the Mississippi River once stood. (Phone 612-379-4046 for address and times.)

Inside, quack-buster Robert W. McCoy, 71, a former salesman and family planner, has assembled, repaired, polished, and prepared a rational gloss on phrenology machines, orgone boxes, magnetic shields, and other impressive — and in some cases fearsome — phoney instruments. They were sold deceptively, and used fruitlessly, to control natural functions, particularly masturbation, and to treat all kinds of human ills.

None has medical or scientific merit. But, McCoy, who now is collecting contemporary herbal medicine labels, sees these contraptions as testimony to the tight nexus between charlatans and the credulous gulls who buy and use their products and services.

Aches, Pains and Pests Chased

One example is a polished and impressive looking Coetherator, patented in 1926, which is still manufactured, surreptitiously — because it is now illegal — and sold to hardened but not very bright midwestern farmers to reputedly diagnose and treat human ills. It also allegedly will clear a farm field of insect pests if a photo of the field is inserted into a special slot in the apparatus.

McCoy opens the device, which is decorated with a businesslike array of lights, dials, and switches, to display its inner workings. There are none. Inside, it is empty space, containing only a single end of wire, coiled ‘round a scrap of wood.

Evil Spirits Chased

McCoy also displays the orgone box seized by federal agents that sent psychiatrist Wilhelm Reich, M.D. to the pen for fraud. McCoy possesses several head-measuring phrenology machines, examples of a century-long fiction that the brain is neatly divided into specific “organs” such as “sublimity,” “individuality,” and “sexamity” that are measurable in the bumps on the outside of one’s head.

No scientific knowledge backed these beliefs. But McCoy notes, wryly, that phrenology — unlike many of his other toys

continued on following page

Wet Dreams Are Spiked

In 1905, Dr. Foote’s Sanitary Bureau, a company in New York, marketed a Spermatorrhea Ring by mail for $2. This ring allegedly stopped nocturnal emissions by awakening users when their penises began to swell while they were sleeping (a normal physiological response).

The user clamps the aluminum collar over his flaccid penis before retiring. The pressure of an erection forces 14 sharp points through the protective inner ring, causing the wearer to wake with a start!

One grateful user, in Portsmouth, England, wrote to Dr. Foote:

“I am very pleased to tell you the nightly emissions have stopped, and my anxiety has all gone now, for I used to worry myself in thinking there was no cure for me . . . . The ring is just the thing for cases like mine, for it awakens me at night just when I should want to. My health has greatly improved.”

The user neglects to say what he does when the ring interrupts his dreams, and awakens him, horny, in the night.
Follow-up

NEJM Is Too Late In Dissing Alt. Health

That’s our take on New England Journal of Medicine (NEJM) editors Marcia Angell, M.D., and Jerome P. Kassirer, M.D., as they take up the cudgel against “alternative medicine” in a recent editorial (Sept. 17). In it, they take a swipe at “the not very satisfactory definition” of alternativism (viz., medical interventions not widely taught at med schools) that they themselves published in a deceitful article by Harvard internist David Eisenberg, M.D., and others in 1993. As we complained at the time, the NEJM editors must have been snookered, or asleep at the switch to have published the article — which was widely, and accurately, perceived as alternative medicine’s breakthrough into the mainstream.

Museum...
continued from previous page
— did represent social progress: It suggested that insanity could no longer be construed as Evil Spirits, which custodians might beat out of their mental patients with fists and knouts. Rather, madness was an innate result of their misshapen heads that could not be purged by beatings.

The purveyors of this poppycock for the most part were not physicians, McCoy said in an interview here. Some were naturpaths or other “natural” healers. Few had any scientific expertise or medical training.

Did they know they were cheats? “Some are true believers, and some are true scoundrels!” he said. Asked if charlatans knew they were phonies, McCoy replied: “They are a mix — it’s not a clear-cut thing.

Subscription Rates Will Change for ’99

PROBE subscription rates have remained steady for several years. We now must raise them to meet rising costs.

The new rates are $65 for delivery to your home address. For delivery to institutional or business addresses, the rate as of January 1 is $95. Subscribers are of course free to switch their subscriptions to their homes to sustain a lower rate.

For the convenience of our long-time readers, we will honor all subscriptions for an additional year at $60, provided your order is postmarked by January 31. If you want to take advantage of this offer, but don’t have an invoice in hand, send your check to us at POB 1321, Cathedral Station 10025-1321, New York. We’ll do the arithmetic and send you a confirmation letter telling you how long your subscription will run.

It may take decades of public health effort to undo the damage, a pittance of which the NEJM presents in its issue: ordinary people being gullied by alternativist hucksters, some with fatal outcomes.

Scant Results Seen

The two editors turn up some interesting facts. For example, the National Institute of Health’s Office of Alternative Medicine (OAM) handed out 30 research grants in 1993, its first year. Final reports — abstracts only — are posted on its web page. But six years later, only nine of the 28 have led to published papers in journals and five of the nine are in two journals that few doctors ever heard of. Of the remaining four, none is a clinical study that permits any conclusions to be drawn about the efficacy of an alternative therapy.

In short, alternativism’s congressionally-mandated intrusion into NIH is a public relations charade, designed to facilitate alternativists’ professional aggrandizement and the sale of nostrums.

“They didn’t all just start out as scoundrels.” A few, he said, recanted, and went straight. Others were jailed for fraud.

Despite public education and consumer fraud laws, McCoy sees no end of quackery in sight. To the contrary, he says, the current anti-rational climate of ideas and recent federal legislation on herbs and other food additives have given quackery a highly profitable new lease on life.

Many of McCoy’s gizmos — which he lovingly repairs, and restores to their original stage of [dys]function — were originally seized by the Food and Drug Administration or other agencies, and are on loan from the federal government. Others were sent by the American Medical Association.

But McCoy turns up many on his own, rummaging in attics, cellars, and old barns — and asks others who run across these devices at auctions and in antique stores to alert him to their existence.

His Museum of Questionable Medical Devices is, apparently, the only one of its kind — and building the collection affords him much pleasure. McCoy says: “It’s the most fun I’ve ever had!”

PROBE

Editor and Publisher
David R. Zimmerman

Circulation: Tom Gilgut
Comptroller: Veva H. Zimmerman

PROBE is written and published independently, on a monthly schedule. Subscription: $65 per year (home), $95 (office). Editorial office: 139 West 13th St., New York City, NY 10011-7856. Phone: 212-647-0200. For subscriptions, Box 1321, Cathedral Station, New York, NY 10025. Opinions expressed are those of the Editor and Publisher, unless otherwise indicated. Contents of this newsletter may not be reproduced without permission. ISSN 1062-4155

Internet address: PROBENEWSLETTER.COM
An Animal Rights Hero’s Fame Was Built on His Lies

This is a followup on a story we wrote two decades ago that never was published:

In September, the Times ran an obituary for Henry Spira, 71, an animal rights crusader. He was “the architect of the Animal Rights Movement’s first successful campaign to limit the use of animals in medical testing,” the Times said.

This was in the mid-’70s. Later, the Times lionized Spira in a cover story in its magazine. He was, so the story went, an exemplary animal rights activist — the kind who could talk to and work with the wider community, including medical institutions, to work out compromises to vexing conflicts. Not a crazy! The Times obit recalls:

Mr. Spira first gained notice in 1976 by leading a campaign seeking an end to the American Museum of Natural History’s [AMNH] research on the impact of castration and other forms of mutilation on the sexual behavior of cats. When the research was halted in 1977, animal rights activists hailed the campaign as the first in more than a century of antivivisection efforts in the U.S. and Europe actually to result in an end to any animal testing.

Nice story! Trouble is, it’s not true!

And the obit is wrong on the face of it: Most activists see “castration” — neutering — as necessary surgery, not mutilation.

The demonstrations around the AMNH in the ’70s were raucous, and continued for months. The Times covered them from the protestors’ vantage point and point of view. The AMNH circled the wagons, and stone-walled the press.

The charges, of abhorrent cruelty to animals, did not make sense to us. We eventually got an assignment from New York magazine to investigate. We went to the picket line, where the marchers, most of them women, carried signs about stopping the torture, stopping the killing. The charges boiled down to this:

The scientists — torturers — were not castrating cats, as the Times obit, based on its own faulty original reporting, says. Rather, the demonstrators told us, the researchers were torturing the cats by electrocuting them to death with electrodes placed on their penises.

The cats are conscious and awake while this is done? “Yes!”

How did the marchers know?

“Henry told us. Ask Henry!”

So we sought out Henry Spira. After some chivvying, he told us he had documents at home — scientific reports and grant applications obtained from the National Institutes of Health under Freedom of Information procedures — that described the feline torment. After further prompting, he agreed to show us these documents, and eventually let us xerox them.

They said, in deep scientese, that the experimenters were studying the neurophysiology of tomcats’ copulation. Most of the research, over a year or 18 months, found the cats living not in cages, but in small rooms. Once a week they were taken out and placed with female cats in heat, while a video tape was made of their sexual activity. They then were returned to their rooms.

“Not a bad job!” we remarked to Henry — who didn’t think it was funny.

Lives Ended

When these observations were over, the scientists performed a terminal experiment, one from which the cats would not wake up: The researchers were mapping the nerve fibers (dermatome) that enervate the cat penis. To do so, the animals first were anesthetized; they could feel no pain.

Then their pubic areas were surgically dissected, barbing the nerves from penis to spinal column and brain, and back. Microelectrodes were placed on single, bared nerve cells. Then the nerve endings in the penis were stimulated.

The stimulus was a touch of a single camel’s hair, plucked from a camel’s-hair brush. The current it generated in the nerve cells was on the order of one millivolt, a thousandth of a volt!

At the end of the day, without ever having awakened, the cats were killed.

We met Spira again, and shared our findings with him.

First, he said we were wrong, and the cats were, as he alleged, being electrocuted to death on the penis. When we then went over the text with him, line by line, he finally said that, well, that could be true. But it was torture nonetheless: The cats were confined, not free — and the protest marches therefore would continue!

They did. The Museum eventually closed the lab. Based on Spira’s lies, the animal rights movement was emboldened by success, as the Times now recalls.

Meanwhile, we wrote our story. Took it to New York. Didn’t hear back. Phoned. Were told, finally, they wouldn’t run it, because cat lovers might find it offensive. Didn’t want demonstrations at their doors!

No one else would publish our report: It’s still in the files.

We’re not mourning Henry Spira. Not at all!

Truth is Hidden

Spira’s lies do not phase his adherents. Australian philosopher Peter Singer, Ph.D., who will be in residence at the Institute for Advanced Studies in Princeton this year, has just published a paean to Spira: Ethics Into Action: Henry Spira and the Animal Rights Movement (Lanham, Md.: 1998).

Singer spends the better part of a chapter exulting Spira’s tactical brilliance in stopping the Museum cat studies — a “complete... victory” for the Animal Rights movement. But Singer does not discuss Spira’s rabblerousing lies about cats being lethally shocked on the penis. He repeats and endorses Spira’s charges of “cruelty” and “torture” — but cites no evidence beyond the outraged views of protesters outside the Museum.
Multiple Chemical Sensitivity Suffering Is Real, Diagnosis Isn’t – Quackbusters

A prominent quackbuster, Stephen Barrett, M.D., has conducted a year-long inquiry into the disorder called, among other things, multiple chemical sensitivity (MCS). He finds that while patients’ suffering often is quite real — and severe — the purported causes and disease mechanisms that commonly are adduced for MCS are scientifically unproven. The costly and often-exotic treatments are bogus.

Barrett cites an American College of Physicians’ position paper that concluded that “there is no body of evidence that treatment measures are effective.” The American Medical Association, he says, concurs.

Barrett is a retired psychiatrist and the founder of Quackwatch, Inc., an Allentown, Pa., nonprofit that belongs to the Consumer Federation of America. He reports his findings in a Quackwatch booklet called A Close Look at Multiple Chemical Sensitivity; and also in a new book with Rockville, Md., toxicologist Ronald E. Gots, M.D.: Chemical Sensitivity: The Truth About Environmental Illness (Amherst, N.Y.: Prometheus). Barrett’s conclusion is that MCS, which travels under a wide variety of names, is quackery. He says that most of its practitioners, including many M.D.s. “should be delicensed.”

Defining MCS has been a major problem. One group of its practitioners says:

Ecologic illness [a synonym for MCS] is a polysymptomatic multi-system chronic disorder manifested by adverse reactions to environmental excitants as they are modified by individual susceptibility in terms of specific adaptations. The excitants are present in air, water, drugs, and our habitats.

This, and similar nosologic efforts lack clarity, Barrett writes, and “logic dictates” that meaningful research can’t be done unless the diagnostic criteria have been clearly defined. But, he notes, this “does not deter clinical ecologists from diagnosing MCS — typically in all or nearly all of their patients.”

A leading Canadian clinical ecologist, William J. Rea, M.D., for example, has claimed to have treated 20,000 environmentally ill patients. But Barrett reports that when investigators reviewed 2,000 patient files in the unit he ran, only four people — who had cancers — tested negatively for environmental sensitivity.

“The reviewers concluded that Rea’s test procedures lacked appropriate controls,” Barrett says, “and the patients were assumed to have environmental hypersensitivity mainly by being referred to the unit.”

Barrett acknowledges that many MCS patients are, truly, seriously ill. Based on reports in scientific journals, he says, “well-designed investigations suggest that most . . . have a psychosomatic disorder in which they react to stress by developing multiple symptoms.”

Origins Traced

To assess the MCS movement, Barrett did what journalistic sleuths are supposed to do — but often don’t: He traced its emergence back through time to its origin. There he found a Chicago allergist, Theron Randolph, M.D. (1906-1995), who asserted, in the ’40s, that some patients become ill from exposure to substances at far below the levels normally considered safe. These “allergies” cause fatigue, irritability, behavior problems, depression, and nervous tension, Randolph wrote in the Annals of Allergy and other mainline journals. Trouble followed.

Randolph, a staff doctor at Northwestern University Medical School, was fired for being, in his words, “a pernicious influence on medical students.” He proclaimed himself an alt­ernativist, and as he grew older the range of substances that he alleged caused MCS expanded ’til it became a little-bit-of everything illness that now is sometimes called “20th century disease” and “universal allergy.” The range of alternativist therapies kept pace. Avoidance and isolation from virtually everyone and everything — including ambient air and tap water — became the costly non plus ultra treatment.

Organized medicine and science could not confirm the work of Randolph, Canadian Bill Rea, and their followers. Standard proceeded.

\[ \text{continued on page 8} \]

<table>
<thead>
<tr>
<th>'Fad' Diagnoses Assessed by Experts</th>
<th>Scientific Perspective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adrenal insufficiency</td>
<td>Genuine but rare</td>
</tr>
<tr>
<td>Candidiasis hypersensitivity</td>
<td>Not scientifically recognized</td>
</tr>
<tr>
<td>Cavitation osteopathosis</td>
<td>Does not exist</td>
</tr>
<tr>
<td>Chronic fatigue syndrome</td>
<td>Common but overdiagnosed</td>
</tr>
<tr>
<td>Gulf War syndrome</td>
<td>Cause or causes unknown</td>
</tr>
<tr>
<td>Hypoglycemia (low blood sugar)</td>
<td>Genuine but overdiagnosed</td>
</tr>
<tr>
<td>Hypothyroidism (insufficient thyroid hormone)</td>
<td>Genuine but overdiagnosed</td>
</tr>
<tr>
<td>Lyme disease</td>
<td></td>
</tr>
<tr>
<td>Mercury-amalgam toxicity</td>
<td></td>
</tr>
<tr>
<td>Multiple chemical sensitivity</td>
<td></td>
</tr>
<tr>
<td>Parasites</td>
<td></td>
</tr>
<tr>
<td>Sick building syndrome</td>
<td></td>
</tr>
</tbody>
</table>

In their new book Chemical Sensitivity, psychiatrist Barrett and toxicologist Gots critically assess what they call “fad” diagnoses. These are their findings. (Reproduced with permission.)
Salt Controversy Illuminates Science’s Ethical Dilemmas

By David B. Resnik, Ph.D.

If you are healthy, and have high blood pressure, should you avoid foods that contain lots of salt? Should you control your intake of sodium?

Most people would probably answer “yes” to both of these questions, based on their “knowledge” of the “dangers” of salt.

For decades, the orthodox scientific view has been that less salt in the diet can be correlated with lower blood pressure and increased longevity. This common wisdom has some basis in scientific fact: In the early 1970s, several studies of human diets demonstrated a relationship between salt intake and higher blood pressure.

As a result of these studies, dozens of medical organizations and government agencies recommended that all people, not just people with hypertension, could benefit from controlling or reducing their salt intake. The officially recommended daily allowance is six grams of salt per day—which is four grams less than the average American consumes.

Questions Have Been Raised

In 1997, the Archives of Internal Medicine published an article by the Trials of Hypertension Prevention Collaboration Research Group, which reached a similar conclusion. Also in 1997, Appe et al. published an article in the New England Journal of Medicine, which claimed that other dietary factors have more effect on blood pressure than salt. Last year, Graudal et al. published a meta-analysis of 114 clinical trials in JAMA, which challenged the widely accepted dietary recommendations for salt.

Defenders of the present recommendations responded with new research, and with rhetoric. They have accused their critics of playing a reckless game with the public’s health. According to cardiologist Jeffrey Cutler, M.D., of the Division of Clinical Applications and Interventions at the National Heart, Lung, and Blood Institute, it is dangerous even to publish an article on the salt controversy. He says that if people even perceive that there is a controversy, they will be less likely to follow the current guidelines.

Cutler told Science (Aug. 14) that, “As long as there are things in the media that say the salt controversy continues, they [the pro-salt lobby] win.”

Another advocate for the current dietary guidelines, Oxford University epidemiologist Richard Peto, Ph.D., argues that thousands of lives can be saved each year if the public follows the dietary guidelines, if salt intake has even a marginal—but real—effect.

Further complicating this growing controversy, some new studies show that some healthy people may in fact benefit from salt restriction, because they have a special sensitivity to salt. Salt sensitivity could account for all the statistical evidence observed for a salt/blood pressure link. However, this hypothesis is still being investigated.

Communication Questions Raised

This controversy, like so many other public health issues, raises important questions about how scientific information should be conveyed to the public. The values of honesty, openness, and autonomy seem to support a policy of full disclosure: People should be allowed to make informed choices and act on them. To make these choices, people need all the information that they find useful.

If a controversy exists concerning dietary recommendations (or global warming or passive smoking), then the public should hear both sides of the story. The best way to insure that scientific information has a positive impact on public health and public policy is, thus, to educate the public. Full disclosure is the best policy even when more of the evidence supports one side of the dispute than the other. A well-educated public is more likely to make wise choices than an ignorant one.

On the other hand, the full disclosure policy is dangerous and risky. People may be misled by too much information and by the uncertainty of scientific evidence. For most people, a hypothesis is either proven or not proven; it is either fact or falsehood. If, therefore, scientists publish results that challenge the link between salt intake and blood pressure, then many people will believe there is no evidence for the beneficial effects of reducing salt consumption. Similarly, if people learn that some scientists have questioned the statistical link between smoking and lung cancer, then some may believe there is no evidence for

continued on following page

Philosopher Resnik is a member of the medical humanities department at East Carolina University’s School of Medicine, in Greenville, N.C.

January 1999
book review

‘Baltimore Case’ Dramatically Described


By Jock Friedly

The search for “scientific truth” was the mantra of the various interests that tore down molecular biologist David Baltimore, Ph.D. [now president of Cal. Tech]. As nearly everyone in science knows by now, he is the Nobel laureate whose career was almost destroyed by allegations of fraud against a junior colleague and scientific co-author, immunologist Thereza Imanishi-Kari, Ph.D., of MIT. In 1991, Baltimore was forced to resign as president of Rockefeller University, in New York, for his supposed cover-up of Imanishi-Kari’s deeds.

As should have been clear long before, the Baltimore affair was anything but a search for truth. Unfortunately, it took 12 years for this first comprehensive and accurate account of the scandal to be published. (I should note at the outset that I had many discussions with Kevles while he was researching this case, and was graciously thanked in his Acknowledgments.)

Madness Discerned

Kevles is a historian of science. His version of the Baltimore affair is necessarily revisionist, but has none of the baggage of most revisionist accounts. It relies on no deeply hidden facts or tenuous theories. Instead, his is the simplicity of Occam’s Razor. He strips the story of its Washington “spin” and the shallow scientific mumbo-jumbo advanced by most commentators.

That Kevles was one of only a small number of observers who saw the straightforward truth in this madness is one of the greatest scandals in the fields of science, journalism, forensics, and politics.

Kevles places blame where it belongs: Among his villains are Walter Stewart and Ned Feder, the fraud-busting duo from the National Institutes of Health; Suzanne Hadley, whose tenure as deputy director of the Public Health Service’s Office of Scientific Integrity (OSI) was marked by conspiratorial visions; and John Dingell, the Michigan Democrat who Kevles sees as a modern-day McCarthy. He also takes to task gullible members of the media such as Philip Hilts, whose articles for the New York Times set the standard for ill-informed reporting on the affair.

But Kevles deserves the most plaudits for capturing the essence of the whistleblower, biologist Margot O’Toole, Ph.D. He portrays her sensitively, as a courageous person who risked much to tell what she believed to be the truth. But like no other chronicler of the O’Toole story, he deconstructs her upbringing and professional interactions to show how her penchant for rhetoric and advocacy was ill-suited for dispassionate analysis. He correctly portrays her as someone who was manipulated by others into believing a vast conspiracy was at work. She then hammered the most simple statements and events into allegations suiting this conspiratorial thesis.

Scientific Detail Presented

Kevles is a meticulous science historian. This work is by far the most careful, accurate and well-documented account ever produced on this case.

Indeed, the detail is perhaps the book’s only flaw. Sometimes, the reader loses sight of the scientific witch-hunt... continued on following page

Salt...

continued from previous page

this strong correlation.

Most people, fortunately, understand that scientific proof always comes in degrees: Proof is always relative to a body of evidence, and no theory or hypothesis is ever irrefutable.

Simple Answers Wanted

People also tend to want black and white answers to fairly simple questions. Should I control my salt intake? Yes or no? People may be confused by conflicting recommendations and complex guidelines. When confusion reigns, inaction results. Given a high degree of uncertainty and complexity, many people will decide to ignore all recommendations and set the whole issue aside. When they learn that exposure to the sun, fried foods, saccharin, processed foods, passive smoke, asbestos, hair dyes, cellular phones, power lines, and x-rays have all been linked to cancer, they have a tendency to throw up their hands and say:

“Who knows? Who cares?”

Thus, I can see how some scientists might take a paternalistic (Father knows best) attitude, given the public’s inability to understand and apply scientific information. It’s tempting to conclude that too much knowledge can be a bad thing, since it may lead to poor choices. Perhaps the best way to promote public health would be to give people a simplified version of the truth, instead of the complete, unvarnished truth.

I reject this paternalistic approach toward communicating scientific information because it sacrifices honesty, openness, and autonomy for a “greater” good. Paternalism also reflects arrogance and a self-importance that have no place in science or science policy. The scientist’s job is to gather information and to educate the public; it is not his prerogative to control, bias, or co-opt decisions and policies that properly belong to other people.

Informed people, of course, may still make unwise choices; they may choose to smoke despite mounds of data on the dangers. This is a cost one must accept in a free society. ■
In a Science Historian's Astute Account

led by Dingell and his cronies. In the first few pages of the book, for example, Kevles forces on readers such terms as the 17.2.25 gene and the C57BL/6 mice, and concepts such as DNA rearrangements as a cause for an antibody's idiotypic.

Kevles's scientific understanding, though, is also one reason why he is right on the over all case:

He understood, for example, that the famous 17 pages of data that O'Toole found in Imanishi-Kari's lab were not the smoking gun evidence of fraud or error that the media made them out to be. Though these pages conflicted with the paper that Imanishi-Kari and Baltimore, and their colleagues published in the journal Cell, Kevles correctly recognizes that lab work is filled with false starts and erroneous results. He uses his wide scope of scientific knowledge to good effect:

Physicist Richard Feynman was often cited by Baltimore's critics, because he said scientific ethics demand "a kind of utter honesty" to report "everything that you think might make [an experiment] invalid." As Kevles recognizes, this is a "mythical standard" that was not followed, or probably not even believed, by Feynman himself. In this case, the 17 pages did contradict the published paper. But these data were unworthy of reporting simply because of the mislabeling of a mouse, and the contamination of a key reagent.

Restraint Noted

Kevles uses considerable restraint in his writing. Rather than insert himself into the complexities of the evidence assembled by OSI's statistician and by the vaunted Secret Service forensic lab, he largely allows Imanishi-Kari's own experts to tear the government case apart. It did not take an expert, however, to see that both of these prosecutorial lines of evidence were sorely lacking.

The statistical case depended on methods never tried in a fraud case; they lacked relevant controls. The heart of the forensic case depended on a Secret Service assumption that only one printer existed in Imanishi-Kari's lab, when common sense, everyone else's testimony, and the Secret Service's own notes from a site visit clearly indicated the opposite. There were several printers.

Yet Baltimore's scientific critics, led by a loose-knit cabal of Harvard faculty members, took the statistical and forensic work at face value. They held Baltimore guilty of coverup for challenging this evidence.

The true lesson of this affair is that these supposed scientific skeptics abandoned their own skepticism in favor of other considerations.

Kevles Says —

"[T]his book is also about the civil rights of scientists, particularly Thereza Imanishi-Kari. Once I started studying the record of the case, several points became quickly evident:

• Imanishi-Kari had not had a fair trial.
• She had been convicted in the court of public opinion and nowhere else.
• Those who condemned [David] Baltimore for defending his collaborator overlooked or were indifferent to those crucial aspects of the case..."

— Baltimore Case, pp. 11-12

# # #

"The general press... tended to relegate Imanishi-Kari to a minor role in the drama, and cover perfunctorily — often, like Phil Hiltz [of the New York Times] getting it wrong — the bearing of the technical issues on the question of misconduct. [Stanford University ex-president Donald] Kennedy singled out Hiltz and the Times for the 'relentlessly negative' tone of their coverage, stressing that 'at no time' did they 'call attention to the failures of due process.'"

— Baltimore Case, p. 378

# # #

As we have said! — D.R.Z.

‘Sybil’ Identified

The mystery surrounding the pseudonymous psychiatric patient “Sybil,” an alleged multiple personality, is being cleared up.

Her case is important because Sybil, the book, spurred an epidemic of “multiples” diagnoses and an army of therapists eager to treat the patients. Many shrinks say, however, that the diagnosis is fraudulent, and its treaters are rip-off artists. Most patients, in this view, have more ordinary diseases, like hysteria or borderline personality disorder.

The major new finding, described in the January 4, New Yorker, is that “Sybil” was, in reality, an artist named Shirley Mason. She was born in Dodge Center, Minnesota, and died at age 75 last year. Some of her paintings are on sale at this winter’s New York Antique Show.

A second revelation comes from psychologist Robert Reiber, Ph.D., of John Jay College in New York. He was a colleague of Sybil co-author Flora Rheta Schreiber. He recently found in his desk tapes of a conversation between Schreiber and the second co-author, psychoanalyst Cornelia Wilbur, M.D., who was “Sybil’s” therapist. Reiber says, “It is clear from Wilbur’s own words that she was not exploring the truth, but planting the truth as she wanted it to be.”

Sybil thus was a “fraud,” Reiber told PROBE by phone last year. Worse, Wilbur’s manipulation of her was gross malpractice. Like “Sybil,” Wilbur and Schreiber are now dead.

(We'll print part of Reiber’s analysis of the Wilbur-Schreiber tape next month. — D.R.Z.)
Sensitivity...
continued from page 4

tests and clinical exams, Barrett discovered in the literature, couldn’t detect the putative allergies, or explain them. “Proponents claim,” Barrett writes, “that virtually any part of the body can have elusive symptoms for which no organic cause can be found.” This has led organized medicine to postulate that MCS and its variants are (1) psychosomatic or (2) malingering.

Recognition Lacking

Meanwhile, since neither the cause of MCS, nor a definition for it or the other pseudosciences — clinical ecology and environmental medicine — can be found, they have won little mainstream acknowledgement. “Clinical ecology,” Barrett reports, “is not a recognized medical specialty, is not advocated by standard medical textbooks, and is not a component of medical school or specialty training programs.”

Scientific reviews and legal reviews in the courts have been similarly dismissive, Barrett says.

Barrett is a skilled researcher. Nevertheless, he told PROBE in a phone interview, it took him the better part of a year to track down the widely-dispersed medical, scientific, legal, and administrative records on MCS. His ability and willingness to do so are valuable contributions to public understanding.

For logistic and legal reasons, even the smallest of investigations are costly in time and money. (Major exposés can be horrendously expensive: The media magazine Brill’s Content estimates, in its premiere issue, that the New York Times’ 1997 four-part exposé of the HMO Columbia/HCA Healthcare took 17 months, and cost $625,000.)

These rare nuggets should be treasured. — D.R.Z.

Special Subscription Offer for PROBE

You are cordially invited to reserve your subscription to PROBE, the critical, wholly-independent newsletter of science and medicine. PROBE publishes investigative articles and analyses. PROBE interprets developments in science and technology and explores their links to public policy and personal health.

YES, count me among those who support independent medical and scientific reporting. Enter my one-year subscription to PROBE at the special price of $60.

[ ] My check for $60 is enclosed. Please add a bonus extra month to my subscription.

[ ] Please bill me $60.

Fill out this form and mail it today:

Name:
Address:
City:
State:Zip:
Make checks payable to:
The PROBE Newsletter, Inc.
Box 1321, Cathedral Station
New York, New York 10025-1321