

CONDEMNED TO DIE FOR SCIENCE

Tuskegee syphilis experiment
allows 400 Alabama black men
to suffer without treatment

LAST July, during a hot, dry, sun-tormented afternoon in Montgomery, Ala., Charlie Wesley Pollard, a 66-year-old farmer from near-by Notasulga, was greeted with the news that he had a venereal disease. He was not seated in a doctor's office when he became privy to this information, and he was not anywhere near a city health clinic. He was standing inside Montgomery's Hooper Stockyards amid hundreds of cattle, some of which he had just sold, when a young white woman, whom he did not know and whose name he has since forgotten, approached him, introduced herself as a reporter from a local newspaper and proceeded to inform him that he, Charlie Pollard, had syphilis. Listening to this woman who may have seemed like an unstable soothsayer or clairvoyant, Pollard simply stood there, in silence, while she went on to tell him that he had had syphilis for at least 40 years and that since the onset of a 1932 U. S. Public Health Service experiment his body had been used in the name of medical science, used as one might use a guinea pig or any of those cattle now being unloaded from his truck.

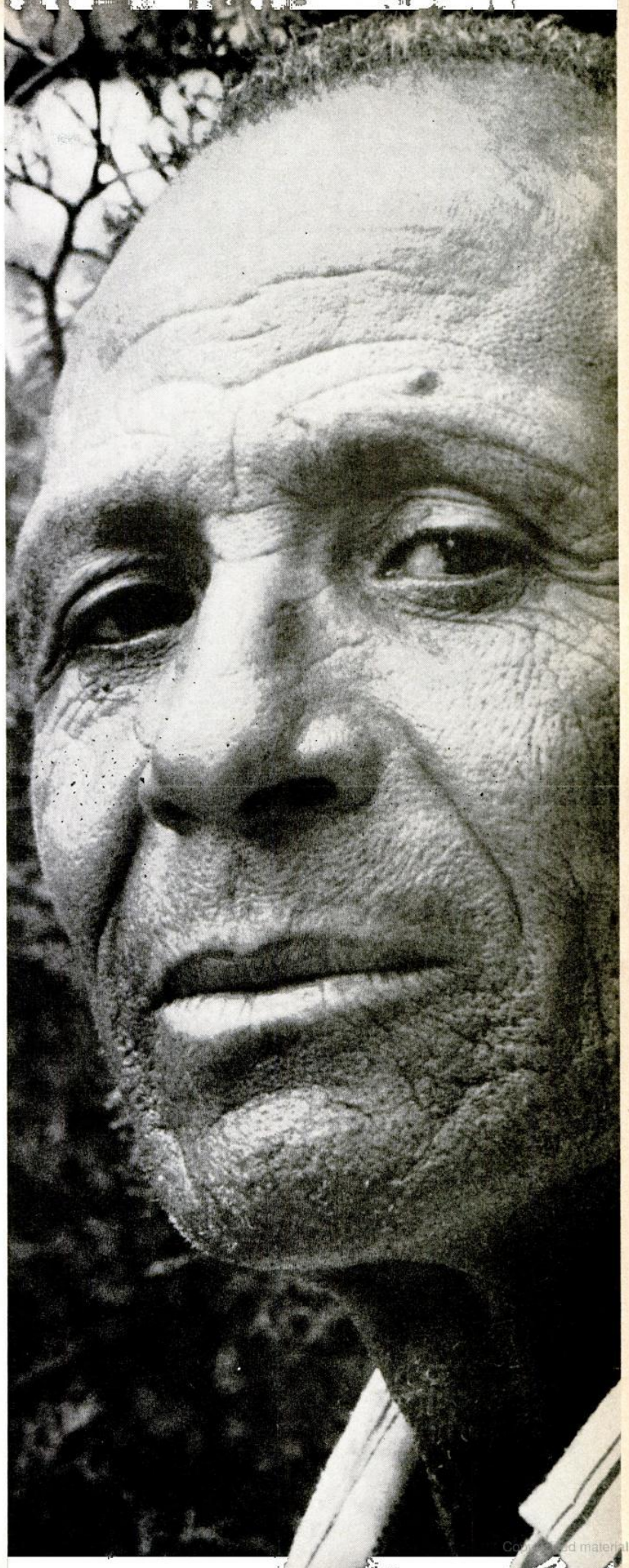
Pollard is a reserved, very patient, very polite man, a man whose most striking characteristic embodies a great gentleness, so it never occurred to him to become angry, ignore what he had just heard or perhaps usher this strange, apparently mad woman out of his way. Besides, she spoke with some knowledge, since for more years than he could remember he had indeed been undergoing medical examinations at various intervals by teams of men who called themselves "government doctors."

"You ain't got nobody's name but mine?"

Charlie Pollard, 66, a farmer living near Tuskegee, Ala., is one of 74 survivors of an experiment in which 400 black men were deliberately left without treatment for syphilis.

BY JACK SLATER

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CONDEMNED TO DIE *Continued*

he finally asked her, thinking of the scores of other men, some of them his own acquaintances, who had undergone those same examinations. Did this woman want him to become a part of another medical study? Was that it?

"Yes," she answered. "Yours is the only name I've got."

"Where did you get my name?"

She hesitated only for a moment. "From Washington."

She apparently had come to get a story, to find out, among other things, if 1) the public health officials had ever told him they were conducting a syphilis experiment on him and 2) if he had ever signed an informed consent release form permitting the government to con-

duct its experiment on him. Pollard answered "No" to both inquiries.

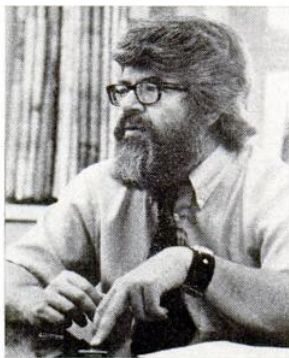
They talked a little longer, still surrounded by the cattle and the Alabama dust and the heat which was reaching migraine level. Finally, however, Pollard left the young woman and drove the 40 miles to his 500-acre farm near Tuskegee. He was disturbed and frankly he still did not believe anything he had just heard—didn't believe it until he arrived home and unfolded the afternoon newspaper, which told him more than he could wish to believe.



Dr. Donald Printz, assistant chief of VD branch at Center for Disease Control: "I don't understand why patients weren't treated after penicillin became available in 1946."



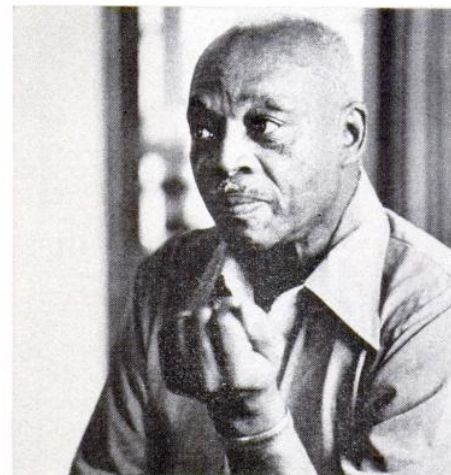
Dr. Vernal Cave, chief investigator of Tuskegee Study for National Medical Association: "Why did Public Health Service select only blacks as subjects for the Tuskegee Study?"



Dr. J. D. Millar, chief of VD branch at Center for Disease Control: "As far as genocide is concerned, I don't think the Tuskegee Study deliberately set out to harm or kill people."

port of the Medical Clinics of North America, "was there a more unique opportunity to learn what happens when early syphilis goes untreated than from the files of Professor Boeck of Oslo, Norway."

Apparently, however, the conclusions of the Oslo Study did not suit the needs of the founders of the Tuskegee project. "In the medical circles of the 1930s there was a great deal of controversy about how syphilis affected blacks and whites," says Dr. Donald Printz, assistant chief of the venereal disease branch at CDC,



Dr. J. W. Williams, an intern in Tuskegee 40 years ago when syphilis study began: "I wasn't briefed as to what the study was. . . . When reports from the blood samples came back from the state laboratory, I never saw them. I didn't know who was or wasn't reactive."

premature blindness. It was to be a scientific experiment. And they, the officials in the U. S. Public Health Service, wanted, in the fall of 1932, to study the manner in which syphilis caused death.

Of course, the physicians who originated the Tuskegee Study didn't explain their purpose in such ghoulish terms, didn't say they wanted to watch death or observe for science the syphilitic decline of black men. They did mention in a 1936 progress report that "the infected Negro population . . . seemed to offer an unusual opportunity to study . . . the disease to the death of the infected person." But for the most part any tacit hints of racial callousness were banished from their published statements to give way to the neutral, objective, reasonable language of science: "Because of the lack of knowledge of the pathogenesis of syphilis," says a recent background paper by the PHS Center for Disease Control (CDC) in Atlanta, "a long-term study of untreated syphilis was considered desirable in establishing a more knowledgeable syphilis control program."

All of which, it should be stressed, may indeed have been true. Yet, it didn't seem to matter that scientists even then, in the fall of 1932, already knew how the untreated syphilis germ affected the human body, already knew the precise "pathogenesis of syphilis" from data obtained from an earlier Oslo (Norway) Study in which treatment had been withheld from 1,976 syphilitics during the 20-year period between 1891 and 1910.

"Nowhere in the world," states a 1964 re-

port of the Medical Clinics of North America, "was there a more unique opportunity to learn what happens when early syphilis goes untreated than from the files of Professor Boeck of Oslo, Norway."

According to other VD specialists, however, the Printz statement has little or no basis in fact. "The presumed manner in which syphilis affects blacks and whites has been in the literature for years, and frankly I have never seen it properly documented," declares Dr. Vernal G. Cave, the black director of New York's Bureau of Venereal Disease Control. "And even if it were true, even if blacks did have a higher rate of syphilitic heart disease, what the hell difference would it make? You don't begin that kind of study to pick up a crumb."

WHATEVER the real reason, whether for science or because of some unspeakable indifference to human suffering, the Tuskegee Study did begin—if only for a crumb. Whether a few medical scientists wanted sincerely to diminish the Tuskegee area's high syphilis rate or whether they wished (as one physician suggests) to outdo the Oslo Study—whatever the reason—the fact remains that 28 black men, and perhaps as many as 100 or more in the study, have died directly as a result of untreated syphilis, while 154 have died of the disease's

WASHINGTON, July 25 (AP)—For 40 years the U. S. Public Health Service has conducted a study in which human guinea pigs, denied proper medical treatment, have died of syphilis and its side effects.

The study was conducted to determine from autopsies what the disease does to the human body. . . .

The experiment, called the Tuskegee Study, began in 1932 with about 600 black men, mostly poor and uneducated, from Tuskegee, Ala., an area that had the highest syphilis rate in the nation at the time.

One-third of the group was free of syphilis; two-thirds showed evidence of the disease. . . .

The Tuskegee Study began 10 years before penicillin was discovered to be a cure for syphilis. . . . Yet even after penicillin became common, and while its use probably could have helped or saved a number of the experiment subjects, the drug was denied them. . . .

The sun was going down by now, and a kind of Alice-in-Wonderland air of unreality arrived with the dusk. Later, much later, Charlie Pollard would tell another reporter

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CONDEMNED TO DIE *Continued*



Tuskegee neighbors Anita Lennard (l.) and Sally Robinson explain they were shocked at disclosures surrounding Tuskegee syphilis experiment. "The study shows that black people have been fooled once again," says Mrs. Lennard. "There's nothing to say," Miss Robinson adds, "except that the study is outrageous."

grim side effects. The 74 known survivors, including Pollard, have a latent, non-communicable form of the disease, which is now considered "dead" and non-infectious.

The study began, ironically, during the same year Adolf Hitler, who would soon initiate his own "experiments" in the name of medical science, rose to power. In fact, it was Hitler's misuse of humans as guinea pigs which led in 1946 to the establishment of the Nuremberg Code, a series of ethical guidelines meant to be applied world-wide to all human experimentations, including those then and now being performed in the Tuskegee project.

The project got under way with recruitment drives in private homes, community stores and in various churches after Sunday morning services in Tuskegee and throughout the surrounding back country of Macon County, where the high rate of syphilis was due to the area's general lack of health care facilities.

Unemployed, poor and made poorer by a devastating Depression, the recruits were tempted by the PHS offer of free hot lunches, free medical care and free burial service. ("Often it was the 'only insurance' they could hope for," said public health nurse Eunice Rivers in a 1953 report.) And so they came, more than 1,700 of them, from the decaying plantations of the county, from the tenant farms and the economically unstable hamlets of Shorters, Hardaway, Sambo, Notasulga,

Chesson, Liverpool, Millstead, Cecil—towns (some of them vanished now) in which a team of government doctors and nurses formally initiated the study by selecting blood samples from a random 1,782 black males who were 25 to 70 years old.

Of the 1,782, some 400 men who had syphilis were chosen to go untreated, while another 201 who were free of the disease were selected to be the control group.

"I wasn't briefed, even as a doctor, as to what the purpose of the study was," says Dr. J. W. Williams, 73, a black Tuskegee physician who was an intern at the local John A. Andrews Hospital when the project began. Dr. Williams, then 33, was asked by his superiors at the hospital to assist the newly arrived public health doctors "in whatever duties they would require." Those duties, he says, "consisted of selecting blood samples and later injecting some of those patients with what I thought was neo-arsphenamine [the mercury-arsenic compound used at the time to combat syphilis]. Now, in retrospect, I sometimes think the injections I gave may have been a placebo [a substance administered purely for its psychological benefit]. But I can't be certain," Dr. Williams admits.

Did he ever at any time become aware that the patients were not receiving treatment? "When the reports from the blood samples came back from the state laboratory in Mont-

gomery, I never saw them," recalls Dr. Williams, who stayed with the study for only a few months. "I didn't know who was reactive and who wasn't."

Eunice Rivers, however, apparently did know. As the public health nurse for the Tuskegee Study from its inception, Miss Rivers, who is black, had broad contact with the patients and, as she also states in her article in *Public Health Reports* (April 1953), "was thoroughly familiar with their local ideas and customs."

Today Miss Rivers is retired, but in 1932 and during the later years of the study she served as a liaison between "the government doctor" and the "government patient," transporting recruits to and from examinations and following up the patients after the physicians returned to Washington.

Miss Rivers' article is, therefore, worth quoting at length, partly because it reveals a particularly condescending attitude the PHS physicians held toward their black patients and partly because it exposes the extent to which Miss Rivers, like her patients, was unknowingly and tragically used. Here is her account of what the project was really about:

A most important phase of the study was to follow as many patients as possible to post-mortem examination, in order to determine the prevalence and severity of the syphilitic disease process. Cooperation of patients with this plan was sought by offering burial assistance (through a private philanthropy, the Milbank Memorial Fund) on condition that permission be granted

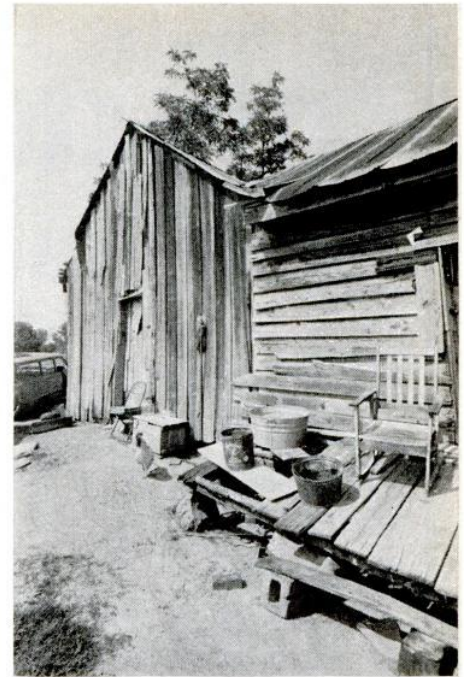
for autopsy. For the majority of these poor farmers, such financial aid was a real boon. . . . The Federal Government offered physical examinations and incidental medication, such as tonics and analgesics, but was unable to provide financial assistance on a continuing basis. The Milbank Memorial Fund burial assistance made it possible to obtain a higher percentage of permissions for post-mortem examinations than otherwise would have been granted.

Speaking of herself in the third person, Miss Rivers now describes the men as she transports them to and from medical examinations:

Later, the nurse's small car was replaced with a large, new, government station wagon. The ride to and from the hospital in this vehicle with the government emblem on the front door, chauffeured by the nurse, was a mark of distinction for many of the men who enjoyed waving to their neighbors as they drove by. They knew that they could get their pills and "spring tonic" from the nurse whenever they needed them between surveys, but they looked forward happily to having the government doctor take their blood pressure and listen to their hearts. Those men who were advised about their diets were especially delighted even though they would not adhere to the restrictions.

Because of the low educational status of the majority of the patients, it was impossible to appeal to them from a purely scientific approach. Therefore, various methods were used to maintain and stimulate their interest. Free medicines, burial assistance or insurance (the project being referred to as "Miss Rivers' Lodge"), free hot meals on the days of examination, transportation to and from the hospital, and an opportunity to stop in town on the return trip to shop or visit with their friends on the streets all helped. In

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Throughout back country (above) of Macon County, Ala., and in town of Tuskegee, recruitment drives to secure experiment subjects got underway in fall of 1932. The Depression and poverty in general encouraged recruits to accept free lunches and free burials.

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Charles M. Kever, mayor of Tuskegee when disclosure of syphilis experiment was made in July, says of the Tuskegee Study: "It's a very small pig, and it seems that a great big hog has been made out of it. It's been blown out of proportion," he maintains.

CONDEMNED TO DIE *Continued*

spite of these attractions, there were some who refused their examinations because they were not sick and did not see that they were being benefited. *Nothing provoked some of the patients more than for a doctor to tell them that they were not as healthy as they felt. This attitude sometimes appeared to the examining physician as rank ingratitude for a thorough medical workup which would cost anyone else a large amount of money if sought at personal expense* [italics added]. At these times the nurse reminded the doctor of the gap between his education and health attitudes and those of the patients.

Various attempts have been made by various reporters to talk with Miss Rivers, but to most of them (as far as can be determined) she declines to say anything regarding the Tuskegee project. In Tuskegee, when EBONY telephoned Miss Rivers to request an interview, she said, "I have nothing to say."

BY 1946, the Tuskegee Study had been in existence for 13 years. Penicillin, discovered three years earlier, had just become generally available to the medical profession. The Nuremberg Code, just promulgated, was being hailed as a giant step forward for the civilized world. And the Tuskegee Study, already written about in 1936, was discussed in 1946 in at least two medical journals and was being hailed, moreover, as an experiment "of great scientific interest to the medical community . . . widely discussed at medical meetings and . . . the subject of [by 1971] not less than 15 papers published in . . . American medical literature," says a recent PHS background paper. Still, in spite of the interest it generated, in spite of the Nuremberg Code and the civilized world, penicillin, the miracle drug in the mid-'40s, was not given to the Tuskegee survivors. Why?

In his Atlanta office of the Center for Disease Control, Dr.

Johnny Ford, Tuskegee's new mayor who took office in October, says of the syphilis experiment: "I was shocked to realize that lives had been lost and damaged just for experimental purposes. But what I am really concerned about is the way the image of the city of Tuskegee has been marred."



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Sitting in town square in front of Tuskegee City Hall, residents discuss news about Study. Tuskegee's population is 11,028, of whom 84.6 per cent are black.

CONDEMNED TO DIE *Continued*

J. D. Millar, chief of the VD branch at CDC, explains that he doesn't know why. "That's what is concerning everyone," he says. "We can't tell you at this point why the decision was made, or why there was no decision at all." Then he suggested that simple indifference to the fate of the Tuskegee patients might have been involved: "It may well be that there was simply a lack of decision [to administer penicillin]. People didn't identify this group and say, 'Ah, ha! Now we have this brilliant new drug and we need to treat those people.' That process," explains Dr. Millar, who seems quite unaware of the condemnation implicit in his words, "just may not have occurred."

When he was interviewed by the Washington Post, a physician who joined the Tuskegee Study in 1950, Dr. Sidney Olansky of Atlanta's Emory University Medical School, explained it this way: "We did not know enough. We would not have been comfortable about treating this group with penicillin until the mid-1950s."

Perhaps so, but Dr. Vernal Cave disagrees. "By 1946," he declares, "standardized treatment schedules for the treatment of all stages of syphilis—primary, secondary, latent and late—had been established. Moreover, in 1946, we hadn't yet become aware of penicillin's allergy reactions. And besides, if the Public Health Service withheld treatment from the Tuskegee patients because it believed the benefits of *not* treating them were better, then it is guilty of having disseminated all over the nation information encouraging treatment of syphilis at all stages."

NONE of these retorts, explanations, hastily assembled justifications and charges of genocide swirling around the Tuskegee project would probably be occurring today if it hadn't been for

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In Tuskegee law office of Fred D. Gray (r.), Charlie Pollard confers with the attorney in attempt to secure compensation for 40-year service as human guinea pig.

CONDEMNED TO DIE *Continued*

the alertness of Associated Press correspondent Jean Heller, 30, who learned about the existence of the study in July when she was covering the Democratic National Convention in Miami.

A few weeks prior to the convention, one of Miss Heller's colleagues based in San Francisco had been told of the Tuskegee project by a former employe of the U. S. Public Health Service in that city. Since the Tuskegee area was beyond the "beat" of AP's San Francisco office, the colleague passed her information along to Miss Heller, who is based in Washington. After the convention, Miss Heller immediately began her research into the Tuskegee Study, and three weeks later, on July 25, she filed her story.

One of the persons probably most embarrassed by Miss Heller's disclosure was her namesake, a noted scientist Dr. John R. Heller, whom Dr. Millar cites as the originator of the Tuskegee Study. An assistant surgeon general at PHS in 1932 and later chief of the service's VD division during those crucial years between 1943 and 1948 when penicillin became widely available, Dr. Heller says today of the Tuskegee project: "There was absolutely no racial overtone, and this was not an attempt to exploit the Negroes. We told them what they had." Nevertheless: "It never occurred to us to ask for penicillin because the demand was so great for other people who needed it much more than they did. We were not responsible for getting it to them, so we made no effort to get it."

When Miss Heller's disclosures became public, congressional leaders and other government officials reacted with expressions of "outrage," "disbelief," "horror," "shock" and "dismay." And so a month later, on August 24, the inevitable panel to investigate the Tuskegee project was appointed by Dr. Merlin K. DuVal, assistant secretary for health and scientific affairs in the U. S. Department of Health, Education and Welfare.

A prepared HEW statement quotes Dr. DuVal as saying, "The panel will review all of the available evidence and evaluate the ethical and scientific merits of the study against the backdrop of the social and scientific history of the period from 1932 to 1972."

The town of Tuskegee displayed mixed reactions to the disclosure of the syphilis experiment. During interviews with EBONY, some Tuskegee citizens indicated that they did not want to discuss the study, while others said they had no opinion about it. Others, however, were quite vocal and bitterly angry.

"The study shows that black people have been fooled once again," said Mrs. Anita Lennard, a black housewife.

Miss Sally Robinson, a white elementary school teacher, indicated that she felt the study could have only been perpetrated against powerless people. "I would assume at least that it would only happen to people who were without power," she said, "people who were unknowing and unable to protect themselves."

One white citizen, however, didn't agree with Miss Robinson's analysis. Charles Keever, mayor of Tuskegee at the time of the experiment's disclosure, put it this way: "It [the study] has certainly been blown out of proportion. It's a very small pig, and it seems that a great big hog has been made out of it. It's only small in my thinking. In Pennsylvania in the flood areas, those people are suffering up there, too. I mean, black and white, up

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there. You have some people up there," said the perspicacious mayor, "who don't even have a shelter over their heads."

In the meantime, Charlie Pollard and many of the other 74 survivors have asked Fred D. Gray, the prominent civil rights attorney, to represent them in efforts to secure compensation for their 40-year service as human guinea pigs. "We represent," says Gray, "a substantial number of those who are still living and also some widows and other heirs of the deceased participants in the study."

Fifteen years ago, the government made an effort to compensate Charlie Pollard and the other survivors of the project by awarding them a 25-year certificate and a few new, crisp bills amounting to \$25 in appreciation of their long service to U. S. Public Health. Pollard's certificate, awarded in 1958, read:

U.S. PUBLIC HEALTH SERVICE

This certificate is awarded to
CHARLIE POLLARD

in grateful recognition of 25 years
of active participation in the
Tuskegee medical research study.

Pollard remembers the little ceremony during which he received the certificate quite well, remembers the warm thanks given him and the others, and the broad smiles of the PHS officials. "I been looking for that certificate," Pollard recently said, also smiling, "to give to the lawyer."

Not long ago, Dr. Millar, who has been struggling for the past several months with the implications of the Tuskegee Study, attempted to sum it up: "I think there were racial overtones, because if you were looking for a group with which to do a long-term study, what kind of group would you look for? First of all, you would look for one that is reasonably stable. Secondly, one that is compliant and will do what you tell them to do. And, thirdly, one that will not ask too many questions. Well, you can take all of those points and apply them more to the black population at that time than to the white. . . . The question I have been asking myself of late is: Would it have been conceivable to do such a study on whites? My feeling is that the study would not have been done on whites."

Pausing at statue of Booker T. Washington on Tuskegee Institute campus, Pollard seems to be reflecting about campus' academic fame and town's syphilis humiliation.

