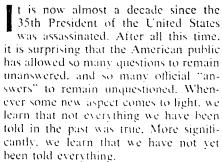
"President Kemedy's Brain Is Missing"

MEDICINE/BY PAULETTE COOPER IN COLLABERATION WITH DR WECHT



"Mystery Cloaks Fate of Brain of Kennedy," the New York Times announced last August in a front-page report. "The preserved brain of President Kennedy, plus microscopic slides of tissues removed from his bullet wounds, have been withheld, apparently by the Kennedy family, from the assassination evidence in the National Archives, a medical expert said today."

The expert was Dr. Cyril H. Wecht, coroner of Pittsburgh and Allegheny County, Pennsylvania, and a past president of the American Academy of Forensic Sciences. A longtime critic of the Warren Commission's official findings on the assassination, Dr. Wecht expressed the opinion that questions about President Kennedy's wounds would remain unanswered as long as the brain and slides are withheld from examination. But on the basis of the x-rays, 69 autopsy photographs, bullets and other materials that he was allowed to examine, he is firmly convinced that the medical evidence "proves a conspiracy," and that the President's death cannot reasonably be attributed to a lone assassin, Lee Harvey Oswald.

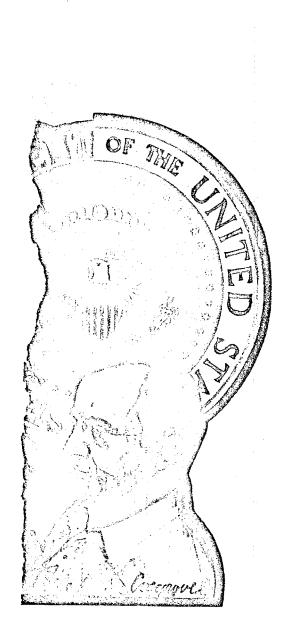
Not everyone concurs with Dr. Wecht. Some forensic pathologists—who are really medical detectives—criticize him for making such statements, since these doctors traditionally limit themselves to questions of what-done-it rather than who-done-it. But one cannot easily dismiss Wecht's findings and conclusions, for he is not only a medical doctor and a lawyer, but a specialist in precisely that branch of pathology which is basic to an

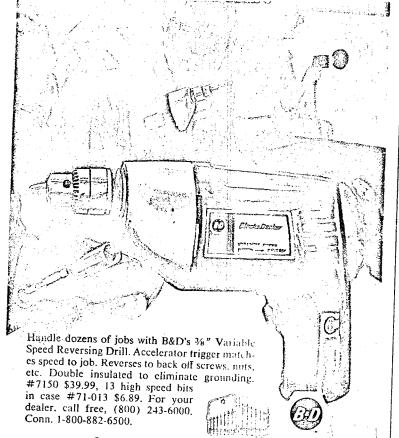
Vital materials have "disappeared" from the JFK assassination evidence stored in the National Archives. Why? Who has them now? Their examination by top medical detectives could bring an end to a decade of doubt and suspicion

understanding of the JFK assassination.

Medical detectives usually have no problems with bullet-wound cases since the cause of death is obvious. More often, difficulties arise in determining whether the death was homicidal, suicidal or accidental. Even when this factor is known, however-as in the Kennedy case—the medical detectives are often called upon to provide collateral information, such as where the bullets entered and exited, their exact location, path through the body and other pertinent data. From a medical detective's point of view, the questions of where the bullets entered and exited Kennedy's hody, and their exact location and number, are the most important questions of the JFK assassination. All the theories concerning all those people supposedly seen doing all that shooting from all different directions that day in Dallas are simply a matter of conjecture. What really counts is whether there is physical evidence to prove that the bullets entered Kennedy's body from behind (where the Texas School Book Depository was located) and above (from the sixth-floor window), and how many bullets actually entered his body.

In most cases it is not too difficult for medical detectives to decide whether a bullet wound is one of entrance or exit, because the wound created by a bullet when it enters the body is usually smaller than the hole it makes when it leaves. Sometimes, in fact, the entrance wound is even (Continued on page 116)





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PRESIDENT'S BRAIN (Continued from page 45) smaller than the diameter of the bullet, because the skin is extremely elastic and tries to return to its whole condition. The exit wound is usually the larger of the two because as the bullet rips through the body, it is unable to tear apart all the tissues in its way. As a result, some of this tissue travels along with the bullet, so that when the missile finally emerges, it creates a larger, more ragged and bloodier wound than it did when it entered the body. Unfortunately, the three Navy and Army doctors who per-

formed the Kennedy autopsy were very inexperienced in these matters—the head of the team had handled only one bulletwound case before Kennedy's-and they had the additional problem of being unable to measure both wounds and thereby determine which was the entrance wound and which the exit wound. They could not measure the front wound because when Kennedy was brought into Parkland Hospital, the Dallas surgeons had performed a tracheotomy on him in a futile attempt to resuscitate him. Since he already had a bullet hole in his throat, they enlarged the same hole for the operation thereby changing the size and characteristics of the wound Although the autopsy doctors at the Bethesda, Maryland Naval Hospital should have phoned the Dallas surgeons who could have given them the dimensions of the front wound before the tracheotomy-they didn't. So, by examining only

the wound at the back they came to the decision that the hole in front was an exit wound-which led to the conclusion that

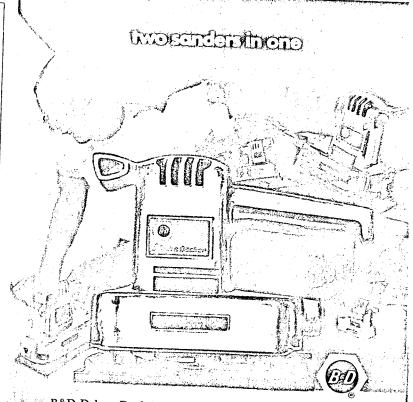
Kennedy had been shot from the rear where Oswald was alleged to have been standing. It is possible that this crucial decision was wrong, for the size of each wound was determined later by querying each set of surgeons independently during the Warren Commission hearings. Those who saw the wound before it was altered, described it as between three and five millimeters in diameter. But the back-or so-called "entrance"-wound was four to seven millimeters, which means that it was in all likelihood larger than the one in front. Although it does sometimes happen that an entrance wound is the bigger of the two, it is not a very common occurrence. Dr. Wecht feels that it is highly

possible that the smaller front hole was really an entrance wound. And, if that is true, Kennedy was not shot from behind by someone at the Texas School Book Depository as the Warren Commission maintained-or he was shot from the front as well, which they did not claim.

An alternate method of determining whether or not that first shot was fired from the sixth-floor window of the Texas School Book Depository is to examine the location of the two wounds to determine the angle of the bullet. If Kennedy was shot from behind and from six floors up, the wound of entrance in the back would have to be higher than the one in front. And that's exactly what the autopsy report claims. But the diagrams drawn at the autopsy-before the doctors held a team meeting to decide what the autopsy report should say-placed Kennedy's back wound four inches lower than they later reported it to be. If the diagrams—rather than the report—are correct, then the bullet appears to have entered at a lower spot than the point at which it exited-which would be a pretty neat trick for a rifleman shooting at someone six floors below.

To be scrupulously fair, the discrepancy between the diagrams and the report may have been an honest error made by a group of men who had little experience with bullet wounds. But, Dr. Wecht points out, they drew the location of everything else—such as birthmarks and sears—correctly, and missed only on the all-important location of the Kennedy back wound. Unlikely as a miscalculation of four inches is, Dr. Wecht notes, the discrepancy in the location of the bullet wound is even more glaring, because the final autopsy report placed the bullet wound in the wrong part of Kennedy's body. It said the wound was in his neck, when the diagrams drawn at the autopsy placed it four inches below, in his back,

There was only one way that such a mistake could have been made. The bullet hole in the back of Kennedy's jacket was four inches lower than the point at which the autopsy report placed the wound. This was attributed to the jacket bunching up around his neck as he waved to the crowds-but this explanation tends to be refuted by the photographs taken at the scene. Only by allowing that the jacket was bunched, and that



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the surgeons performed their autopsy on the jacket, rather than the president's body, does such a mistake seem possible.

In addition to the small size of the front exit wound and the angle of the bullet, there is other evidence that lends support to the theory that Kennedy may have been shot from the front and toward the right. All the doctors in Dallas who saw Kennedy thought that his massive head wound, caused by the second bullet, had been inflicted by a missile fired from the President's right—which happens to be where the grassy knoll was located.

The only motion picture of the assassination (taken by home-movie buff Abraham Zapruder), clearly shows that as Kennedy was struck by the second fatal shot, he moved backward and to the lefta strange movement if he was shot from behind, considering the impact of the heavy (160-grain) high-speed (2200 feet-per-second) military bullet. None of the explanations offered for Kennedy's backward and leftward movement has been convincing, for the Zapruder film shows that his head didn't strike anything, Jackie Kennedy didn't touch him then, and the Kennedy car didn't accelerate until three seconds later. Oddly enough, few people know of this strange backward movement at the moment of impact, for the Warren Commission somehow got confused and two crucial frames of the Zapruder film were switched in the printing of the Warren Commission Report. The result was that it looked as if Kennedy had moved forward-as if struck from behind-and not backward as he really did. In December, 1965, J. Edgar Hoover frankly admitted that "a printing error had been made" in frames 314 and 315 of the Zapruder film.

In addition to all these disputations, many experts have criticized the Warren Commission for adopting the "single-bullet theory" which purports to explain what happened to the first bullet after it had passed through Kennedy's body. This theory states that the bullet entered Kennedy's back, exited through his neck-and then proceeded to strike Governor Connally in the back, wrist and thigh. Those who know nothing about the meanderings of bullets have dismissed this as inherently preposterous. But there have been cases where bullets have ended up in surprising places, as one man learned when he attempted suicide by shooting himself in the heart-and woke up in the hospital to find the bullet lodged in his scrotum. The explanation for this is that when a bullet strikes bone it may deflect. The Warren Commission claimed that this is what happened in the Kennedy case, but the bullet that passed through the President's neck did not strike any bones. It passed through cleanly, and then-incredibly-veered right and struck Connally in several places. Connally, who had time to turn around after he heard the first shot, said it was "inconceivable" to him that he had been struck by the same bullet that hit Kennedy.

Another thing that makes it difficult to accept the single-bullet theory is the weight of the bullet after it allegedly did all that damage. By comparing the mean weight of similar bullets, it was established that this one weighed 160 to 161 grams before it was fired. After completing its alleged journey through seven layers of skin (which offers

a great deal of resistance), plus two large bones (Connally's rib and wrist), it weighted 158.6 grams. Not only was the weight almost the same, but the bullet was in practically perfect condition, save for some slight flattening on the bottom one-third.

Scientifically, there are two ways to evaluate the validity of the single-bullet theory and to determine whether or not the bullet was later deposited on the stretcher as many critics of this theory have suspected and for stated. The first is to do neutron activation analysis. This has never been done, and medical detective, Dr. John Nichols of the University of Kansas Medical School, was recently turned down when he brought suit to force the National Archives to permit him to perform such tests. Further clarification might be had from a spectrographic analysis of all the recovered metal fragments-and this has been performed. But the results of this test have never been released, and Dr. Wecht has discovered that the report on the analysis is also mysteriously missing from the National Archives.

A third method of determining whether the same bullet passed through Kennedy and hit Connally would have been to examine Connally's suit at the point where the bullet penetrated. When a bullet is released from a gun it has lubricating grease on it from the barrel, but when a bullet goes through a human body the grease is wiped clean and there are no trace elements from metallic particles. If such traces of metal and grease had been found on Connally's suit, the bullet could not have gone through Kennedy, But, Dr. Wecht has discovered that while Kennedy's clothes were examined immediately after the assassination, Connally's were not analyzed until after his suit had been dry-cleaned and his shirt laundered.

Dr. Wecht has raised other disturbing questions concerning some of the materials he examined at the National Archives. In one of the large photographs of Kennedy's brain-in the anterior portion of the right cerebral hemisphere-he saw a dark brownish-black object approximately one-half by three-fourths of an inch. Actually, the object may have been larger than it appeared to be in the photograph, since the brain was overriding the borders of the print and thus prevented Dr. Wecht from ascertaining its exact size and shape. This mysterious object was never mentioned in the final autopsy report, though the report scrupulously accounted for more than 35 metal particles in Kennedy's head-most of which were the size of a grain of sand. Since the autopsy doctors did not publicly comment on it, and the brain and tissue slides are unavailable, Dr. Wecht can only guess that the object may have been a hemorrhage caused by the gunshot wounds, a piece of metal (such as a bullet or bullet fragment) or, perhaps, a brain tumor or some sort of vascular malformation.

Dr. Wecht does not believe that it's a hemorrhage caused by gunshot wounds, for, he says, if that were true, it would have been noted in the autopsy report. He is convinced that because of the object's size, it would have been impossible for the three autopsy doctors to have missed it, and that its omission in the report therefore had to be deliberate. If it was a bullet fragment or a bullet, it raises some interesting questions, for there could not have been another

Fallet in Kennedy's head if he had been such by only one gunman who had shet him only twice. And if it's the third possibility—a brain tumor or some kind of vascular malformation—had it already affected him in any way, or would it have ultimately affected him had he lived?

Dr. Wecht explains that it would be possible to determine where the bullet entered and exited by examining the Kennedy brain. since bullets burn and soil tissues around the point of entry but not at the exit point. But when Dr. Wecht got to the National Archives and asked to see the brain (after having written in advance to say that he wanted to see it), he discovered that the brain had somehow "disappeared." Wecht didn't feel that this was a total disaster, for he knew that microscopic slides were made at the supplementary autopsy and that these would also show the same burning and soiling at the entry wounds. But when he asked to examine these slides, he learned they also had vanished. Granted, it is common practice to burn a brain after the supplementary autopsy is completed. But, Dr. Wecht asks, "Who would take the responsibility for destroying a President's

In interviews with government officials and President Kennedy's former personal secretary. Evelyn Lincoln, New York Times reporter Fred P. Graham learned that "the slides and probably the brain," which was preserved in a container of Formalin, "were delivered in a locked chest to a representative of Senator Robert F. Kennedy in 1965." But when the autopsy materials were placed in the National Archives in 1966, "the brain and possibly some other items were not included."

Another odd thing in the autopsy photographs is the loose flap of skin on the *left* side of the back of Kennedy's head, which amazingly enough also went unmentioned in the autopsy report.

If Kennedy was shot from behind and through the neck with one bullet, and in the rear right side of his head with another, as both the autopsy report and Warren Commission stated—then any destruction on the left side certainly warrants additional investigation. It should, in fact, have been investigated at the time of the autopsy. But, incredibly enough, the three autopsy surgeons never made a thorough examination of Kennedy's head to see if any other bullets had struck him. This is all the more curious since it is usually standard procedure in such cases to go through the hair carefully or to shave portions of the scalp altogether to see if—as occasionally happens—a bullet wound is hidden by the hair and missed because it doesn't bleed. But no such examination was made. In view of the damage to the left side of Kennedy's head, and of Kennedy's leftward movement on the Zapruder film, the missing brain would seem to be essential if an accurate reconstruction of the assassination is ever to be made.

Dr. Wecht's findings, statements and accusations did not please a number of people, and he remains an outspoken critic of the Warren Commission Report. Before he went to the National Archives, he had written articles voicing his doubts concerning the official version of the assassination. As a result, he was not welcomed with open arms when he asked for permission to view the evidence in the National Archives. In

August 1971, he wrote a letter to Burke Marshall, the Kennedy family lawyer (and the man who decides which doctors may see the materials), requesting permission to view the evidence. Marshall replied that Wecht would have to ask the National Archives, and when he did, the Archives people wrote him back and said that he had to write to Marshall! Marshall pretty much ignored Wecht's letters for a year until Fred Graham of *The New York Times* evinced interest in doing a story on the runaround Wecht was being given. At this point, the material was made available.

It is certainly unfortunate that the doctors who performed the autopsy made so many errors and omitted so much crucial data in their report. Only one of the three men, Lieutenant Colonel Pierre Finck, was a forensic pathologist, and his experience seems to have been limited to reviewing other people's cases rather than working on bullet-wound cases firsthand. He was further handicapped by arriving after the autopsy had started, and his authority may have been limited as an Army doctor working with two Navy doctors in a Naval hospital

Despite the errors and omissions in their report, the three autopsy doctors may have done a better job than we know. It's possible that they may not have been permitted to release all their findings, or that their report may have been changed later, or that they were working under some sort of control during the autopsy. At the Clay Shaw trial in New Orleans, when District Actorney Jim Garrison asked Dr. Linck why they hadn't performed the standard procedure of dissecting the wound in Kennedy's

back in order to determine the path of the bullet. Finck replied, "We were told not to." Not dissecting that wound was a great mistake, for it would have shown whether the bullet that supposedly entered from behind really traversed Kennedy's body and came out in the front of his neck or whether the wound in Kennedy's back and the one in his throat were the result of two different bullets—one fired from the front and one from the rear.

Admiral Burkley, Kennedy's personal physician, who received the autopsy report immediately after it was completed, has admitted that he revealed only those por-tions that he considered "necessary." Two months later the Secret Service received it. and two months after that, the FBI. It would appear, then, that the only autopsy report that ever told the entire story was the first one, and it is unlikely that the American public will ever know its contents. But the oddest and most unconventional aspect of the entire autopsy was the tact that the first report written-the one that said where the bullets actually entered and exited, where the bullet wounds were really located, how many bullets struck President Kennedy, and how many may have been left in him-was burned by the chief autopsy doctor immediately after he wrote it. And to many minds, that is perhaps the most suspicious of all the puzzling and unorthodox occurrences in the entire JEK assassination case.

And so the American public, unable to find out the real truth, will continue to speculate on rumors and possibilities. Many of those who have studied the assassination

stars about the photographs of the lexas School Book Depository which showed a man who looked like Oswald standing at the first floor of the building rather than at the sixth-floor window. They will continue to examine photographs of the sixth-floor window which were taken seconds before the assassination and clearly showed two men up there. And who was the man in Dallas who went around calling himself Lee Harvey Oswald when Oswald was supposedly out of the country-and why didn't he ever appear again after the assassination? And what about the man and his son who saw "Oswald" repeatedly practicing at a rifle range before the assassination? And the woman who earlier heard three men plotting to assassinate the President and who said that Lee Harvey Oswald was one of the three? And who were the people at the grassy knoll right after the assassination who told the police they were Secret Service men, although the Secret Service said that none of their men was there at the time? There are many, many questions and, almost a decade later, still too few answers.

In light of Dr. Weeht's findings and assertions, perhaps it is not too much to suggest that the answers to at least some of these questions may be found in the tissues of President Kennedy's missing brain—along with some clue as to what Jack Ruby meant when, walking from his jail cell to the courtroom one year after the assassination, he was overheard to mumble: "Complete conspiracy..., and the assassination, too..... If you knew the facts you would be amazed...."

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