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LETTERS

Cook on Cohen

Interlaken, N. J.

DEAR SIR: It is unfortunate that Jacob Cohen did not take the trouble to read with greater care, or to interpret with greater scrupulousness, the account of the Kennedy assassination that I wrote for *The Nation* [issues of June 20 and July 11]. . . .

Cohen leaps, by a process of logic that baffles me, to the conclusion that I hold the autopsy report in the Kennedy assassination to have been falsified. I have not said so nor am I convinced at this point that it was. There are certainly peculiar circumstances surrounding it—and surrounding the suppression of the missing X-rays and pictorial evidence—and all of this is food for suspicion. That is all I pointed out, and for a very good reason. There may be, in part at least, another explanation—that some of the autopsy work, like much else in the investigation, was bungled.

The testimony in the record describing the autopsy certainly indicates that the pathologists could not get a probe through the back neck wound. In researching my own article, I checked with a doctor friend who had interned and been a resident at Bellevue. He had assisted in autopsies performed by Dr. Milton Helpern, New York's chief medical examiner, and Dr. Gonzalez, the great expert who preceded him. My friend's explanation was this:

When the President was first wounded, he had his hand up waving to the crowds; this meant that the muscles of his back would be drawn up to some degree. In death, with his arms at his sides, these muscles and tissues would fall back into their normal place, closing the path of the wound. Expert criminal pathologists like Dr. Helpern or Dr. Gonzalez, faced with this kind of problem, would work the arm up and down until they had re-created the position of the tissues at the moment of impact—and then a probe would slip through, establishing an exact trajectory. My doctor friend says he has seen this kind of examination performed many times in Bellevue. You can, he says, be an expert pathologist, but criminal pathology is a specialty of its own, and unless you are especially experienced in its techniques, it is easy to be baffled.

What we are left with, then, in the commission report

is a trajectory as it has to be estimated from the autopsy findings, which do locate positively the entrance wound in the back and the exit wound in the front. I concentrated on these fixed and established points, the only details that are fixed and established, and again I think Cohen distorts my position when he says I "believe" the first bullet hit too low in the back to have exited from the President's throat and then hit Connally. It is not what I believe that matters, nor did I write for *The Nation* on the basis of a "belief." It is what the autopsy report specifically shows, and I would like to get that point across to Cohen.

Leaving all drawings and speculations about missing X-rays and photographs aside, Commander Humes's autopsy report specifically locates the wounds. The entrance wound was 14 centimeters, about 5½ inches, directly in from the tip of the shoulder joint; the exact same distance directly down from the tip of the mastoid bone, in the back just to the right of the spinal column. The exit wound in the neck was at the lower edge of the Adam's apple, nicking the necktie knot as the bullet passed. Now these are fixed points. You can measure them fairly closely on any normally constructed man of President Kennedy's approximate height and build; you can get a pretty good idea measuring on yourself. This is virtually a straight line through the body. I've

checked with several doctors on this, including one expert New York pathologist. They all agree. On the basis of these checkpoints, you simply cannot establish the required downward trajectory were Kennedy hit by a shot fired from Oswald's window. The only way this could have happened, one expert pathologist points out, is if the President had been leaning forward at an angle of about 20 degrees when he was struck. But the Zapruder film shows clearly that he was upright, erect, waving to the crowds.

The schematic drawings by which the commission sought to reconcile the wounds with the projected downward trajectory were definitely falsified, either deliberately or possibly, though this seems difficult to believe, through asinine error. In these drawings the entrance wound was moved from Kennedy's back up onto his neck, as I pointed out in *The Nation* article, but I intensely dislike being ridiculed by Cohen and challenged to prove other and more extreme positions that I have not taken. Epstein, it is true, does intimate that the autopsy report was falsified, basing his reasoning on FBI reports dated more than a month later that conflict radically with the autopsy details; but, in my own work, I was more interested in trying to show what the evidence is, based on points that seem solidly established. Though I had what seemed to me a logical explanation for the failure to get a probe through the back neck wound, I did not go into this detail at the time because I was more interested in what seemed to me the vital points.

Fred J. Cook