

9/30/72

Dear Dr. Birk,

If I had expected any possibility that anything could have come of our meeting on the 26th I would share your expression of regret that your time was so short. I felt that you would use this meeting as a means of pretending to hear and consider those complaints on which your mind was already closed and so that, if the occasion came, you could cite it as an indication of the opposite or for other purposes. Nothing that happened gives me any reason to feel I was wrong in my expectation. I am sure you notice that I had no notes of what I wanted to take up with you. If I had really believed you had serious purposes, I would have prepared and would have had an aide memoire for you.

At the end of our meeting, when you were out of time, you made an unacceptable offer to me. I did not write you earlier because I believed you would be writing me for the purpose of making the kind of record you want to try and make. Your letter ~~of~~ of the 28th confirms my judgement. There is nothing I can do about anything self-serving you chose to send me. However, I do not think that "many issue" you say I raised --and not one was new-- can be covered when they are numbered to a total of three.

The offer you made that I find unacceptable and, in fact, little short of outrageous, is to include in my file a note that I disagree with some of the "diagnoses". If what is in them is not sufficiently poisonous, that would serve the purpose. Whether or not I agree or disagree is without medical validity. Whether or not they are valid, whether or not they are the result of proper science, whether or not they are the result of what can reasonably be called evaluation or testing, is among the things that can mean something. My opinion is immaterial and I do not think any doctor, in GHA or elsewhere, should base a medical determination or treatment on any second-hand reflection of my opinion. Should any doctor ever want my opinion, he can ask it. There is already too much of a non-medical nature in my records for me to agree to the adding of any other such nonsense. You can do it, but this is to register my opposition to it. I just can't stop you.

The first sentences in your letter after the number 1 read more like the writing of a lawyer than a doctor: ~~XXXX~~ "You have requested that GHA medical records be released to you. This has been done." (I note in passing that your description of my "feelings" that "they are prejudicial and incomplete" does not cover what I have said.) I have written you asking that all of both my wife's records and mine be given our lawyer. We both signed such releases. You have never responded. I therefore assume and in the lack of written assurances from you to the contrary will continue to assume that you have not given our lawyer all of our records. I do not believe that any independent medical appraisal of the kind we need can be made on any basis other than completeness and I also believe that comparisons will be necessary. and if you do not write such written assurance it will be clear that this is an intended deception for the making of a deliberately deceptive record.

What our lawyer decides is "supportive ~~xxx~~ of your [our] legal case" is a determination for our lawyer to make. I have not discussed it with him. This is a self-serving gratuity. It in no way reflects the purpose or the content of our belated meeting. It is, in fact, quite opposite it, as I made as clear as it is possible to do. I have, for example, in the past as I did on Tuesday, said that while I do regard these so-called "records" as worse than "prejudicial and incomplete", I am seriously concerned about other aspects and potentials, particularly in the influence they can exert on strange doctors making diagnosis, especially in an emergency situation. I repeated this quite specifically on Tuesday. You ignore this and instead seek to make this entirely misrepresentative record. You leave me no choice but to record this characterization. I singled out in particular the witchcraft, "to repeat a description I used in the past without demurrer, that categorizes me as "delusionary," when the man who made it was in no position to decide either way and in a consultation arranged for entirely different purposes. The number of diagnoses of which I know that were reached about both my wife and me in that one hour by a man who had never seen either of us before -- and I must admit that those of which I know may not be all -- is simply staggering.

In this area I could not have been more explicit nor could your letter be more void. I noted that we both suffer anxiety, that my wife is uncommunicative (in large measure caused by GHA) and has forced certain things from her recollection, and that when to this is added that I am "delusionary" the consequences can be disastrous. You did not challenge this on Tuesday. We may not have been aware of it, but I noticed that Dr. Patterson nodded his head in affirmation. I think this is obvious and requires no medical competence to understand. If you dispute this interpretation of potential, I solicit a letter so stating.

In the past, again without dispute, I have noted that a number of incorrect diagnoses have been made on me and that some of the consequences were what for me are considerable cost and the waste of much time. In one case the treatment required was so painful that the therapist rebelled. It did not then specify all these erroneous medical determination. One I didn't is here relevant, I think.

GHA found anxiety in both of us and kept it secret from us. When this condition was recognized I do not know, but I do know that with me the symptoms are recorded as of 1957. Hyperventilation is something of which I had never heard. No single GHA doctor ever described it to me or warned me of it or told me what to do about it, despite the diagnosis. Twice in emergency situations I was taken to the hospital, on dates your records will show. The second time, as I discussed with you Tuesday, it was initially diagnosed in the emergency room as a heart attack or a stroke, and I need not repeat what you should well know, how that made my wife and me feel until we learned better. The first time was on a Sunday. It was then diagnosed as "heat exhaustion". When we have an air-conditioned home, a swimming pool, and I had on that day engaged in no outdoor activity of any kind except swimming briefly, I could not accept this diagnosis. I then went to the unscheduled clinic to report all of this and my disbelief only to have a doctor not familiar with me reiterate that it was likely heat exhaustion. Without this there would not have been the second and worrisome case. Aside from the medical competence here displayed, is it unreasonable for me to wonder whether these things I have described as other than scientific records figure in such medical error or to wonder if at some point my wife or I may be seriously victimized by them? I suggest rather strongly that GHA's interest as well as our own is very much involved here.

And I find it entirely inconceivable, unless you consider perfection a state of all the doctors you have had or will have on your staff, that you would not question the other errors made in the past (as indeed you would be foolish to do), yet persist that in this case it is not possible and at the same time to tell me that your correction of your error, if it is error, is my obligation and to be undertaken at my cost (and you know I am without the means).

On the alleged paranoia, schizophrenia and phobia I here repeat for the record what you have ignored in my earlier letters, that if these conditions really existed, there is clear negligence in GHA doing nothing about any one - even telling either or us. These are serious, dangerous and treatable conditions. And did you discharge your obligations to my wife in not warning her of the potential hazard to her of living with a paranoid schizo? Or to me in not telling her whatever she should know about these conditions?

You and Dr. Patterson inherited the past. This is not a medical or any other kind of license to perpetuate it, nor does it remove any obligations from either of you.

Your "2." is headed "psychiatric care". We have neither, ever, had any, nor have we either had any such consultation not on my own initiative. When I have asked GHA doctors about this in the past they recommended against asking. Despite our records, nobody at GHA ever did anything along this line. We are now seeing a psychologist, but this is the result of something I initiated in April, and GHA managed to build in enough futility and waste for both of us when neither was necessary and both could and would have been avoided if you and your ^{predecessors} were not so completely inaccessible to members. You then say my wife and I "have been evaluated by our department of psychiatry." I don't know what special meaning you here give to "evaluated", but the normal one, of precise testing and evaluation, is fiction. My wife has been seen but twice by any GHA psychiatrist, to the best of my recollection. Both times on my initiative, neither GHA's nor hers. Neither

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was for this purpose and during neither were any questions identifiable as for this purpose asked of her (or me). The first was with Dr. Casey and was restricted to her reactions to the helicopters and the problems they caused us. Aside from his prescribing of a tranquilizer, all of what Dr. Casey said is what we agree was good advice, to move my wife from these associations. The other consultation with with Dr. Murtale, and I think it would be to insult you to think you would describe that as "psychiatric care" or "evaluation".

I would agree that a layman is not ordinarily capable of making a medical determination in such matters, but if you are saying that without ever having laid eyes on my wife or spoken to her Dr. Patterson can determine what your letter really says while you with care omit the key word "all", then I do tell you that I am bold enough to disagree. You quote his "judgement" that "at the present time family therapy is the indicated mode of treatment." "Present time" has nothing to do with the omissions or negligence of the past. And inherently you are saying that nothing else is indicated. I live with my wife, not your fictions and evasions. And I know the things deprecated and ridiculed by GHA doctors are realities, as countless witnesses can and should the occasion come will establish.

If there is nothing you can now do to undo the past, I do not think you should be perpetuating what is wrong in it by false pretense. I think what we have suffered from the negligences is too much to add this to it.

We do not plan "an independent medical and psychiatric evaluation" of either or both of us, can't pay for it, and I don't believe I have ever suggested it. If at some time our lawyer decides this is indicated, then we will listen to him. However, if GHA has adequately discharged its responsibilities to us and to itself, particularly after the strenuous efforts I have made over so long a period of time, there should be no need for this. After all, we do pay you something over \$850.00 a year for complete medical care. We have been members since about World War II and have a not inconsiderable investment in GHA. Is all of this to be referred to other doctors?

If there is an inference in your concluding paragraph that I have in any way suggested that Dr. Raymond Turner is in any way incompetent, I dispute it. As a layman I have no way of estimating his medical skills, but I do not doubt that he is proficient, I see him by choice and I think he is also a decent human being from the contact I have had with him. By the way, you told me on Tuesday that he told you he always schedules double appointments for me. This is impossible. He doesn't schedule his appointments. There was one exception, where all this recent business began. On that occasion he did schedule the appointment, he did arrange for one of 20 minutes rather than 10. In fact, before transferring me to the appointment desk he spoke to it. I think it was thoughtfulness and consideration on his part, I do appreciate it, and at the same time I tell you I think it was necessary only because of gross negligence at GHA in the past. When I then saw him he became the first person at GHA ever to tell me anything about anxiety. Despite the record only in part recorded above - and I repeat it goes back 15 years - as recently as Tuesday you refused to do anything about this unless Dr. Ballentine elects to go into this at some time in the future as part of family therapy. These are day-to-day medical problems for both of us, as they have been for so many years, and I tell you frankly that I believe this record amounts to personal abuse, not medical treatment.

There are many things for which there was no time Tuesday and which you ignore in your letter. For example, you first wrote me that Drs. Patterson and Turner would go over all of my records, then you wrote me that Drs. Rosenbaum and Turner had, then you told me on Tuesday that they had gone over only my "recent" records. I believe part of my medical history can't be reviewed or the adequacy of treatment considered without examination of my wife's medical records. You excluded them.

Your "medical" records include the notation that I had an airline ticket in my pocket, but that doctor did not record that he counselled against a psychiatric consultation. Yet there now is no doubt that family therapy is indicated and required, and not for any cause that does not pre-date that consultation. This is the responsible and adequate practice of medicine, these are "medical" records? This rather is a reflection of the poisonous nature of that of which I have complained, a clear reflection of the corrupting influence

on all doctors - that one was then a total stranger - of that "diagnosis" of delusions and more. (My travel agent is at 1825 Bye Street, 50 miles from here, and I was then wearing shorts and a sport short. Can you suggest another place I could have carried that ticket - and still have used it?)

Another question I have raised and you never answered until Tuesday, then to dismiss airily, is the absence from the records supplied my lawyer of the lab reports and neurologist's finding when my wife collapsed in the GHA lab and was diagnosed as having a stroke. For you to say these do not exist and there is nothing you can or will do about it is virtually to say that GHA deliberately destroyed them. Whatever the reason for their non-existence, it is as unacceptable as it is unconscionable. These records are important for permanent medical reasons, not alone for legal need. The event itself is in the records, if in a medical self-indictment. As I told you Tuesday, the man who was then our lawyer asked me to take him to Mr. Morris' office so that he could ask that this particular record be preserved with care. I thereafter wrote Mr. Morris about this. If this letter is not in your files it was destroyed, for I have a carbon that is otherwise and irrefutably dated. I do not know what the doctor recorded, but I do know what he told me when he drew me aside for serious and penetrating questioning, and I do have a contemporaneous record. It is, of course, possible that Mr. Morris placed that record in another place to be certain it was preserved with care, but this we cannot know unless you search for it. I expect you to, I ask you to, I believe it is an indispensable part of my wife's medical records for medical reasons, and I am not content to let this matter rest where it is. We do not and have not live encapsulated in a vacuum. There are too many people, including my wife's mother, who had to dress her that morning, who know enough about that incident. And its effects lingered long.

After I left your office Tuesday, my wife and I saw people who are concerned with the kinds of ecological problems we suffered. It is a welcome coincidence that we then learned of a pretty exact duplication of what happened to my wife. This is all recorded in official proceedings concerned with exactly this problem and such reactions to it. I am getting the official stenographic transcript. Pretend as you will and as some of your "doctors" have, this is not unknown, is as terribly real as it can be, and what is really in question is not our rationality about it but GHA's practise of medicine in what we have belatedly learned, that all of this is ridiculed and deprecated.

If I have not told you before, then I tell you now, I learned a bitter lesson in the lawsuit over all of this that we won. Since then it has been necessary for me to keep full and detailed records. I do have them. If I am disappointed at the medical indifference that is reflected in the total lack of interest in them, what we cannot avoid is much too important for me to be fobbed off as you have attempted. You will not write deceptive letters to me without a response that will make as much a record as you do. This is a futility for both of us, and a much greater waste of time for me. But as long as you undertake to make a deceptive record, you leave me no choice. And you make other problems for both GHA and us. You are not going to will them into non-existence.

Meanwhile, if you have not provided our lawyer with all of our medical records as I have repeatedly asked, a question on which I regard your letter as not accidentally deceptive, and if we in any way suffer for this, do not expect us to be silent and tolerant. Other things I have already discussed and see no purpose in repeating.

Regretfully,

Harold Weisberg