

neurosurgeon, "Dr. Morris Abrams". In assisting the doctor's understanding of the brain lacerations, Mr. Lifton supplied him with the knowledge that two metal fragments were recovered from the forward right side of the head. But he either omitted to tell "Abrams" or omits to tell us about the passage in Sibert and O'Neill's report pertaining to the extensive metallic fragmentation (estimated at 40 particles) dispersed throughout the brain. Furthermore, while he presents the neurosurgeons' comments as probative of surgery, Lifton was not dealing with a forensic specialist.

Lifton attempts to bolster his "surgery" thesis by arguing that Humes (to whom he attributes the surgery remark based on the hearsay public pronouncement of J. Edgar Hoover, see New York Times, November 26, 1966) was told a fragment of skull that had been brought into the autopsy room was "removed", another factoid gleaned from the Sibert and O'Neill report. Of course, the word "removed" might easily have been a euphemism connoting "blasted out during the shooting." Beyond Lifton's semantic foolery, however, this purported analysis was devious because Sibert and O'Neill reported that the skull fragment was delivered "during the latter stages of the autopsy", whereas someone reportedly made the surgery remark at the very beginning. Why wasn't there enough room in a 747-page hard cover book, or any of the subsequent paperback editions, to include the full five-page Sibert and O'Neill report upon which Lifton builds his empire? The only reasonable answer is that readers would then be able to see what deceptive use David Lifton makes of it.

Unquestionably, Lifton's chief witness in support of his "head surgery" theory is Paul K. O'Connor.

On the weekend of the assassination, O'Connor was a Navy 3rd Class Petty Officer attached to the National Naval Medical Center as a student medical technician. Before November 22, he had been working in the Bethesda morgue for six months on 24-hour duty. This meant that he was subject to call at any time.

O'Connor told me last year that, at approximately 2 p.m. on the afternoon of the assassination, he and his partner, James Curtis Jenkins, were in the morgue when the Commanding Officer of the National Naval Medical Center, Admiral Calvin Galloway, came in and told them that they would be getting "a very important visitor." They immediately understood this to mean that President Kennedy's remains were being brought to Bethesda for autopsy. Galloway also told them that they were confined to the morgue for the duration. This was O'Connor's first experience in working with a gunshot victim as a "Med Tech" student at Bethesda. (Author's Interview with Paul O'Connor, October 25, 1992)

Mr. Lifton's account of the same introduction to O'Connor's story omits his witness's mention of "2 p.m.". Therein lies a problem, since Bethesda, Maryland, was one hour behind Dallas, Texas. If O'Connor is correct, officials at Bethesda knew that the autopsy would be held there at nearly the same moment that Dr. Kemp Clark pronounced President Kennedy dead at Parkland Hospital. This is not beyond the realm of possibility, but it does contradict the widely held belief among students of the assassination that Bethesda was not chosen as the site of the autopsy until Jacqueline Kennedy made the selection while en route to Washington aboard Air Force One.

My overall impression of O'Connor was that he is sincere and truthful to the best of his ability; that he remembers vignettes or anecdotes about the autopsy, some of which he has obviously discussed with other participants; but that he has great difficulty placing the events of that night into temporal or sequential order and context. Considering the passage of years, this is hardly surprising, neither does it serve to completely discredit his

recollections. It does mean, however, that his statements must be evaluated with great care and caution.

I asked him about the "head surgery" clause in the Sibert-O'Neill report that Lifton expanded into a book:

"You know something? That surgery of the head remark I think started with Sibert or O'Neill. Now what they meant by that, I don't know, but it seems like it's overridden everything else, and it gets involved -- there was no surgery of any kind. And I know what surgery looks like.

Q.: Did you hear anyone ask a question like, "Did anyone do surgery to this head?" or was it a definite statement --

A.: There was a question asked somewhat to that effect, but I don't know who asked it, unless it was Humes. I don't know what he was referring to though."

O'Connor allegedly told Lifton there was no brain in the President's skull when the body arrived in the morgue; the cranium was empty. (p. 601) What he told me, however, was that, "There was no brain, just brain tissue." The difference between no brain, some brain, or very little brain shatters Lifton's theory, which holds that the brain was surgically removed, then reimplanted, before the body reached the autopsy.

Mr. O'Connor's partner that day, James Curtis Jenkins, has said that there was a brain in the President's cranium when the body arrived. (Livingstone, Harrison. High Treason 2. Carroll & Graf, New York: 1991, p. 92 [and see at pp. 131-135 Livingstone's detailed discussion of the conflicts he found in the statements of Jenkins and O'Connor regarding the handling of the President's body prior to autopsy.]

[Note: Researcher and writer Jerry Policoff points out that, if Lifton's reliance on O'Connor for the allegation that there was no brain is well placed, then the autopsy doctors lied when they purported to conduct a supplemental autopsy on the President's brain two weeks after the assassination. Policoff maintains that Lifton cannot have it both ways, although that appears to be his frequent preference.]

The John Ebersole situation is both analogous to the sensation that Lifton makes out of O'Connor's recollections, and illustrative of the perils and pitfalls in evaluating the accounts of witnesses who have come forward many years after the event. Ebersole was nominally the radiologist in charge of X-raying the President's body and reading those X-rays. He told researcher Art Smith in 1978 that the throat wound was sutured at the outset of the autopsy. Lifton repeated the suture story as he obtained it from Smith. (pages 541, 606) Ebersole also recalled that the autopsy began at 10:30 p.m. that night (page 519). This allegation of the autopsy's starting time was a clear error lacking any verification or corroboration, and it is universally contradicted by other available accounts. Lifton excuses Ebersole's mistake, concluding that the throat wound was sutured sometime before what Ebersole thought was the start of the autopsy.

Paul O'Connor, on the other hand, told Lifton that he saw an open, unsutured tracheotomy wound. (pp. 601, 604) (O'Connor confirmed to me that he did not remember any sutures to the throat wound when the body arrived.) How does Lifton reconcile the divergent observations of O'Connor and Ebersole? He never satisfactorily resolves the problem in his book.