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by Edward T. Haslam

Epilogue

to the 1st edition of

Mary, Ferrie & the Monkey Virus The Story of an Underground Medical Laboratory

By Edward T. Haslam

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By the summer of 1995, I had spent three years investigating the death of Mary Sherman, the history of monkey virus research, and the unchartered epidemic of soft tissue cancers. I was exhausted. It was a watershed point for me. Much had been done, yet much was undone. I had to make a decision about publishing. Should I publish what I had found to date, even if it was incomplete? Or should I continue researching, hoping to find more information?

On one hand, one of my major goals had been accomplished. Much of the nonsense surrounding Mary Sherman's death had been exposed. On the other, my list of unanswered questions stretched to the horizon. It was as if all my years of work were little more than clearing the brush before the real work could begin. The ultimate problem was that I had no way of knowing if additional effort would produce additional answers. Or whether a major discovery lay just around the corner. For better or worse, I decided to publish the first edition, just to get the story out, even if there was more work to be done. Perhaps it would trigger an investigation. Perhaps someone would come forward with more information. Perhaps our Orwellian monster would stir on its own. Anyway, I needed a break and felt I had done as much as I could for the moment.

Ironically, it wasn't until I stopped writing and started publishing that I began to think about the set of unanswered questions from a broader perspective. My initial goal had been very general - to gather all the information into one place and look for an obvious pattern. What I found was a series of events that were both individually and collectively suspicious, but the overall pattern had not yet produced a coherent explanation. For example, could coincidence adequately explain how the soon-to-be accused assassin of the President of the United States crossed paths with the former President of the American Cancer Society who was working on an assignment for U.S. Government which was so "sensitive" that it required clearance from the Director of the FBI? Could social acquaintances explain why the Chairman of the Pathology Committee of the American Academy of Orthopedic Surgery had been associated with a contraband pilot who flew covert operations for the CIA? Could corruption adequately explain the extreme manner in which the New Orleans Police Department shut down the investigation into Mary Sherman's murder and sanitized their reports? All three seemed highly unlikely to me. I began to suspect that the individual pieces had been distorted to confuse the larger pattern. For example, if one saw Sherman's murder as sexual, it would be hard to see her death as a part of events which were medical or as part of a larger pattern that was political. But once you knew that Sherman's death was not sexual, it changed both the appearance of that individual event and the appearance of the overall pattern. And what to make of Oswald, Banister, and Ferrie? Were they colorful, albeit irrelevant, ornaments that decorated the streets of New Orleans? Or were they somehow woven into the fabric of events that ultimately produced Mary Sherman's death?

Actually the pattern of distortions begged the opposing question: What were they trying to hide? Why did someone want us to think that Sherman's death was sexual? Why did they want us to think that Oswald was a Communist? Why did they want us to think that viruses could not cause cancer? The simple question was enough to boggle the mind: Was there a larger pattern to the events around Mary Sherman's death?

I began to see our scattered fragments like the tiles of a mosaic which would only reveal their larger pattern when arranged in exactly the right order. Perhaps there was a "pivot question," a central piece of information around which all other answers would orbit? A single question whose answer would define the pattern. The more I thought about it, the more one question came into focus. Eventually, it glared at me like a full moon on a cloudless night. If Mary Sherman was electrocuted by a linear particle accelerator, then the critical question was: *Where was the linear particle accelerator located*? Upon whose property did Mary Sherman die? Whose reputation was her masquerade murder intended to protect? Upon whose authority was the investigation into her murder shut down? I thought about the question every time I looked at the book. I wondered if I would ever find the answer.

10.000

Linear particle accelerators themselves were not secret. The cover article in the July 27, 1959 issue of TIME magazine bragged about the one at M.D. Anderson Hospital in Texas. However, linear particle accelerators were highly regulated. Under normal circumstances, the sale of a single accelerator would have generated a paper trail a mile long, particularly in the files of the Atomic Energy Commission. But was this a normal circumstance? My instincts said "No." Times being what they were, I was not about to FOIA¹ the records of the Atomic Energy Commission by myself. Their ability to sand-bag, avoid, and delay was far beyond my ability to persist. So I decided to stick to my strategy of patience and to wait for something to happen.

Six months passed with little change. Then the phone rang. It was cold winter night in January 1996. The voice was warm and familiar. It was a doctor who had quietly fed me information over the past several years. His kiss-and-tell stories about radioactive medicine and medical politics encouraged me at time when little else did. I will call him Dr. X for reasons that will become obvious shortly. He was a medical doctor. We had spoken often, but not in recent months. During those earlier phone calls, he frequently talked about his long career and detailed many of the people and places he knew along the way. Of particular interest to me was his experience with linear particle accelerators.

As a young surgeon in the early 1960s. Dr. X worked at a well-known cancer clinic on the East Coast. Operating on cancer patients was his business. Day-after-day he removed tumors and repaired organs with varying degrees of success. The daily grind was an excruciating battle between life and death. As times changed, new technology brought new hope. Chemotherapy and radiation therapy offered alternatives to radical surgery and brought new promises to both doctors and cancer patients. Radioactive substances, like Cobalt 60, were injected into patients in hopes of destroying their tumors. It was a desperate hope. The side effects were often terrible. None of the medical staff liked the idea of injecting patients with radioactive substances strong enough to destroy living tissue. Nor did they like the idea of standing by watching countless patients die. They all hoped that things would get better.

¹ FOLA stands for Freedom of Information Act, a U.S. law which gives citizens access to government documents. It is used as a verb by researchers to refer to the process of using the law to request documents from the government. Ultimately, the government still decides what gets revealed and what does not. Each agency has a FOLA officer who functions as a censor, deleting words, sentences, and paragraphs for a variety of reasons. The word "reduct" means to cross out with a black marker so that the requested cannot read the section. A heavily reducted document is one where many things have been blacked out. An unreducted document is one where the requester has protested the reduction and the government that agreed to issue a new version of the document with less reductions. FOLA was original set up by LBJ in response to the argument that the government did not have the legal right to keep documents secret. The original law was so restrictive, critics called it the Freedom *From* Information Act. There are whole books written about how the process works.

Considering these circumstances, it was not surprising that Dr. X and his colleagues welcomed the introduction of the linear particle accelerator as a new, improved means of destroying cancer tumors. The accelerator's main advantage was that the direction of the radioactive beam could be controlled. Therefore, the intense radioactive beam could be aimed precisely at the tumor, rather than emitting radiation in all directions and into the surround tissue as Cobalt had done. Fewer healthy cells would be destroyed, and less radiation would leak into the blood stream. It was an improvement at least, and it offered new hope. The hospital spent millions of dollars on this new technology and renovated a building to house the huge machine which Dr. X came to use on a regular basis.

In this setting Dr. X came to know the people who designed and built his linear particle accelerator. One was Mr. Y, the company's Director of Sales, who had sold them the machine and who serviced their account. Mr. Y spent so much time at their hospital that he rented an apartment nearby. Dr. X and Mr. Y became friends, as well as professional colleagues. At one point Dr. X sublet a room in Mr. Y's apartment, so for a time they were roommates.

Mr. Y was a colorful character, a Peter-Paul-and-Mary vintage non-conformist with a Ph.D. in physics from Harvard. During the time Dr. X knew him, Mr. Y dated a beautiful French woman who danced with the Rockettes at Radio City Music Hall. According to Dr. X, Mr. Y's success was based both upon his brilliant mind and his father's close association with Harvard University's Board of Directors.² Dr. X gave me all the relevant details which are now in my safety deposit box and several other places.

This night, Dr. X's voice was more excited than usual. He began by telling me about his recent trip to Europe, and then he updated me on a research project that he had been working on. Finally, he turned the conversation back to Mr. Y.

By this time, Mr. Y and his linear particle accelerators were a familiar subject to me. He had built about 10 accelerators around the world. Each one was uniquely designed for a special application. From Israel to South Africa to New Orleans, Mr. Y shepherded the design, sales and installation of the some of the world's most mysterious machines. Dr. X reminded me on several occasions that Mr. Y had known Dr. Ochsner.

This was dangerous ground for me, and I had no intention of being manipulated into any accusations about Dr. Ochsner or Ochsner Clinic. In fact, in 1968 my physics teacher at Jesuit had told our class that the linear particle accelerator in New Orleans *was not* at Ochsner Clinic.³ So I treated these comments with caution. Meanwhile I listened carefully for details which I might be able to confirm from another source. The problem was that there weren't many. Dr. X, however, kept encouraging me to look for evidence myself. Evidence like a paper trail on the accelerator. At first he talked about licenses and permits. Since I considered this to be a covert operation, looking for a overt paper trail sounded like a giant waste of time. Then Dr. X reminded me that it would be difficult to hide a huge machine which required a three story building and 5,000,000 watts of electricity. Perhaps there were records left in the files of the electric company. While this may have seemed like a reasonable route for a team of professional investigators, for a independent researcher like myself, it sounded a wild-goose chase down an obscured paper trail. And no one would leave an accelerator lying around. But he persisted. There must have been some kind of evidence left, even if the accelerator itself

3 But he did say that Dr. Ochsner was involved.

While Harvard's name is universally respected, it is seldom mentioned in the popular press in connection to the development of nuclear technology. Instead, the stories recount once-secret, but now-familiar, events like the Manhattan Project which developed the atomic bombs which the U.S. dropped on Japanese cities during World War II. The featured names are usually Einstein. Fermi, and Oppenheimer. The featured locations are usually Chicago and New Mexico. I did not question this focus until I found a photograph of a scientist disrmantling a particle accelerator for to the Manhattan Project. I had not thought about centers of nuclear research that existed before the project. The caption explained that the accelerator (and the scientists) were about to be shipped to New Mexico for the super-secret Manhattan Project. The accelerator they were dismantling was at Harvard. The point was so simple and so obvious. It was Boston, not Chicago or New Mexico, that was the ultimate intellectual headwaters of nuclear research in the United States. Of course Boston would be where the first commercial linear particle accelerators were built. At least Mr. Y was from the right place.

had been removed. Perhaps there was physical evidence like special wiring needed for the massive amounts of electricity. I told him I needed more information about the site itself. Perhaps then, I could figure out where the machine had been located. The problem was that Dr. X had not talked to Mr. Y in years. The last he heard Mr. Y had burned out on the stress and secrecy of exporting nuclear machinery and had gotten out of the business altogether. Dr. X wasn't even sure if he could find Mr. Y anymore. All of that changed with this phone call.

Dr. X said he stopped on the East Coast to attend a medical meeting on his return from Europe. On the spur of the moment, he decided to try and locate Mr. Y. After several phone calls from his hotel room, he located his old roommate and invited him out for a drink. They met at a local restaurant and reminisced about old times. Eventually Dr. X got his friend to talk about the accelerators he had built... Finally Mr. Y talked about New Orleans: Here is a summary of what he told Dr. X about the linear particle accelerator project he supervised in New Orleans.

- The project was extremely secret. Mr. Y had to sign a secrecy contract with the government before taking on the project and that he could not disclose the exact location of the accelerator.
- The design of the accelerator was unusual. Normally an accelerator intended for medical use had clinical access features, like ramps for wheel chairs or beds for patients to lie down on. Here there were none. In fact, the objective was some form of laboratory experiments which required that the radioactive beam be split into equal portions for identical doses of radiation.
- The overall design resembled an octopus. The accelerator's particle gun was located on the top floor of the building. The beam pointed down, toward the ground, and struck a pyramid-shaped metal structure on the bottom floor. The pyramid divided the main beam into several smaller beams of equal intensity and deflected them into series of containment chambers which encircled the pyramid. The targets were placed in the containment chambers which were specially designed to hold heat and radiation. The metal pyramid was made out of platinum.
- The financing was unusual. Since linear particle accelerators cost millions of dollars, the machines were usually purchased on long term contracts which were paid off over a many years. But this case was different, the entire amount (approximately \$10,000,000) was paid in advance
- The method of payment was unusual. Mr. Y received five or six checks (totalling approximately \$10,000,000) within one week. Each check came from a different company and was drawn from a different bank (So much for the paper trail.)
- Mr. Y went to New Orleans frequently during the construction of the machine, but once it was completed, he did not go back to the site for a long time. Suddenly there was a problem. He was sent to New Orleans to survey the situation. When he got there, something was obviously wrong. The accelerator building was guarded by soldiers with machine guns.

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- Inside the building there were thousands of mice in cages. They were doing some kind of vaccine experiments. Dr. Ochsner was in charge. Mr. Y described him as tense and extremely suspicious.
- Mr. Y was particularly annoyed to discover, upon his return home, that military intelligence been investigating his girl friend while he was away tending to the accelerator.

11.700

What a bomb-shell! This was the worst-case scenario. At first, I hardly knew how to react. Needless to say, I had serious questions about the reliability of the information. Was this information? Or misinformation? Was I being handed the most important information of my investigation? Or was I being set up? Had I been given easily verifiable information for over a year, only to be handed a red herring at the last minute? Or was I being lied to by someone with a hidden agenda? It was a very perplexing situation. I had to be very careful. On one hand, I did not even want to consider the possible implications of what could be phony information because it might taint my view of the real information that I fought so hard to get. On the other hand, I had seen and heard a lot of strange stuff over the past three years. And much of it pointed in this direction. It was not unusual for unsupported information to lead to supported information. So I did not reject what Dr. X said either. But the bottom line was that I could not use it if I could not confirm it, so I decided to gatekeep the information and not let it "inside" until I could verify it.

I needed an action plan to sort all this out. I created my first "information test." I decided to get Dr. X to repeat what he told me a second time. If he wouldn't repeat it, there was no point in my worrying about it. I called Dr. X back the next day and asked him to repeat everything he had said to me the previous night. He agreed. I was listening for inconsistencies. There weren't any. I recorded the phone call and made detailed notes.

Before this second phone call, I wasn't really sure if I had information or misinformation. Now I was sure that I either had information or misinformation. The difference was subtle, but important. I figured the odds were 2-in-3 that I was being manipulated for some reason. My stress level doubled. Suddenly, I was back on the trail. The stakes were higher than ever. My next move had to be a good one.

During my research, I had come to rely on a cadre of friends and researchers who sent me information. If I was being set up. I would expected to rely on these same resources, any one of which might be working with Dr. X. I needed to use a clean source, someone that nobody could anticipate. Not only did I need to figure out *how to confirm* the information. I would also needed to figure out *who to trust* with the assignment.

The key question was still. Where was the accelerator? I needed to locate it. I started to make a list every medical related facility in the New Orleans area. If Mr. Y's information was accurate, it meant the cover was so deep that every facility in the area, even the unlikely locations like Hotel Dieu and the Children's Hospital, should be included on the potential location list. I tried to remember as much as I could about each facility. What I had heard and seen. What they looked like. Where they were located.

As I compared my location list with Mr. Y's story, the problem became obvious. It was the machine guns. There were very few places where soldiers with machine guns could wander about without making the patients extremely nervous. To do so would attract attention and would violate secrecy. I quickly eliminated high-traffic facilities, like Charity Hospital and Ochsner Clinic, from my list. Other facilities, like the Children's Hospital⁴, were better candidates because they were low traffic facilities with sprawling campuses. I focused for a

⁴ The Children's Hospital used to be named the Crippled Children's Hospital. The name was changed around 1973.

moment on the Children's Hospital. The very fact that most people would consider it an unlikely location made it an interesting possibility.

The Children's Hospital was located in the University Section, between Magazine Street and the Mississippi River near Audubon Park. I had driven by it frequently during my years at Tulane. It's shady campus was covered with old oak trees whose heavy limbs hung near the ground. I had only been inside the hospital once. My mother and I had gone there to attend a memorial service for my father who died the previous summer. He had been president of the small hospital, and they were dedicating a therapy room in his honor. A nurse gave us a tour. It was a gallery of courage. I remember the children. They were stubbornly happy, despite the fact that they could have had plenty of excuses to be sad. When the nurse explained that the hospital's name was being changed from Crippled Children's Hospital to Children's Hospital, a bed-ridden child said, "Yeah, we're *children*. Not just crippled children."

After the tour, we went outside and joined a crowd of about 100 people who had gathered near hospital's main entrance for the dedication ceremonies. I escorted my mother. We stood in the sun and listened. Speeches from local dignitaries went on for nearly an hour. I was hot and bored. My mind wandered. I started looking around and noticed a group of old buildings across the street. They were surrounded by an unusually high brick wall. I studied the scene carefully. Several buildings were visible. All had pitched roofs and had been built of brick in the federal style of architecture common to the years before World War I. Fungus grew on the portions of the wall shaded by the ancient oak trees. I realized that I had never seen anyone go in or out of this facility. In fact, it appeared to be abandoned, all of which made it seem rather mysterious. The windows of the building closest to the wall appeared to be boarded up from the inside. The general look was very governmental and very spooky. I wondered what it was. I didn't know. Finally, I asked my mother. She said that it was the back entrance of the U.S. Public Health Service Hospital and that I should be quiet and listen to the speeches. I obliged, as best I could. Actually I was busy pondering what a great location the U.S. Public Health Service Hospital would be for covert operations. Trucks full of whatever could drive in through the wooden gates on one side of the campus, and cars could enter from the other. Once the gates were closed, no one on the outside would have any idea what was happening inside.

Machine guns! I snapped out of my revere. U.S. Public Health Service Hospital was operated by the U.S. military. Here was a place that could have had soldiers with machine guns. And who would go into a quarantine station unless they had to! What a great place to set up a secret laboratory!

The U.S. Public Health Service had crossed my path several times during my investigation. The two most important were

- Ochsner's FBI file showed that at one point Ochsner had received covert payments from the U.S. Government at the U.S. Public Health Service Hospital.
- In 1960 Dr. Sarah Stewart left her powerful post at the National Institute of Health to join the U.S. Public Health Service. That same year Dr. Bernice Eddy announced she found a cancer-causing virus in the monkey kidney cells upon which the polio vaccine was grown.

Finally I had a possible location. The U.S. Public Health Service Hospital. Now I needed confirmation. I had to get someone on the ground in New Orleans to look for more information. Who to ask? Who to trust?

There were two brothers in New Orleans who I knew by reputation. Both had grown up in uptown New Orleans and were interested in the Garrison case. I called one of them (Romney Stubbs) and asked him if he would help me with some research. He agreed. I did not tell him about Dr. X, Mr. Y, or any of the information I had gotten from them. I only asked him to see if he could find any information which might indicate whether or not there had ever been a linear particle accelerator on the grounds of the U.S. Public Health Service Hospital.

One week later he called back. Here is what he had to say: The federal government had sold U.S. Public Health Service Hospital to the State of Louisiana in 1986 for \$1. In 1987 the State began renovating the buildings. In 1989 the State opened the facility as a long-term medical care facility for teenagers. He knew one of the patients and went to see him. He asked him if he knew anybody who might know about "the old days." The patient gave Romney the name of a building manager who had since retired. This man had been directly involved with renovating the buildings in 1987. We will call him Mr. Z.

Romney tracked down Mr. Z and interviewed him. No, he had not seen a linear particle accelerator, but he did see some very unusual things when he first came on board. He explained the situation. The campus had about ten buildings, one massive building which was the hospital itself, and nine-or-ten smaller buildings, some of which were residential in design. Mr. Z's first task was to plan for the renovation, so he had to thoroughly inspect all the buildings and inventory the situation. Mr. Z noted that all of the buildings, except one, were in comparable condition with old desks and file cabinets full of papers scattered throughout the buildings. It was what one might expect to find in old government buildings whose funding had been gradually phased out. The only exception was a three story building⁵ toward the back of the campus. It was completely empty. There was not a single desk, file cabinet, or piece of paper in the entire building. It had been swept clean. Everything had been carried off, except two pieces of medical equipment. There was a large microscope and a tissue slicer used for making microscope slides. It had obviously been some type of laboratory.

Romney continued. Mr. Z had been trained as an engineer and had worked with electrical systems in large buildings his entire career. He knew what to expect. He remembered the building with the microscope because the electrical wiring was very strange. In fact, he *had never seen such heavy wiring* in a building before. It had obviously been for extremely high voltage electrical equipment, more powerful than any he had ever encountered. The equipment had been removed, but the wiring was still there. Mr. Z also noted that some of the rooms had very unusual features. One room had metal walls which were grounded by heavy cables. He describe the other room as a circular shaped "operating room" on the ground floor. It was surrounded by a group of small air-tight rooms which were completely lined with one-inch thick asbestos sheets on doors, walls and ceiling.

I barely noticed that Romney had stopped talking. The silence hung in the air. He said, "Well?"

I was speechless. Finally I mustered a "That's it."

He laughed and said "That's it! That's what?"

"That's the building the accelerator was in."

"How do you know?"

"Because it matches the description that I was given by my source. It is exactly what we were looking for. It's just that I didn't really expect to find it."

The heavy gage electrical wiring was to handle the huge electrical currents required to run the 5,000,000 watt accelerator. The room with the metal walls was the control room. The metal walls were to protect the operators from the radiation. The heavy gauge grounding wires were to re-route any errant electricity down to the ground. The air-tight asbestos lined room

³ The building appears to be two stories from the outside, but the attic area was finished and functioned as the third floor.

were the chambers that the radioactive beams had been deflected into. What he described as the "operating room" was where the pyramid had been. The accelerator itself and the platinum pyramid had been removed (and the building had been cleaned) when the lab was shut down. All that remainded were the hard-to-remove items, like the high-voltage wiring, the metal walls and asbestos lined rooms. Romney sent a hand-drawn map of the campus and photographs of the key buildings. The accelerator had been located in the Infectious Disease Laboratory

Building of the U.S. Public Health Service Hospital.

The dimensions of my investigation had suddenly changed. This was not a rag-tag operation run out of David Ferrie's apartment; it was a full blown U.S. Government laboratory financed with millions of dollars from the public treasury. A state secret supported by the most powerful political forces in the land. A medical Manhattan Project set up in hopes of protecting the public from an epidemic of cancer which the largely government itself was responsible for. Mary Sherman had been electrocuted on U.S. Government

or a covert domestic operation of the O. situation imaginable. Now I understood how the police investigation into her murder had been shut down. It was power in its purest form. The Feds told the N.O.P.D. to shut down the investigation, or else.

Now we had the answer to our pivot question, and the incidental pieces started to fall into place. For example, I had always wondered why the electrical damage to Mary Sherman's body was primarily in her right arm. Why hadn't the electricity traveled down her leg (to the ground)



Main building, U.S. Public Health Service Hospital, New Orleans. Photo by Romney Stubbs, 1997.

property. She was stabbed in the heart and relocated to her apartment to preserve the secrecy of a covert domestic operation of the U.S. Government.⁶ This was the most explosive political



Photo by Romney Stubbs, 1997.

and exploded out her foot as was common in a high voltage electrocutions. The grounded steel walls provided the answer. The bolt of electricity had come from something Mary grabbed with her right hand. It travelled up her right arm and exploded out the back of her right shoulder into the grounded steel wall behind her. Since steel is a more conductive than a human tissue, the surge of electricity went into the steel wall and then into the grounding cable, rather than down her leg into the wooden floor. The room was like a giant spark plug, full of juice and ready to explode. Since her arm was the weakest part of the grounding path, it

^{*} Jim DiEugenio and Lisa Pease sent me the FBI file on Mary Sherman. The New Orleans Police Department had requested the FBI's help. Asst. Director De Loach, speaking on behalf of the Director of the FBI, turned them down, saying it was a local murder and that it was not within the FBI's jurisdiction. Agents were ordered not to participate in any manner other than routinely researching published sources. No FBI interrogation was allowed. An FBI agent in New Haven was threatened with a reprimand when he interviewed a doctor about Mary Sherman. Had Mary Sherman's body not been moved from the U.S. Public Health Service Hospital, the case would have automatically been in the FBI jurisdiction. Did the FBI take this position to preserve the secrecy of this covert government operation?

"burned out" the way that the soft metal in a fuse burns out when too much electricity goes through it. So what did she grab? And why was it loaded with electricity ready to climb up her arm?

I discussed the situation with a radiology technician. She pointed out that if you had an electrical problem with a machine, the standard safety procedure was to grab the circuit breaker by the handle and pull it down. This would shut off all the electricity to the machine. Whoever was running the accelerator would have been trained to grab that handle at the first sign of trouble. However, if someone wanted to sabotage the laboratory, a good way to do it would have been to tamper with the machine's wiring and run the main power supply back to the circuit breaker! Whoever grabbed the handle would be electrocuted! Sabotage!

Finally, our elusive image of our mosaic had started to appear. Finally, I had a'theory that started to explain our story. The trail followed the polio vaccine. It all started back in the 1950s at the height of the polio vaccine inoculations. The moment Stewart and Eddy discovered cancer-causing viruses, top government scientists privately feared there might be a problem involving the contamination of the polio. By then they had already inoculated millions of children. They immediately branded the problem as National Security to keep it secret and then quietly asked Dr. Ochsner to look into it. Not only was he the former President of the American Cancer Society, but he had already lost one grandchild to the polio vaccine. They knew he understood the problem better than anyone. It was 1957, the date of Ochsner's first "Sensitive Position" for the U.S. Government.

Soon they identified an Asian monkey as the natural host of the cancer-causing polyoma virus and gave the virus a less hysterical name, SV-40. Then they found the same virus in the monkey kidney cells upon which the polio vaccine had been grown. By 1959 the government knew they had a problem. Vice-President Nixon knew he had a problem. He had rebuilt NIH after the Cutter incident. He had signed off on Sabin's polio vaccine. In fact, in terms of domestic casualties, he was holding the political roses the biggest problem in the history of the United States. It threatened to destroy the careers and reputations of everyone involved. The legal liabilities were astronomical. The political consequences were incalculable. It was the most politically sensitive secret in America. They had to do something about it, and whatever they did had to be kept super-secret. Disclosure was unacceptable.

Dr. Ochsner was offered a second assignment: To develop a vaccine to prevent an epidemic of soft-tissue cancers. It was a noble cause, but an extremely dangerous project. They would be using radiation to mutate monkey viruses. What if something went wrong? What if they accidentally created a terrible new disease? Ochsner agreed on the condition that the work would be done on U.S. Government property. There could be no question about the fact that he was working on a national security assignment at the request of the highest officers of the U.S. Government. If anything went wrong, he had to be clear of personal responsibility, and there could not be any rub-off liability for either Ochsner Clinic or Tulane University. It was October 1959, the date of his second "Sensitive Position" assignment for the U.S. Government. The wheels were set in motion.

By 1960 the team was assembled. Ochsner was formally separated from Tulane. Sarah Stewart, M.D., Ph.D., was recruited as the scientific director of the secret project. She was the most famous cancer researcher at the National Institutes of Health and believed that an anti-cancer vaccine was possible. For her, it was a once-in-a-lifetime chance to have all the power and all the resources she needed to develop an anti-cancer vaccine. Stewart left NIH and transferred to the U.S. Public Health Service for the project. She secured the USPHS Hospital in New Orleans for the project. Nixon ordered the CIA to take millions of dollars from their laundered bank accounts to pay for the machine. By 1962 the linear particle accelerator had been installed, and the secret lab was fully operational. Ochsner and Stewart

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brought Sherman into the project. They both knew her, trusted her and respected her knowledge of the effects of radiation on cancers.

At this point, I realized there were two underground medical labs in New Orleans in the early 1960s. I will call them the Big Lab and the Little Lab. The Big Lab was the U.S. Government's lab at the U.S. Public Health Service Hospital. It had the linear particle accelerator. It was where Mary Sherman died. It started around 1960 and continued until Mary Sherman's death in 1964.

In the Big Lab, Mary Sherman was a high-level player who directed the medical research. Due to the security around the project, anyone involved the lab had to have a high security clearance. So they needed to find someone with a high security clearance to do the day-to-day work, like take care of the mice and prepare tissue samples for microscopic examination. Ferrie had the right security credentials because he flew missions for the CIA, and he needed a job because he recently lost his position with Eastern Airlines. David Ferrie became the low-level player brought in to do the routine lab work. Our most elusive and persistent question had answered itself⁷

My guess is that Mary Sherman's only contact with David Ferrie was through their covert working relationship in the Big Lab. Sherman's professional colleagues had no way of knowing she knew Ferrie, and Sherman had no reason to tell people she did. But Ferrie's situation was different. As Ferrie's life collapsed into alcohol and drug addiction, he continually "shot off his mouth" about his covert activities to impress his young friends. He used the fact that he had once worked with a famous cancer researcher (like Mary Sherman) to bolster his image and to prove his legitimacy as a cancer researcher. This is when Ferrie listed himself as Dr. David Ferrie in the phone book.

Sherman's death demonstrated the political risk of the covert medical research at the Big Lab. Enormous political muscle had to be mobilized to shut down the New Orleans Police Department's investigation so abruptly. The Big Lab had to be shut down. The accelerator had to be dismantled. Mr. Y was called in from Boston to survey the damage to the equipment and to make sure the accelerator could be safely removed. Ferrie was ordered to dispose of the mice, which of course, he agreed to do. Instead, he brought them (or at least a large portion of them) back to Louisiana Avenue Parkway. There he started the Little Lab near his apartment and kept the infected mice alive for future use.⁸ Therefore, the dates of the Little Lab would have been from the summer of 1964 until Ferrie's death in the winter of 1967.

Did Mary Sherman ever go to the Little Lab on Louisiana Avenue Parkway? My answer is "No." While I consider the odds to be extremely high that David Ferrie knew Mary Sherman through a custodial role at the Big Lab at the U.S. Public Health Service Hospital, Sherman died before Ferrie brought the mice back to the Little Lab on Louisiana Avenue Parkway. Even if Ferrie planned to use the viruses as a biological weapon. Mary Sherman should not be associated with those motives, since she was already dead. I challenge any researcher to come forward with real evidence to support the claim that Mary Sherman was David Ferrie's closest female friend.

What about INCA. Oswald, and radio debates? Did any of that fit in? Was it part of the larger pattern?

I picked up the phone and called Carol Hewett, the attorney who had helped me during my research. When she answered the phone, I simply said, "Hello. We found the accelerator."

"Where was it?" she countered with equal brevity

The idea of Ferrie working under Sherman's direction in this lab makes a lot more sense to me than the claim that Sherman worked with Ferrie in his lab.

It is unclear to me whether the Little Lab was Ferrie's private activity, or where he had a sponsor, like the Mafia, the renegade wing of the CIA, anti-Castro Cubans, or the right-wing lunatic fringe. The net effect is still the same. Destructive power left in the hands of a dangerous man.

"At the U.S. Public Health Service Hospital in New Orleans."

"Hold on," she replied as she typed the words "U.S. Public Health Service" into her computer. "Here we are. It's in Volume 19."

"Volume 19 of what?" I replied.

"The Warren Commission Volumes. The FBI went to the U.S. Public Heath Service Hospital on 11/25/63⁹ looking for evidence of either Lee Harvey Oswald or A.J. Hidell.¹⁰ They went back a second time on 11/26."

The FBI looking for Oswald at the U.S. Public Health Service Hospital! I could hardly believe my ears. "Why?"

"According to the Dallas Police, Oswald had a vaccination card issued to him by the U.S. Public Health Service on 6/8/63, when he lived at 4907 Magazine Street in New Orleans. It was issued to Lee Harvey Oswald, signed by Dr. A.J. Hidell. The FBI reports are in Volume 19. I'll send you the citations." ¹¹

Had Lee Harvey Oswald been on the grounds of the U.S. Public Health Service Hospital at the time the linear particle accelerator was there? Take a look at this map.



* 11/25/63 was the Monday following the JFK assassination (Friday 11/22/63) and the day after Oswald had been murdered (Sunday 11/24/63).

¹⁰ A.J. Hidell was an alias that Loe Harvey Oswald used during his first month in New Orleans.

11 Warren Commission, Volume XIX, Exhibit # 2012, memos from the New Orleans FBI office. Also HSCA, Cadigan 23 & 24.

Does it strike you as unusual that both Lee Harvey Oswald and Dr. Alton Ochsner both lived within one mile of the most secret government laboratory in America?

Now the timing of Sherman's murder came into focus. With Oswald in the picture, the fact that Mary Sherman's murder happened underneath the noses of the Warren Commission's investigators took on a whole new light. Had someone sabotaged the linear particle accelerator in order to create a high profile incident that would blow the cover off the secret laboratory and call attention to its connection to Lee Harvey Oswald? And what would have happened to the "lone nut" theory if the public found out that Lee Harvey Oswald had been spying on a top secret U. S. Government laboratory? Would it have seemed unusual that the doctor who ran that same secret government laboratory had also arranged the radio debates which discredited the soon-to-be-accused assassin of the President?

In my opinion, whoever authorized the sabotage of this laboratory was well aware of Oswald's proximity to the lab, Ochsner's connection to Oswald, the FBI investigation of the U.S. Public Health Service Hospital, and to whom the trail of accountability would lead, once the public discovered that the government was secretly mutating monkey viruses because they had contaminated the polio vaccine with cancer-causing viruses.

The sabotage of the linear particle accelerator was a hard-ball tactic in a big league game of power. In this bold arena, our celebrated concepts of truth and justice give way more fundamental questions like "Who rules?"

Mary Sherman was the incidental victim in a war between political Titans. Luck was not on her side. If Dr. Ochsner had grabbed the lever on the circuit breaker, things would have been different.¹² At least for Mary Sherman. If the plan to expose the secret medical experiments at the Infectious Disease Laboratory of the U.S. Public Health Service Hospital in New Orleans had worked, American history may have turned out differently. It didn't.

12 It would have been much harder to drop Dr. Ochsner's body in his bedroom and call it a psycho-sexual slashing.