

To: H. WELLS

# THE LATTIMER CORRESPONDENCE

BY RUSSELL KENT

## Introduction

Early in the evening of Wednesday 13th November 1996, I found myself walking into the Thomson Hall at the College of Physicians of Philadelphia. I was there to meet Dr John K. Lattimer and attend his lecture, *Medical and Ballistic Details of President Lincoln's Fatal Wound: An Experimental Study*. This represented Part IV of a lecture series entitled *When the President is the Patient*. This meeting with Dr Lattimer was to initiate an interesting Kennedy Assassination Q&A correspondence between us.

## Who is Dr Lattimer?

John K. Lattimer, MD, ScD is Professor and Chairman Emeritus of the Department of Urology at the College of Physicians & Surgeons of Columbia University, New York City. He is internationally known for his contributions to the improvement of both the investigative and educational aspects of urology. He has written many publications, some of them

milestone contributions to the fields of genitourinary tuberculosis and paediatric urology.

To those interested in the JFK assassination he is better known for his book *Kennedy and Lincoln: Medical and Ballistic Comparisons of their Assassinations* (1) and his various articles on the same subject.

## Why is Dr Lattimer important?

- He is one of the few physicians to publish a book on the Kennedy assassination.
- He was the first independent doctor allowed to view the autopsy material (X-rays, photographs and clothing) in 1972, 1973 and 1975.
- He conducted experiments to back up his theories.
- He was responsible for much press coverage in the early 'seventies supporting the official US Government story - the claim that one lone nut was responsible for all the shooting in Dealey Plaza. For example, a 1972 *Washington Post* article bearing the headline *Expert Says Oswald Alone Shot JFK*.

## My first visit to the College of Physicians of Philadelphia

One of the first places I visited when my work took me to Philadelphia in 1996 was the Museum of the College of Physicians of Philadelphia. This is a fascinating place packed with exhibits of old medical equipment, teaching models, the preserved bodies of Siamese twins and racks of human skulls collected in Europe. Purely by

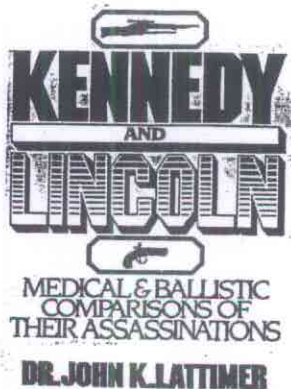
chance, the College was featuring an exhibit and series of lectures which immediately grabbed my interest.

*When the President is the Patient* featured discussions and artefacts of many of the US Presidents who have been ill or assassinated whilst in office. Much was made of Lincoln (his blood-stained collar was on display) and Roosevelt (whose leg irons could be perused at leisure) but of JFK there was only the Moorman photograph and a one-paragraph summary. When I later asked the Executive Director of the College, Dr Marc Micozzi, whether he had any supporting evidence for part of the summary which read "Few would argue, however, that Kennedy could have survived the massive head wounds inflicted by the two bullets" (my emphasis added), he nervously ran to the exhibit and disappeared, presumably seeking a lackey to "correct" it.

Despite the poor JFK exhibit, all the more remarkable when you consider the vast amount of material available, I spent an interesting afternoon learning just how many Presidents have suffered in office and the many ways in which the US Government has sought to conceal this from the people. On my way out, I picked up a leaflet advertising the lecture series to accompany the exhibit. My eyes were immediately drawn to details of the forthcoming Lattimer lecture.

## *Medical and Ballistic Details of President Lincoln's Fatal Wound: An Experimental Study*

I looked forward to attending this lecture and hearing Dr Lattimer's opinions on the Lincoln assassination. Perhaps of greater importance however, I figured that there would never be a better opportunity for me to



challenge some of his published statements concerning the JFK assassination. I had read many of these in books by various researchers, most of whom had a low opinion of Dr Lattimer. At that time, unfortunately, I did not own a copy of his book. I knew that I had to be thoroughly prepared and that I had to ask simple yet penetrating questions so I spent the next few weekends at the excellent Free Library of Philadelphia where the helpful librarians searched out many of Dr Lattimer's articles, together with his book. I prepared several questions and fully expected to be one of a small audience at the college.

On the evening of the lecture, the hall was almost full. I must have looked somewhat out-of-place because to my astonishment, a rather elderly gentleman fixed his gaze upon me, walked up, shook my hand and introduced himself as John Lattimer. We had time before the lecture for a brief chat. I introduced myself and told him why I was interested in his lecture. In turn he told me how much he loved Europe. He recounted how he had been part of the Medical Corps "picking up bodies on Omaha Beach on D-Day", how he had stayed on for the Nuremberg Trials and had received a medal for being part of the force which liberated Paris. To my amazement he then produced the large, heavy medal from his pocket and showed it to me. He was a proud man.

After the lecture, I was able to speak briefly with him again. I began to ask him some of the questions I had prepared but it was obvious that we just did not have

the necessary time to discuss these matters. Many other people had questions relevant to the Lincoln lecture and Dr Lattimer also had a photocall to attend. We exchanged addresses and I was delighted when Dr Lattimer encouraged me to write to him with my questions.

Correspondence

Shortly after the lecture, I wrote two letters to Dr Lattimer. He replied to the first within a week. The second



Left to right: Dr John Lattimer, Dr Fishman (President of the College), Dr Micozzi (Executive Director of the College).

remains unanswered to this day. Here I would like to share with you the questions I asked in my first letter, together with his replies. Ironically, his letter is dated 11-22-96, the 33rd anniversary of the Kennedy assassination.

*(For convenience and ease of understanding the following. Questions are printed in bold. Answers in italics and Discussions in normal type - Ed.)*

**Q:** Why were your experiments based on a one-tailed hypothesis

(that JFK was shot from behind) rather than two-tailed (could have been from behind or in front)? Did you ever try shots from the front of other angles? What were the results?

*A: We tried it from all angles and many scenarios.*

I asked the question because it is completely unscientific to have a theory and only test it in a way that can only confirm your theory. True science demands controls and full publication of results. While Dr Lattimer does not claim that his investigations constituted a full scientific study, he does call them "experiments" and went to great lengths to control some variables (for example, using ammunition belonging to the same lots as those he claims were used by Oswald).

The point is that if you are going to try to recreate the alleged wound positions and autopsy findings in the JFK assassination by shooting a test rig from behind, you must at least try to recreate the same evidence using shots from the front. If you can say that you shot the test apparatus 50 times from behind and duplicated the "evidence" ten times but that despite also shooting 50 times from the front you never reproduced the "evidence" then you obviously have something worth publishing. I am certain that Dr Lattimer knew exactly what I was asking, and why.

We have nothing more revealing than his statement that he "tried it from all angles and many scenarios".

**to my astonishment, a rather elderly gentleman fixed his gaze upon me, walked up, shook my hand and introduced himself as John Lattimer".**

If he had truly tried all angles he would have had to shoot his experimental rig at least 360 times. Even this minimum would allow only one shot per degree, and all at one elevation - insufficient to be statistically acceptable proof. If he, nevertheless, did all this and got his remarkable results, why did he not publish it, especially as that would apparently have vindicated his hypothesis? As already mentioned, it is highly unscientific to publish only those results which support your theory. Scientists demand full publication of results before they will accept a proof.

**Q:** Did someone ask you to do these tests?

*A: We did them on our own, to try to find out for ourselves. I had done this kind of work on cadavers for the US Army in WWII, so was familiar with the technique. I had my own X-Ray Dept. Pathology Dept. and access to the correct rifle and ammunition, plus facilities.*

I had asked this question as I was concerned with Dr Lattimer's motivation. His reply is interesting. I cannot help wondering what he was doing shooting cadavers in WWII. One would have imagined that there were sufficient shot bodies available for study at this time. I also find it rather alarming that Dr Lattimer had what he called "the correct rifle and ammunition" at hand. That suggests that perhaps Dr Lattimer had already decided on guilt in this case before testing. I now wonder which other

rifles he tried. I suspect that the answer is "None".

**Q:** How was it that you were allowed access to the medical

actually "did" anything - except complain.

I was hoping that Dr Lattimer would be more forthcoming here. He applied for access at the same time as three other doctors, all arguably better qualified to give a clear opinion on the archived material (2) yet he was privileged to get the first look in January 1972. Perhaps Dr Lattimer's "feasibility studies" do show us all too obviously his "bona fides" as an extreme supporter of the official US Government opinion on the JFK assassination and it is that which got him through the door ahead of everyone else. Had Dr Lattimer said that the archivist was an old school friend, it would have appeared less suspicious.

**Q:** In your neck shot reconstructions, you admit to being closer than the alleged Oswald firing position. Does this not cast doubt upon your conclusions? Have you any regrets about writing "Only the distance was different; ours was shorter than at Dallas to insure that each bullet struck the exact spot we wanted to

hit"? After all, you spend some time describing how easy your son, Gary, found the shooting. Indeed, Figure 122 has the caption "Not a difficult shot". If it were such an easy shot, why not shoot from the alleged range?

## The College of Physicians Of Philadelphia



"When the President is the Patient"  
Part IV

### "Medical and Ballistic Details of President Lincoln's Fatal Wound: An Experimental Study"

John K Lattimer, MD, ScD.

The College wishes to thank the following co-sponsors  
of this lecture series for their generous support:

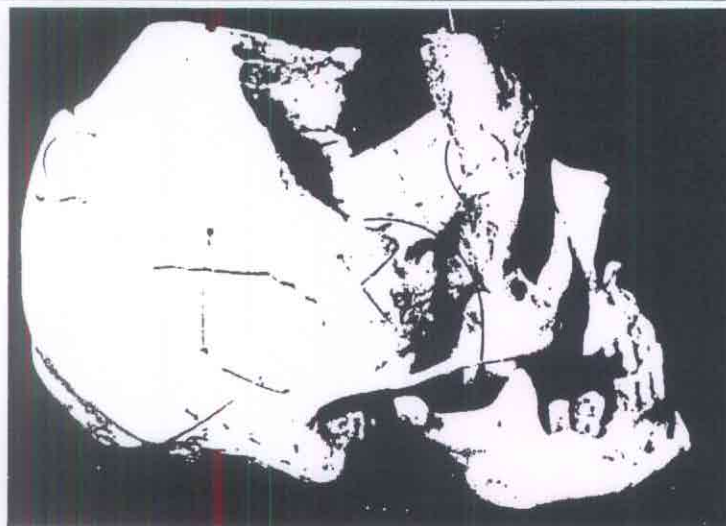
Wednesday 13 November 1996  
6:15p.m.  
Thomson Hall

American Medical Association  
Center for the Study of the Presidency  
Right Associates  
Section on Medical History  
Section on Public Health & Preventative Medicine

Dr Lattimer's lecture leaflet

evidence in the National Archives whereas many others were denied?

*A: I submitted reprints of several of our "feasibility studies" to demonstrate our "bona fides" when I heard the 5 year limit was about up (imposed by Bobby). No one else*



**DUPLICATION OF KENNEDY'S HEADWOUND**

Skull showing experimental duplication of Kennedy's head wound. Produced by a 6.5mm Mannlicher-Carcano fully jacketed military bullet striking at the same point and at the same angle as the one that struck the President. The wound of entry of cone-shaped, and the top of the skull has burst into many fragments, with the front segments flying so far they were not recovered Kennedy's skull fragments were found in the street later (fig 61). The wounds shown are very similar to those of the President (J K Lattimer)

*A: We tried it at full range and were satisfied it made no difference. Going back and forth, up and down, battling mosquitoes and thunder showers, over and over, is laborious. It takes forever to do it right. (Underlining in original - Ed.)*

The first part of Dr Lattimer's answer is misleading. It may not have made a difference on his single bullet theory test rig where the bullet had only to perforate a deboned ham and hit a further paper target, but range obviously affects the penetrating power of a bullet. A shot from further away would have less penetrating power. The final statement "It takes forever to do it right" still brings a knowing smile to my face and makes me blurt out "Exactly". Oswald, allegedly, had six seconds and only one try at it.

**Q:** You claim that the spinal trauma caused by the neck shot glancing a transverse spinal process would have left JFK quadriplegic [paralysed in all four limbs, often meaning paralysed from

the neck down - Author] for a time. Given that this would mean an interruption in the spinal cord's ability to carry efferent impulses [those affecting muscles - Author] down beyond this point, can you explain how you think it possible that JFK could have been thrown back by the head shot, causing a neuromuscular spasm?

*A: The massive downward impulses from the brain shot would have overridden any "bruising" that may have occurred five seconds earlier, to the cord.*

I feel that Dr Lattimer possibly needs to be more careful with his terminology. Quadriplegia means that downward pulses are blocked, usually

due to a break in the spinal cord. A super stimulus would have no effect.

**Q:** In your head shot reconstructions, you appear to want a conclusion that is not supported by your own evidence:

- You appear to have shot from only slightly above the horizontal, so how can you claim to have reconstructed the alleged Oswald shot?
- Your Figure 104 illustration shows massive explosion with skull shattered - especially obvious is that the face is blown off. Do you have any knowledge of damage to JFK's face apart from fractures to the orbits?
- Sure, part of the skull falls (is blown) back towards the gun, but parts of it fly every whichway. As the skull is not attached to a simulated neck, can you persuade me that this experiment helps our understanding?
- Can you tell me the distance between your gun and the test skulls?

*A: He was leaning forward a bit. We did know the true location of the wound of entrance. The prosecutors did not have the time to study the X-rays the way we did. Why do you say that the face was blown off? The forehead was blown off; not the face. The bulk of the skull jumped back at the gun; the other fragments were smaller. Physicist Alvarez suspended his by cords and showed the effect. The distances varied between 290 feet and 50 feet (estimated from memory). (Underlining in original - Ed.)*

The parts of my question that Dr Lattimer answered are revealing. It seems that Dr Lattimer could not "reconstruct" the head shot without

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blowing off the test skulls' foreheads. Such damage to JFK was not noted at either Parkland or Bethesda. Although Dr Lattimer answered my question on range, the photographs and diagrams in his book make no mention of it. For all the reader knows, the shots may have been from 50 feet away, leaving the photographs in the book useless.

**Q:** Your Figure 102 showing one of your experimental skulls is entitled "Duplication of Kennedy's Skull Wound". The wound shown here is temporal and frontal on both the left and the right. This type of wound was not described either at Parkland Memorial Hospital (where consensus was a parietal/occipital wound) or Bethesda where JFK's skull wounds were described as "on the right involving chiefly the parietal bone but extending somewhat into the temporal and occipital regions". (3) Do you have other information or have you seen evidence that supports your placement of the skull wounds?

*A: I was distinguishing our skull wounds with those of Dr Olivier where the right side of the face was removed when the "lower" impact point was used.*

Dr Lattimer simply fails to answer the question. The caption below Figure 102 includes the following: "The wounds shown are very similar to those of the President". Nobody else has described wounds like these. As these wounds resulted from Dr Lattimer's experiments, they cannot be called "reconstruction". He did not replicate any acceptable version of the wounds to JFK's head and he seems reluctant to discuss this.

**Q:** Which way do you believe that a bullet perforated John Connally's wrist, dorsal to ventral or ventral to dorsal? In your book you describe both trajectories (see Figure 108 and later photographic "reconstruction").

*A: I don't have time to dig out the Connolly wound paper, but it is well described in the reports.*

Since Dr Lattimer has it both ways in his book, I suppose that I should not

have been surprised that he does not wish to commit himself. It is not "well described" anywhere. The surgeon who worked on Connally's wrist (Dr Gregory), however, described the trajectory as dorsal to ventral and this puts the single-bullet theory into considerable doubt (4).

**Q:** In your book you speculate that John Connally had to be hit in the back by a tumbling bullet (i.e. one that had gone through JFK previously) - couldn't the tumbling have been caused by other factors such as hitting a branch? In other words, do you agree that proving that the bullet was tumbling when it hit Connally does not prove that the same bullet had previously perforated JFK's neck?

*A: Kennedy's neck was the closest item for the bullet to hit to make it tumble. I have no trouble with that.*

It does not matter how close JFK was, the fact is that other things could have caused the tumbling bullet. You may ask "What's the big deal with a tumbling bullet?" Well, Dr Lattimer and others have to have a tumbling bullet hitting Connally to support the single-bullet theory. Having shown in

his experiments that a bullet leaving his "neck-rig" always tumbled, Dr Lattimer had to show that only a tumbling bullet *could* reproduce the wounds seen in Connally.

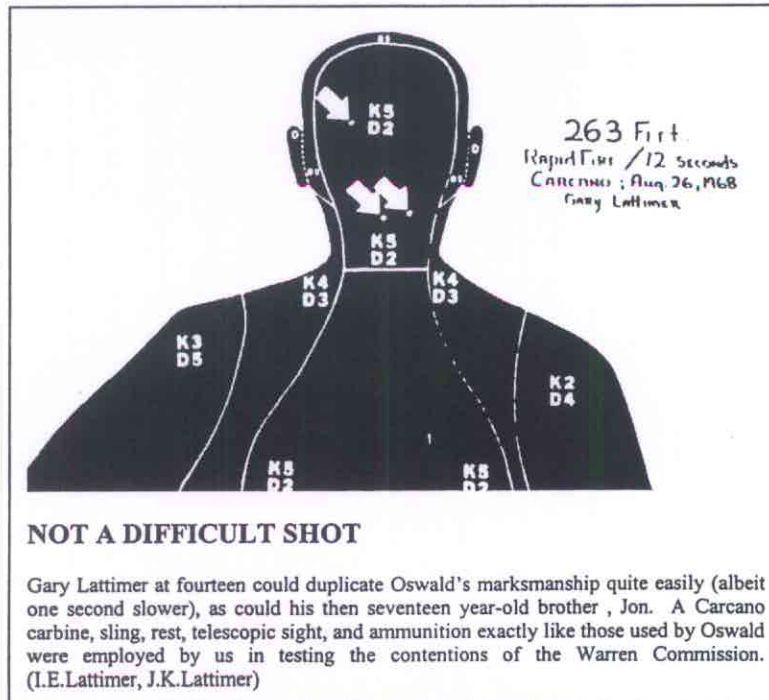
At first glance, this appears to be good evidence to support the SBT. In Dr Lattimer's book, however, there are no details of the array of rib, wrist and leg bones:

We do not know whether they were dry or wet bones or even whether they were human.

There is no detail of what supported the bones. Bullets are affected by perforating skin, muscle and other tissues as well as bones.

They appear to be no more than 2cm apart (to be this close, Connally would have to have been in the foetal position).

We are not told how often these experiments were repeated and what the results were. This is important because Dr Lattimer may have fired 100 times and obtained his desired result (shattered rib and wrist but intact femur) only once. In his book, he shows two X-rays, each supporting



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his case. Were there other X-rays which did not?

**Q:** In your book, you speculate that bullets with no pre-penetration would have caused more damage to Connally, suggesting that the bullet had to have been slowed down by going through JFK first. Did you consider that Connally may have been wounded by bullets from different weapons firing different types of ammunition, different trajectories and ranges? Did you do any experiments with different parameters?

*A: Connally's femur would have been broken if the bullet had not been slowed down. I speculated that Kennedy's body shielded Connally from other shooters.*

The short answer would have been "No". The first part of Dr Lattimer's reply shows that he still refuses to break away from the one-dimensional viewpoint which dominates his book. Dr Lattimer spends pages explaining why JFK had to be hit first with the bullet that then went on to hit Connally without giving a thought to the more likely explanation of the wounds sustained by the two men, that is, several shooters from different locations.

The second part of his reply is baffling.

**Q:** Your experiments with bullets raise several questions. You claim that squeezing a bullet in your vice took "great force". Nevertheless, 2.1 grains of lead extruded from the base.

- Is it coincidence that 2.1 grains extruded - the same as was estimated missing from CE 399 (the "Magic Bullet")?
- How much lead would have extruded if you had squeezed harder?

- How many other bullets did you squeeze in your vice?
- Was 2.1 grains extruded every time?

*A: When I flattened Carcano bullets to the same degree as 399, lead extruded the same amount each time (approx.). If you squeezed them flatter, more extruded. It surprised me by being so consistent. One grain is 0.0648 grams and 2.1 grains is 0.13608 grams.*

With such tiny figures, I simply cannot believe that Dr Lattimer did this scientifically (that is, several times under controlled conditions - in fact Dr Lattimer avoids answering these points). Even if Dr Lattimer had measured the degree of flattening on CE 399 with an extremely sensitive measuring device, it is highly unlikely

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that he could have reproduced it in a crude vice, let alone got exactly the same extrusion.

It is worth noting that Dr Lattimer's squeezing produced a noticeable bulge at the base of the bullet whereas CE 399 appears to have lost lead at its base by gouging.

**Q:** Given that flattening in your vice took "great force", do you stand by your claim that the flattening of CE 399 was caused "when it hit Connally's rib" - a blow you described as "a glancing (tangential) contact"?

*A: A bullet travelling that fast can deform easily, especially if going sideways.*

Obviously, the two forces Dr Lattimer describes are different, yet he claims that they could flatten a bullet. However he published no data describing a similarly flattened bullet produced by hitting a rib.

**Q:** Are you prepared to accept that the number of slices that Dr Tannenbaum could make from a 2.1 grain extrusion is, with respect, irrelevant? Do you agree that the real question is, what were the weights of the fragments removed from Connally and what are the weights of the fragments that remain in Connally's body?

*A: My slices were to refute testimony that four fragments were "too many" to be accounted for by that much weight. The total weight would have been more interesting of course.*

A breakthrough! The total weight is more than "interesting" - it is absolutely crucial. If there were more than 2.1 grains in Connally, then it did not all come from CE 399. Dr Lattimer accepts that the weight is more important than the number of pieces but there is no discussion of this in his book whilst the question of the number of pieces takes up

paragraphs.

### Conclusion

Dr Lattimer's experiments as published in his book appear to me to be highly unscientific. He did, however, attempt a reconstruction, something few critics have managed. Furthermore, his work has provoked further study and discussion. Although I have been critical of Dr Lattimer's work in attempting an experimental investigation into the killing of JFK, I am not without respect for the man. He spent time talking with me and replied quickly to my first letter. In fact, I rather liked him.

### Notes

(1) *Kennedy and Lincoln: Medical and Ballistic Comparisons of their Assassinations*, by Dr John K Lattimer, published by Harcourt Brace Jovanovich, Inc., New York, 1980

(2) *Post Mortem*, by Harold Weisberg, self-published, 1975: page 386

on the autopsy performed on President Kennedy

No. 2, November 1996

(3) CE 387: *Clinical record of the autopsy protocol prepared by the Naval Medical School, Bethesda, Md.*

(4) *The Best Evidence against the SBT*, by Russell Kent, published in *The Dealey Plaza Echo* (UK), Vol. 1,

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11.22.96

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DEAR MR KENT,

- YOUR ENTHUSIASM MAKES ME WISH WE HAD TAKEN MORE TIME TO TALK. I ASSUME YOU KEPT A REFERENCE COPY OF 72 QUESTIONS TO HENRY ~~ROBERT ENGLAND~~
- (1) WE TRIED IT FROM ALL ANGLES AND MANY SCENARIOS.
  - (2) WE DID THEM ON OUR OWN, TO TRY TO FIND OUT FOR OURSELVES. I HAD DONE THIS KIND OF WORK ON CADAVERS, IN W.V. II, SO WAS FAMILIAR WITH ALL TECHNICALS. I HAD MY OWN XRAY DEPT. PATHOLOGY DEPT AND ACCESS TO THE COMPLETE PIPE AND AMMUNITION. - PLUS FACILITIES.
  - (3) I SUBMITTED RE-PRINTS A COUPLE OF OUR "FEASIBILITY STUDIES" TO DEMONSTRATE OUR "BONA-FIDES", WHEN I HEARD THE 5 YEAR LIMIT WAS ABOUT UP (IMPOSED BY BOBBY). NO ONE ELSE ACTUALLY "DID" ANYTHING - EXCEPT COMPLAIN.
  - (4) WE TRIED IT AT FULL RANGE AND MORE SATISFIED IT MADE NO DIFFERENCE. GOING BACK AND FORTH, UP AND DOWN, BATTLING MOSQUITOES AND THUNDER-SHOWERS, OVER AND OVER, IS LABORIOUS. IT TAKES FOREVER, TO DO IT RIGHT.
  - (5) THE MASSIVE DOWNWARD IMPULSES FROM THE BRAINS SHOT WOULD HAVE OVER RIDDEN ANY "BRUISING." THAT MAY HAVE OCCURRED TWO SECONDS EARLIER, TO THE CERD.
  - (6) HE WAS LEANING FORWARD A BIT. WE DID KNOW THE TRUE LOCATION OF THE WOUND OF ENTRANCE. THE PROSECUTORS DID NOT HAVE THE TIME TO STUDY THE WOUND THE WAY WE DID. WHY DO YOU STATE THAT THE FACE WAS BLOWN OFF? THE FORE HEAD WAS BLOWN OFF; NOT THE FACE. THE BULK OF EACH SKULL JUMPED BACK TOWARD THE GUN. THE OTHER FRAGMENTS WERE SMALLER. PHYSICIST AVAREZ SUSPENDED HIS BY CORDS, AND SHOWED THE EFFECT. THE DISTANCES VARIED BETWEEN 290 FEET AND 50 FEET (ESTIMATION FROM MEMORY)
  - (7) I WAS DISTINGUISHING OUR SKULL WOUND, FROM THAT OF 61144P, WHEN THE RIGHT SIDE OF THE FACE WAS REMOVED WHEN THE "LOWER" IMPACT POINT WAS USED.