

THE EMPEROR'S NEW CLOTHES

Spin-Doctors For Doctors Stampede a Radiologist Who Says JFK Was Killed by Two Gunmen

By Roger Bruce Feinman, Esq.

Imagine you have discovered something terrible that could change the way we think about recent American history. It could even damage the reputations of high government officials and respected physicians today. Only you can't convince anyone you could do anything about it to take you seriously. Each day, you roll it over in your mind, looking for some flaw in your thinking, discussing the problem with your friends, your colleagues, your spouse. Instead, you grow more confident that the flaw simply isn't there; you have not made a mistake, something awful has indeed happened. Living with this knowledge is an oppression that seems to have no end: It is impossible to forget, but just as hopeless to do anything about. This is the misery that has befallen Randy Robertson.

Within the past year, Dr. Randolph H. Robertson of Nashville, Tenn., has attempted quietly and soberly to publish his breakthrough diagnosis of the X-rays from President Kennedy's autopsy in a responsible medical journal. He is the first independent, board-certified diagnostic radiologist to have had access last summer to the original autopsy materials that remain sequestered at the National Archives in Washington, D.C. Given his conclusion that, while the evidence is genuine, Kennedy was struck in the head by two bullets, and that a second gunman was necessarily involved in the assassination, controversy was inevitable. Robertson has aroused the ire of firmly established conspiracy theorists who prefer to believe that the photos and X-rays are counterfeit. His conspiracy is not profound enough to satiate them. If there is any irony in that, still, it is the apparently well orchestrated effort by government apologists to sabotage his publication of this work that has assumed scandalous proportions. Traditionally, manuscript submissions to medical journals are treated confidentially, however, Dr. Robertson has encountered unique efforts to discredit him publicly before his work ever sees print. Jno20

For example, on the eve of Robertson's testimony before a congressional subcommittee last Fall, the editor of the journal RADIOLOGY, Dr. Stanley Siegelman, disregarded the codified ethics of the peer review process in medical literature and publicly disclosed two negative peer reviews plus his own derisive comments about an earlier version of this article that Dr. Robertson submitted to that journal. By doing that, he has hurt Robertson's ability to publish his work elsewhere. This may be unprecedented in the history of American medical literature. It is as though a book publisher, having rejected an author's manuscript, had sent copies of it to other publishers and book reviewers with a note: "I just wanted you to see what I think of this fellow's work."

Siegelman went further: Before sending it to Congress, he redacted the major part of one of his reviewer's comments that betrayed the reviewer's self-interest and bias, not to mention his political theory of the Kennedy assassination (Castro was behind it), also his identity. This was Dr. David O. Davis, who served on the House of Representatives Select Committee on Assassinations' (HSCA) medical panel. Peer review is the process of having one or more disinterested doctors read a study for suitability. If Robertson is right, Dr. Davis made a terrible mistake, and the HSCA medical panel reached the wrong conclusions as a result. Little wonder, then, that Davis suggested RADIOLOGY and its

publisher, the Radiological Society of North America, avoid involvement in a controversy.

One of those conclusions was that Kennedy was struck in the head only once, from behind the limousine in which he rode through downtown Dallas on November 22, 1963. The original autopsy surgeons told the Warren Commission that the bullet entry wound was located low in the back of JFK's head, and that it exited from the top-right side of his skull. The surgeons confirmed their findings in 1967, when they reviewed the photos and X-rays they had taken on the night of the assassination. A year later, however, a panel of experts appointed by then Attorney General Ramsey Clark decided that the autopsy doctors were wrong; the entry wound, they claimed, was four inches higher on the back of the President's head. In later years, several experts (including the HSCA's Davis) agreed with the Clark panel's opinion. The surgeons, however, have stood by their original report. Robertson believes the X-rays prove there was a wound where the surgeons said, but that two bullets to the head caused Kennedy's death.

Siegelman set the pace for Dr. George Lundberg, the editor of JAMA, a friend and former colleague of the chief autopsy pathologist in the JFK case, who has refused to publish articles challenging JAMA's softball interviews with the autopsy pathologists. Lundberg also had an opportunity to consider a revision of Robertson's original draft. He referred it to two "peer reviewers," one of whom had already reviewed the manuscript for RADIOLOGY and recommended against publication. The other "peer reviewer" was an emergency room physician, Dr. Robert Artwohl, who has no professional qualifications in the fields of radiology or forensic science.

Dr. Artwohl has made an avocation out of defending the Warren Commission Report. He daily inhabits the on-line computer services Prodigy and CompuServe (costly and time-consuming diversions), arguing in belligerent and berating tones for the lone-assassin thesis. Despite the gaping deficit in Artwohl's credentials, Lundberg has coddled him and published his own article in JAMA defending the Warren Commission's findings. Furthermore, Artwohl, has publicly flaunted RADIOLOGY's rejection of Robertson's manuscript even as he has hid behind the anonymity of his own sinking of Robertson's submission to JAMA.

Artwohl is only one member of an increasingly open cadre of politically motivated gadflies who are using the on-line media to their advantage in attacking the conspiracy theory. In March another of them, John McAdams, took it upon himself to distribute electronic transcriptions of the RADIOLOGY peer reviews across the worldwide INTERNET computer network. Among the members of the INTERNET are many academic institutions; the intent to harm is transparent. Although Dr. Robertson does not subscribe to these on-line computer services and, therefore, has not participated in these discussions, others have debated with Dr. Artwohl and his allies several times. Each time, they retreat into silence, unable to refute Robertson's thesis.

The chief warrior of these conservative elements is Gerald Posner, the author of a recently published book, "Case Closed," who argues that Oswald was the lone assassin of President Kennedy, and that there was no conspiracy. Last November, both Posner and Robertson appeared before a congressional subcommittee chaired by Rep. John Conyers, Jr. Posner, having been briefed by Artwohl, initially claimed unawareness of Robertson's work, but moments later referred to RADIOLOGY's rejection of Robertson's article. When asked to respond to testimony by Robertson, Posner also told the subcommittee that he had interviewed the autopsy pathologists, and that they had all reversed their opinions about the location of the entrance wound in the rear of President Kennedy's skull so as to agree with the HSCA's medical findings. I have learned, however, that the chief autopsy

pathologist, Dr. James J. Humes has denied this statement. Another autopsy pathologist, Doctor J. Thornton Boswell, has denied altogether that he granted an interview to Posner. This is of crucial significance, because Posner's misstatement is just the latest chapter in a decades-long saga in which government apologists have attempted to discredit the credibility of the autopsy pathologists on the particular issue of the location of President Kennedy's head wound. As a self-styled journalist, Posner can claim that the First Amendment to the United States Constitution protects him from having to produce any documentary proof that he actually interviewed the autopsists. Yet his bare assertions carry weight because of the prestige of the publishing house that sponsors him and his stature as a best-selling author. So, while the autopsy pathologists maintain that their original location of that wound was true and correct, a book promoter such as Posner can call their credibility (and Robertson's analysis) into question, simply by claiming the opposite.

Dr. Robertson examined the original autopsy materials three times with the permission of the Kennedy family. He has bolstered the earlier versions of his article with the aid of newly released government documents, including eyewitness accounts of the autopsy of President Kennedy that were unavailable to the forensic pathology panel of the HSCA. Official assurances have misled the American public that these documents hold no information of any consequence to the official account of the assassination. On the contrary, the newly available evidence only strengthens Robertson's conclusions.

Dr. Robertson's article should be judged by its scientific merits, with the primary concern being the advancement of scientific knowledge. Instead, both peer reviews that *RADIOLOGY* solicited were rife with subjective elements. At the most basic level, there was not even an acknowledgment by either one of them that the government-sponsored review panels who examined the autopsy X-rays and photographs failed to mention the transverse fracture low in the occipital bone at a point 3 cm. above the lower aspect of the external occipital protuberance (the knob in back of the head). That is precisely where the original autopsy report and bench diagram placed the bullet entry wound in President Kennedy's skull. Government review panels have claimed that the wound was actually four inches higher. Nor do the peer reviewers concede that this fracture was completely omitted from diagrams published in the official investigative reports. Neither did these biased peer reviewers venture why this fracture was never previously discussed, nor even go as far as admitting that the location of that fracture coincides precisely with the official protocol and testimony of the autopsists. (As Dr. Robertson's updated manuscript shows, numerous eyewitnesses corroborated that wound's location in HSCA interviews.)

Dr. Robertson based his paper on well-settled principles of forensic and radiological science. Nevertheless, *RADIOLOGY*'s editor and peer reviewers made no apparent effort to explore the consistency of Robertson's correlation of those principles with the JFK X-rays. Their comments show not a shred of respect for Robertson's original application of Puppe's Rule: In deciding the sequence of multiple gunshots to the human skull, fractures radiating from the second wound will abruptly stop at their points of intersection with fractures caused by the first.

Although Robertson has had the courage to question what has previously been asserted authoritatively, his analysis is appropriately qualified and restrained. In comparison, his peer reviewers at *RADIOLOGY* expressed no such humility or doubt as to their certitude. This hardly suggests a cooperative attitude by scientists receptive to new ideas in the advancement of knowledge.

With respect to Dr. David O. Davis, besides his failure in 1977-79 to interpret the pattern of intersecting fractures of JFK's skull, there is no recognition, acknowledgment

or admission of that failing in his peer review of Robertson's original draft article. One might anticipate that, confronted by Dr. Robertson's new argument, Dr. Davis would have been anxious to reexamine the source materials and reappraise the situation, including the possibility that he had inadvertently overlooked this step. That did not happen.

The touchstone, however, of RADIOLOGY's departure from the norms of scientific behavior in Dr. Robertson's case is Dr. Siegelman's abuse of his authority in releasing the peer reviews of Robertson's submission for public consumption, thus compromising the confidentiality of the peer review process and clearly attempting to scuttle Robertson's quest for formal publication of his work. The "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," published by the International Committee of Medical Journal Editors and subscribed to by over 500 medical journals, specifically provided for confidentiality in the peer review process, also the disclosure of conflict of interest (see excerpts below; Lundberg, the editor of JAMA, played a major role in developing this code of ethics). Dr. Robertson has not released his manuscript to the press; he has sought to present his work responsibly and professionally. Releasing his paper would virtually destroy any chance of its acceptance by a medical journal. It seems, however, that certain leaders of the American medical profession have arrogated the role of defending the honor and integrity of their profession and those members who were involved in the official investigations. They are having a Roman holiday at the expense of Dr. Robertson's career and reputation. By selecting biased peer reviewers, and then scattering their comments selectively, the medical establishment has sought to preempt Robertson and validate a process gone seriously awry.

Excerpts from "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," International Committee of Medical Journal Editors (January 1993, public domain):

CONFIDENTIALITY

Manuscripts should be reviewed with due respect for authors' confidentiality. In submitting their manuscripts for review, authors entrust editors with the results of their scientific labor and creative effort, upon which their reputation and career may depend. Authors' rights may be violated by disclosure or by revelation of the confidential details of the review of their manuscript. . . . Editors should not disclose information about manuscripts, including their receipt, their content, their status in the reviewing process, their criticism by reviewers, or their ultimate fate. Such information should be provided only to authors themselves and reviewers. (page 27)

Editors should make clear to their reviewers that manuscripts sent for review are privileged communications and are the private property of the authors. Therefore, reviewers and members of the editorial staff should respect the authors' rights by not publicly discussing the authors' work or appropriating their ideas before the manuscript is published. . . . (Id.)

CONFLICT OF INTEREST

Conflict of interest for a given manuscript exists when a participant in the peer review and publication process - author, reviewer, and editor - has ties to activities that could inappropriately influence

his or her judgment, whether or not judgment is in fact affected. . . .
(page 33)

Participants in peer review and publication should disclose their conflicting interests, and the information should be made available so that others can judge their effects for themselves. . . .(pages 33-34)

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External peer reviewers should disclose to editors any conflicts of interest that could bias their opinions of the manuscript, and they should disqualify themselves from reviewing specific manuscripts if they believe it appropriate. . . . Reviewers should not use knowledge of the work, before its publication, to further their own interests.
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