

# At V.A. Hospital in Michigan, Mysterious Deaths Stir

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ANN ARBOR, Mich., Aug. 20—Families sit in the lobby of the Veterans Administration Hospital, talking quietly to sons or fathers or husbands who are patients here. Nurses move quickly along the halls. Doctors make their rounds. All seems normal.

There are some extra guards, but the casual visitor wouldn't know they weren't here all the time.

Behind this facade of routine, however, there is seething turmoil, and a search for a possible killer.

In the last three weeks, 10 per cent of the normal daily patient load of about 300 have been seized with cardiac arrest or by collapse of the breathing system.

The exact number of such seizures has not been determined. Hospital spokesmen have given the number in the last two days as 23, 34 and 41. High men are reported to have died.

These reports trickling out from staff members and others suggest that a poisoner may have been stalking the hospital wards for a month or more with a supply of curare or some other paralyzing drug.

In a briefing here today, Dr. Laurance Foye, the deputy chief medical director of the Veterans Administration, said that an investigation now under way had not yet turned up what happened or why.

A large number of doctors, he said, are busy analyzing medical records to try to find out "what." Agents of the Federal Bureau of Investigation are trying to find out "who."

The investigation, Dr. Foye said, is centered on 15 patients who suffered respiratory collapse or heart failure within the last month. Two of these 15 died, he said.

Dr. Foye said that he was not saying that other heart failures or respiratory collapses were not induced. These 15 under study were classed a "suspect" because doctors normally would not have expected these patients to go into heart failure or to have their breathing stop, he said.

Six of the eight men who have died in the hospital from cardiac arrest in the last month were buried before the hospital staff became alarmed last week at the growing number of seizures.

The physicians at the hospital and the outside experts from the Veterans Administration who are conducting the investigation, suspect that if a drug is involved, it probably is a muscle relaxant such as Curare, Pancuronium or Succinylcholine chloride, all of which are used in the hospital here, Dr. Foye said.

Later today, Dr. Duane Freier

hospital chief of staff, said that doctors now believed that the drug that caused the seizures was a relaxant called tavulom. "If this is true," he said, "it is likely to be intentional."

While the investigation is proceeding, the hospital has brought in extra nurses and assistants who are told to watch one another, and the dangerous muscle relaxants are being kept under lock and key as if they were narcotics, Dr. Foye said.

Since these measures were put into effect last Friday, there has been no case of unexpected cardiac arrest or respiratory failure at the hospital, he said.

But this, Dr. Foye said, is no more than suggestive that

the precautions being used are having an effect.

"It is not unusual for the hospital to go four or five days without a respiratory collapse," he said.

Hospital officials said that an investigation was decided on over the weekend after concern was voiced at a routine staff meeting for hospital doctors about the growing number of patients undergoing such seizures.

One staff doctor said, however, that the investigation was agreed to only after younger physicians—residents and interns—kept demanding one.

Dr. Foye said that specimens of bile, blood and fluids from affected patients had been an-

alyzed by technicians at the University of Michigan Teaching Hospital, but that the results were "inconclusive." Some of the machinery being used for the testing malfunctioned, he said.

Additional tests are being done at the F.B.I. laboratory in Washington and at a toxicology laboratory in Denver.

Dr. Ronald Bishop, chief of medicine at the V.A. hospital here, reported that an intravenous tube that had been attached to one affected patient had been tested and that it appeared to contain a trace of a drug that could cause paralysis.

Another patient told reporters that he awakened one night

THURSDAY, AUGUST 21, 1975

## Talk of a 'Poisoner' as the F.B.I. Presses

last week while someone was trying to inject a substance in his arm.

Dr. Foye said that F.B.I. agents had questioned this patient, and that his statement was being checked out.

The F.B.I. would make no comment on the case other than to acknowledge that its agents were at the hospital.

Hospital officials would not release detailed information about the patients who had undergone seizures. But Dr. Foye said that they were all men and that they ranged in age from young to old. He said he did not believe that they were all of the same race.

Dr. Frier said that the men

who had died ranged in age from 50 to 90 and that the youngest man who had suffered a seizure was in his 40's.

Dr. Foye said that he expected the preliminary investigation would continue through Friday but that there was no guarantee that a conclusion would be reached.

The hospital here was opened in 1953 and is classed as a general medical and surgical hospital. It treats both men and women veterans and attracts a large number of patients with serious ailments because of its excellent staff and facilities, the Veterans Administration said.

Many of the doctors at the V.A. hospital here also are

on the staff of the University of Michigan Teaching Hospital.

Dr. Foye said that the hospital had 260 patients today, down 25 patients from yesterday.

The hospital has stopped admitting routine cases and has also canceled all but emergency surgery.

Many of the patients who suffered attacks were in the intensive care section of the hospital, recovering from surgery. And because almost all of these had intavenous tubes in their arms at the time of their collapse, doctors were analyzing drugs and other medicines to determine whether a batch used in the I.V. tubes had been contaminated or if

c 23

## Investigation

a bottle of medicine had been mislabeled.

One doctor said, however, that the heart seizures and the respiratory collapses had occurred among routine medical patients as well as surgical cases, and on ward floors as well as in the intensive care unit.

Dr. Foye said that the V.A. had decided to concentrate on the 15 "suspect" cases because many of the other patients who had suffered heart seizures were old, were gravely ill, or had histories of heart ailments. It would not be unexpected that such a patient might suddenly go into respiratory collapse or have heart failure, he said.