EXHIBIT 41

UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

OAKLAND DIVISION

VIETNAM VETERANS OF AMERICA, et al.,
Plaintiffs,
vs.
CENTRAL INTELLIGENCE AGENCY, et al.,
Defendants.

) No. CV 09-0037-CW

) Volume II

Continued videotaped deposition of MICHAEL E. KILPATRICK, M.D., taken at 2000 Pennsylvania Avenue Northwest, Washington, DC, commencing at 9:27 a.m., Thursday, July 7, 2011, before Nancy J. Martin, California CSR No. 9504, RPR.

PAGES 258 - 506

in it when I was there. They would bring the prisoners of war back in on a regular basis for complete evaluation.

Many of them had complicated long-term problems from chronic infections they had without being treated while they were interned. So, again, I think how to present that as affects the research that was done with chemical or biological agents is not necessarily comparing apples to apples, I think is what I'm trying to say. It's a different type of condition.

BY MR. ERSPAMER:

Q. Well, have any studies been done of the long-term effects of exposure, that you know of, to Q fever? 17:02:49

A. And I think, again, that was addressed by the Institute of Medicine, and they're looking at the medical literature as it would look at long-term health effects in individuals diagnosed with Q fever. And, again, they're not seeing long-term effects from that. And that doesn't mean that there are not health changes in an individual. It's getting the causal relationship between that exposure and the subsequent health effect --

Q. When you look at chemicals, you also have to 17:03:37

look at where the chemicals migrate in the human body, whether they're processed by the liver, for example, is a factor; correct?

MR. GARDNER: Objection. Vague.

THE WITNESS: Again, you look at the pathophysiology or the root of excretion of chemicals, and you look at the half life and how long a chemical has any sort of potent dose. Most chemicals are eliminated from the body fairly quickly, and they're not going to be around for a long period of time. So to ascribe liver problems to a short one-time or two-time exposure from a medical evidence standpoint is not on solid ground.

BY MR. ERSPAMER:

Q. Well, you put the veteran in a rather difficult position. If he's got liver cancer and he's been exposed to a toxic agent years earlier, the proof of the causal relationship between the exposure and the disease is a rather complex subject, you would agree? 17:04:31

MR. GARDNER: Objection. Hypothetical. Objection. Argumentative. Objection. Beyond the scope of the Rule 30(b)(6) deposition notice.

THE WITNESS: Let me address the cause-and-effect relationship in a veteran who has an illness and was

exposed because I think that gets to the heart of the issue. If someone is on active duty and develops any medical condition, that is presumed to be service connected. And if an individual in the service leaves the military and is out of the military for a year or more and develops a medical condition, then by law, which congress has set up, the VA must do a determination of service connectedness or potential for service connectivity for that medical condition.

As you said, that is a very difficult thing to prove. If, while I was on active duty I got diabetes, I wouldn't have to prove what caused the diabetes. It happened while I was on active duty, and therefore, it's covered.

If I got out of the service, was out for over a year and developed diabetes and wanted to go to the VA to say, "I'd like this to be service connected" or "I'm disabled. I'm blind in an eye" to get disability, the VA would have to find some nexus that would say there's at least a 50 percent probability it was due to something I did while I was in the service.

I can almost guarantee you that won't happen unless you're a Vietnam veteran and it's Type 2 diabetes. So, again, I'm agreeing with what you're saying. It's a very hard thing to do, but we cannot

generalize to exposure, and any subsequent illness is therefore due to that exposure. The rules -- scientific rules of evidence say you need to take a look at two populations, exposed, not exposed. What is the increased rate of that illness or disease, and if it's at a significant enough level, then it could be presumed that it's due to service.

And that is kind of the guideline and rules that the secretary of Veterans' Affairs can use to make that decision process.

BY MR. ERSPAMER:

Q. That was a very long answer, and I hate to quibble with you, but I think that I want to ask you about one statement I believe you made. When a veteran files a claim for service connection, unless the VA is convinced there's a reasonable probability of a valid claim, it does not even order a physical examination, a medical examination of the veteran. Isn't that the case? 17:07:27

MR. GARDNER: Objection. Beyond the scope of the Rule 30(b)(6) deposition notice. Also objection. Mischaracterizes Dr. Kilpatrick's testimony.

THE WITNESS: I really can't speak to the processes in the VA for determining disability. My understanding was that applications disability are

DECLARATION

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 2011, at _____, _____.

_____

MICHAEL E. KILPATRICK, M.D.

I, NANCY J. MARTIN, CSR No. 9504, do hereby certify:

That the foregoing deposition testimony of MICHAEL E. KILPATRICK, M.D. was taken before me at the time and place therein set forth, at which time the witness, in accordance with CCP Section 2094, was placed under oath and was sworn by me to tell the truth, the whole truth, and nothing but the truth;

That the testimony of the witness and all objections made by counsel at the time of the examination were recorded stenographically by me, and were thereafter transcribed under my direction and supervision, and that the foregoing pages contain a full, true and accurate record of all proceedings and testimony to the best of my skill and ability.

I further certify that I am neither counsel for any party to said action, nor am I related to any party to said action, nor am I in any way interested in the outcome thereof.

IN WITNESS WHEREOF, I have subscribed my name this 11th day of July, 2011.

NANCY J. MARTIN, CSR No. 9504

EXHIBIT 42

DEPARTMENT OF DEFENSE'S CHEMICAL AND BIOLOGICAL TEST RELEASE PROJECT MEETING NOVEMBER 29, 2004

On November 15, 2004, the Department of Veterans Affairs' (VA's) Compensation and Pension (C&P) Service participated in a Department of Defense (DoD) project kick-off meeting. DoD and its contractor outlined data collection and disclosure plans for approximately 200 to 1,000 previously unreleased chemical and biological tests. The exact amount of affected veterans is unknown.

This meeting was the result of Government Accountability Office (GAO) report 04-410, *Chemical and Biological Defense: DoD Needs to Continue to Collect and Provide Information on Tests and Potentially Exposed Personnel.* The May 2004 report recommended that DoD completely declassify and disclose its chemical and biological testing records involving service members.

PARTICIPANTS

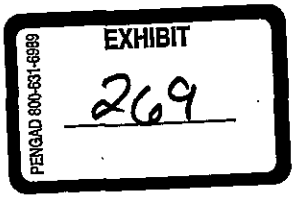
The meeting included the following participants:

- **DoD's Deployment Health Support Directorate (DHSD):** Dee Morris (lead), Barbara Goodno, Tony Denicola, Roxana Baylor, Roy Finno, and Lionel West.
- **Department of the Army:** Colonel Debra Thedford, Director of Chemical and Biological Defense Programs.
- **Battelle Corporation's Chemical and Biological Defense Information Analysis Center (CBIAC):** Donald McGonigle and Andrew Blackburn.
- **C&P Service:** Glen Wallick, Joe Salvatore, and, via conference call, Tom Pamperin.

TEAM STRUCTURE

The Secretary of Defense tasked the Army with complete oversight over DoD's entire data gathering and disclosure processes. The Army contracted with CBIAC for data collection and database creation.

DHSD will facilitate the Army's entire process as in past activities with VA on Project 112 and Project Shipboard Hazard and Defense (SHAD) tests. Ultimately, VA will receive rosters and select data from DoD's discoveries.



RECORDS SEARCH

The Army agreed to search select military repositories, National Archives and Records Administration facilities, and military base holdings for classified and unclassified chemical and biological test information from 1942 to present.

The record search includes mustard gas but excludes radiation-related tests.

a. Repositories

Targeted data collections will focus on repositories at Fort Detrick, Naval Surface Warfare Center Dahlgren, Dugway Proving Ground, Aberdeen Proving Ground and Edgewood Arsenal. DHSD and VA provided input on other known records locations.

b. Prioritized Records Searches

Given the infinite possibility of searchable variables and limited time, DHSD, Army, and CBIAC requested that VA prioritize their claims processing data needs. VA provided all parties with the following list of variables deemed as absolutely required from researchers, where possible:

- Test name
- Test site
- Test start date
- Test end date
- Test agent/simulant/ decontaminant used
- Test dose estimate sensor readings per individual and group
- Human participant name (servicemembers, civilians, contractors, foreign workers with country)
- Social security number
- Service number
- Branch of service
- Date of birth
- Treatment facility name (if medical treatment was rendered)
- Treatment details
- Details of any exposure injuries

Note: VA has developed a list of secondary data which may still be useful for statistical and claims purposes. This list has not yet been shared with DoD but can be found in Attachment A: *Secondary List of Variables.*

PRIORITIES

CBIAC outlined the following priorities:

- Compilation of names and personal identifiers for all servicemembers and participants
- Identification of proposed and actual human exposure events with test program names (i.e. fact sheets)
- *Creation of electronic databases containing all names and supporting documents*

MEETINGS

DHSD will meet monthly with VA to discuss the project.

KEY POINTS

- All tests will be examined, regardless of location – CONUS and international
- Some classified documents will remain even after this effort
- Tests include both civilians and servicemembers
- DoD must respond by March 2005 to GAO's report 04-410, *Chemical and Biological Defense*
- Names of civilians may be routed to the Department of Labor

POINTS OF AGREEMENT

- VA is the ultimate customer
- AT&L finds information, declassifies it, and sends it to DHSD in the form of a database
- DHSD imports the database, creates fact sheets on chunks of tests, and updates its website as appropriate
- VA notifies veterans as appropriate

RECOMMENDATIONS

- Ensure that DoD provides a comprehensive veteran database with specific test information for claims processing purposes
- Brief VA leadership on DoD's project, VA's role, and expected deliverables
- Document all DoD/VA interactions to address internal and external stakeholder reviews
- Consider creating a specialized office to handle all chemical and biological test activities

Joe Salvatore (212)

ATTACHMENT A
SECONDARY LIST OF VARIABLES

Upon a thorough DoD search for all "absolutely required" data needs, VA would also appreciate the following variables for veterans only:

- Type of exposure:

  a. Disposal/destruction of substance
  b. Manufacturing of substance
  c. Production: Manufacturing and handling of substance
  d. Research and development of substance (includes volunteer participants)
  e. Testing (CONUS, includes Alaskan and Hawaiian islands prior to statehood)
  f. Testing (foreign soil)
  g. Training exercises
  h. Transportation of substance (i.e. air, rail, ship, truck)
  i. Warfare I (Battlefield conditions)
  j. Warfare II (Direct result of incoming enemy munitions)

- Type of test activity

  a. Atmospheric (i.e. aerial drop, aerial spray)
  b. Body part exposure [i.e. body location (arm) with type of test (patch, drops, or injection)]
  c. Full body exposure (i.e. sealed gas chamber)
  d. Surface-level (disposal, destruction, wind tunnel)
  e. Inhalation, non-sealed chamber (i.e. open room)
  f. Oceanographic (i.e. above or below water)
  g. Space
  h. Underground
  i. Oral

- Autopsy reports
- Death certificates

JS: jsalvatore x6948 11/26/04 212B___ 212____211_____ 21O_____ 21_____
h/cap-21/212/ChemBio/DOD Mtg Summary Final 11_26_04.doc

EXHIBIT 43

UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA, OAKLAND DIVISION

VIETNAM VETERANS OF AMERICA, et al., Plaintiffs,

vs.

CENTRAL INTELLIGENCE AGENCY, et al., Defendants.

Case No. CV 09-0037-CW

A PORTION OF THIS TRANSCRIPT IS CONFIDENTIAL

DEPOSITION OF DEE DODSON MORRIS

Washington, DC

Wednesday, July 6, 2011

REPORTED BY:

CARMEN SMITH

PAGES 1 - 254

PAGES 248 - 249 ARE CONFIDENTIAL

AND ARE BOUND SEPARATELY

Deposition of DEE DODSON MORRIS, called for examination pursuant to notice of deposition, on Wednesday, July 6, 2011, in Washington, DC, at the offices of Morrison & Foerster LLP, 2000 Pennsylvania Avenue Northwest, Suite 6000, at 9:00 a.m., before CARMEN SMITH, a Notary Public within and for the District of Columbia, when were present on behalf of the respective parties:

THE WITNESS: It's -- we meant -- or I meant pretty much what I said here. There were things that came out of the Gulf War investigations that we could neither confirm nor deny because we didn't have enough information, whether or not somebody had or had not been exposed to something.

And looking at the way that the Department of Veterans Affairs draws its conclusions, we felt that we had an obligation to our service members to accurately keep track of what they were being exposed to, whether at the time we felt it was harmful or not.

And because science is evolutionary, we find things out, and if we have this information available when we find something is more harmful than we perhaps thought initially, then we can, as I said, make it right, you know.

If the person was, in fact, harmed by it, then they have a legitimate claim for compensation.

BY MR. PATTERSON:

Q So if the Department of Defense conducted an experiment and later found out that there were harmful effects, they have an obligation to state those harmful effects to that test subject?

MS. FAREL: Objection; relevance and

mischaracterizes prior testimony.

THE WITNESS: We have an obligation to make the information available. That may be through the VA. If we are asked directly. We have an obligation to be truthful.

BY MR. PATTERSON:

Q And what information is that that you would make available?

MS. FAREL: Same objection.

THE WITNESS: Substance, dose, potential harmful effects.

BY MR. PATTERSON:

Q When you say we can go back and make it right, is there anything else that you haven't mentioned yet that you were referring to?

A No. Essentially, what it really means is that the information that is necessary to make a appropriate evaluation of a veteran's claim is there so that that evaluation can be made.

Q And what information is that?

A Substances, exposures, dosages, potential effects.

Q And just stepping back to something we talked about earlier, are any of your current claims with the VA related to your exposure at Edgewood

I declare under penalty of perjury under the laws that the foregoing is true and correct.

Executed on _____ , 20___, at _____, _____.

_____

DEE DODSON MORRIS

CERTIFICATE OF NOTARY PUBLIC & REPORTER

I, CARMEN SMITH, the officer before whom the foregoing deposition was taken, do hereby certify that the witness whose testimony appears in the foregoing deposition was duly sworn; that the testimony of said witness was taken in shorthand and thereafter reduced to typewriting by me or under my direction; that said deposition is a true record of the testimony given by said witness; that I am neither counsel for, related to, nor employed by any of the parties to the action in which this deposition was taken; and, further, that I am not a relative or employee of any attorney or counsel employed by the parties hereto, nor financially or otherwise interested in the outcome of this action.

Notary Public in and for the
District of Columbia

Commission Expires: MARCH 14, 2013

EXHIBIT 44

MKULTRA Briefing Book

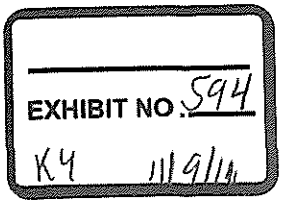
Containing brief summaries
of each of the 149 MKULTRA subprojects

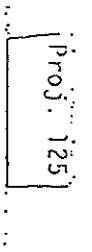
1 January 1976*

399 pages
(including cover sheet)

* Note: Document is undated. This is an estimated publication date.

RELEASED January 1999





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~~SECRET~~

SUB-PROJECT NO. 125

PRINCIPAL RESEARCHER AND LOCATION: [redacted]
Veterans Administration Center
Martinsburg, West Virginia

OBJECTIVE AND DETAILS OF WORK: This project partially supported an on-going study at the Veterans Administration Center in Martinsburg, West Virginia, studying differential effects of drugs on behavior. The emphasis was on the placebo effect and the interaction between placebo and drugs. The drug was d-amphetamine and the dose level was 10 mg. The study attempted to isolate subtle effects which, at that time, were highly pertinent to evaluating results from the Agency's more general work with psychopharmacological agents.

APPROXIMATE TIME SPAN: 1960-1963

SIGNIFICANT ASPECTS: Four group members of the Domiciliary at the Veterans Administration Center, Martinsburg, West Virginia were involved in the tests: those receiving drugs, those receiving placebos, those who were not aware they were receiving drugs, and those receiving nothing. Two published articles resulted from these studies.

FUNDING:

COVER MECHANISM: Society for the Investigation of Human Ecology, Inc.

APPROXIMATE TOTAL: $12,000

~~SECRET~~

E2 IMPDET
CL BY [redacted]

327

RESEARCH PARTICIPANTS: [redacted] Research Assistant, Unwitting

[redacted], Unwitting

[redacted], APA, Unwitting

[redacted] NIMH, Unwitting

[redacted], Unwitting

[redacted], Unwitting

[redacted], Research Assistant, Unwitting

OTHER SPONSORS: NIMH, Computer Analysis, Unknown if witting

NAMES OF CIA MONITORS: [redacted]

APPROVERS: Sidney Gottlieb

C.V.S. Roosevelt

2

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EXHIBIT 45

VVA023835

EYES ONLY

ORD 0420-75

31 JAN 1975

MEMORANDUM FOR: Office of Inspector General

ATTENTION : [ ]

SUBJECT : ORD Research and Development for Intelligence Applications of Drugs

1. Attached is a description of the now defunct ORD program for influencing human behavior with drugs. I believe that it contains much of the information you asked for during our conversation of 31 January 1975.

2. As the summary indicates, work with Edgewood Arsenal Research Laboratories (EARL) began in 1967 and ended in 1973. The initial part of the work dealt with the collection of chemical and other descriptive data on a variety of drugs developed in foreign countries. This segment of R&D was not directly related to the other which began in early 1971. The latter work involved testing specific drugs on human subjects. Both parts of this drug research program were terminated in January 1973. Funds transferred for the support of enlarged foreign collection of drug data were withdrawn in January 1973. Final charges to the other half of the program were completed by 31 March 1973. At that time about 75% of the original funds were expended.

3. Our files show that in general there is a dirth of hard information on reporting the scientific results on the testing of human subjects. Because of the rapidity with which this project was terminated, final reports on some of the testing were probably not delivered.

4. As far as I can determine, the work with EARL using human subjects focused on a substance identified as EA#3167. This substance was apparently a glycolate class chemical and was previously developed or identified as a potential incapacitant by EARL. At the time the work was undertaken, there was some indication that the Soviets were known to be actively working in the glycolate area.

[ ]

SECRET

VVA023835

EYES ONLY

SUBJECT: ORD Research and Development Projects for Intelligence Applications of Drugs

5. The records indicate that EARL was selected for this program because of their existing project on foreign drug data collection, because of their exclusive experience with EA#3167, and because they had an established program using human volunteers.

6. The only reference we can find in our files relating to the effects of EA#3167 is a report by one of our personnel commenting on an EARL report. This, however, occurred in May 1970 prior to our participation in a cooperative program. That commentary describes a test on 19 human subjects divided into three groups, each of which was assigned a different doseage of EA#3167. Regarding the effects of the chemical, it was found that in most cases side effects appeared within four hours of injection and varied in duration from four hours to 19 days. The desirable primary effects did not appear until after side effects were evident and varied from one hour to 90 hours.

/s/ JAMES V. HIRSCH
James V. Hirsch
Director of Research and Development

Attachment:
Influencing Human Behavior

EYES ONLY

SECRET

INFLUENCING HUMAN BEHAVIOR

ACTIVITY - Drug Research

PROGRAM - To develop ways for predictably influencing human behavior through the use of drugs.

The drug research program began in FY-1966 with a proposed Behavioral Pharmacology program. The program objective was to develop an Agency capability to manipulate human behavior in a predictable manner through the use of drugs. Examples of operational situations where use of drugs might help were interrogation situations, penetration of guarded areas, covert action, and paramilitary operations.

A phased program was envisioned that would consist of the acquisition of drugs and chemical compounds having desired behavioral effects, testing and evaluating these materials through primary and secondary procedures and toxicological studies. Promising compounds from tests with animals were to be clinically evaluated with human subjects. It was proposed that when testing with human subjects was required the tests would be done jointly with the Chemical Research and Development Laboratory, Edgewood Arsenal Research Laboratories (EARL), and the U.S. Army. Substances of potential use, uncovered in testing, were to be further structurally analyzed so that new derivatives with greater utility could be synthesized.

Samples of drugs and chemicals for testing in the program were obtained from drug and pharmaceutical companies, government agencies (EARL, NIH, FDA, and VA), research laboratories, and other researchers; most came from the drug industries where the substance had been rejected because of undesired side effects.

The program was made up of Projects OFTEN and CHICKWIT. Project OFTEN dealt with the testing of behavioral and toxicological effects of drugs in animals and ultimately in humans; Project CHICKWIT, with the acquisition of information and samples of new drug developments in Europe and the Far East.

A special review panel with members from ORD and TSD was organized to oversee the research program and to assist in the selection of compounds for testing. Panel meetings were held periodically for progress reports and program guidance. On several occasions upper management including the DCI, the Executive Director/Comptroller, DDP, and the DD/S&T were briefed on the drug research program.

SECRET [ ]

The principal contractor under Project OFTEN was [ ] which received its first contract in FY-1966 (Table 1) and continued under contract until January 1973 when the contract was terminated by direction from the DCI. [ ] established and used test procedures with animals from which the behavioral effects of drugs and chemical compounds in humans could be predicted. As the program progressed, additional secondary screening procedures were introduced using nonhuman primates as necessary prerequisites to testing with humans. [ ] employed [ ] as a subcontractor, who provided information on new drugs and chemicals and assisted in the screening and testing of selected new drugs and chemicals.

Synthesis of new drugs or derivatives for Project OFTEN was done by [ ] (Table 2). Their first work began in mid FY-1971 and was also terminated with the directive from the DCI in January 1973.

[ ] George Washington University, performed several literature surveys for the program [ ] (Table 3).

Association with Edgewood Arsenal Research Laboratories started in FY-1967 with a transfer of Project CHICKWIT funds to EARL to jointly support [ ] collection of information on and samples of new drugs in Europe and the Far East (Table 4). Out of this association with EARL came information and samples of new drugs obtained [ ] and EARL results on the clinical testing and screening of new drugs and chemical compounds using animals and humans as test subjects. These data were merged with test data and information from other sources into a computer controlled data base.

Analysis of the Edgewood file data identified EA#3167 as a potential incapacitant. Edgewood Arsenal had partially investigated EA#3167 with animals and found it to be effective percutaneously, in tests with humans the drug had been only administered intermuscularly. Our interest in further testing of EA#3167 arose from its potential threat to U.S. VIP's and other key personnel if, indeed, it could be easily administered by oral or trans-dermal routes. Our joint effort with EARL to test the compound began with the $37,000 transfer in FY-1971 to support additional pharmacological studies and clinical testing with human volunteer subjects (five prisoners from Holmesburg State Prison, Holmesburg, Pa., and fifteen military volunteers) in the Edgewood program. The protocol used by Edgewood in enlisting volunteers for the EA#3167 testing and the safeguards practiced during testing were analogous to those stated in the

unclassified Report Number VII, ID50 of Agent 926 by Dr. Herbert W. Copelan, Ivy Research Laboratories, Inc., submitted in May, 1970, to the Medical Research Laboratories, Directorate of Laboratories, Edgewood Arsenal, namely:

> "The human subject in this test conducted by this organization are volunteers. There is no coercion or inducement to volunteer except for incentive pay utilized as a part of the test procedure and payment for discomfort of blood testing and screening procedures. Stringent medical safeguards surround every human test."

Although a final report on this effort is not available, we were informed that EA#3167 can be effectively administered by both oral and trans-dermal routes with after effects lasting up to six weeks.

Agency support to the clinical testing of EA#3167 and collection of information on and samples of foreign drug developments was terminated in January 1973. Because of the prolonged after-effects of EA#3167, additional charges to the contract were made after this date for necessary post-test follow-up observations and examinations of the volunteer.

TABLE 1

[redacted]

FY	4505	5843	9384
66/67	$ 79,633	$	$
68	68,945		
69	149,905		
70	149,901		
71		149,958	
71		3,000	
72			82,765
73			34,761
73			22,086

SECRET

VVA023841

SECRET

TABLE 2

[redacted]

FY	ONR 73-530
71	$49,950
72	16,650
73	32,667*

*As of 16 March 1973 $32,667 had been charged leaving an unobligated amount of $18,671.

SECRET

VVA023841

TABLE 3

[ ]

GEORGE WASHINGTON UNIVERSITY

FY	[ ]
70	$7,645

SECRET

~~SECRET~~

TABLE 4

TRANSFERS TO EARL

FY	Project CHICKWIT	Project OFTEN
68	$12,084	$
70	5,000	
71		37,000

~~SECRET~~

EXHIBIT 46

85th Congress, 1st Session } HOUSE COMMITTEE PRINT NO. 50
Case4:09-cv-00037-CW Document359-46 Filed02/28/12 Page2 of 16

MEDICAL RESEARCH IN THE VETERANS' ADMINISTRATION

PREPARED BY

THE DEPARTMENT OF MEDICINE AND SURGERY OF THE VETERANS' ADMINISTRATION

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ARC00000006

Variation in the Concept of Schizophrenia. E. J. Koch (VA-Psychiat.)

A preliminary study of the variability in the concept of schizophrenia among psychiatrists, psychologists, social workers, and psychiatric nurses. The author is interested in studying the existence of basic similarities and basic differences in point of view with reference to schizophrenia.

Adjunctive Therapy Programs and Behavior Changes in Chronic Patients. T. J. Ryan (VA-PMRS.)

An investigation to determine the import of the variable of attention given to chronic schizophrenic patients in their participation in adjunctive therapeutic activities, and the effect of this variable upon social and interpersonal adjustment as measured by the Montrose Rating Scale. Four groups of patients are matched in sets of four. One group serves as the control group and will adhere to the present activity schedule. In the second group, the adjunctive therapists and ward personnel will attempt to develop warm interpersonal relationships. The third group will be treated objectively by the adjunctive therapists. A fourth group will receive ward attention from therapists, but will follow a definite activity program. All patients will receive the Montrose Rating Scale before and after the program with a four-month period intervene.

Hymns of Hope and Healing. B. Goward (VA-Spec. Serv.)

A collection of Protestant hymns especially selected and edited for a neuropsychiatric hospital population. This has entailed deleting from the collection or editing certain hymns to avoid phrases dealing with feelings of guilt, worthlessness, suicidal implication, depressing ideas, and hallucinatory expression. There is included a preface justifying the need for such a collection of hymns.

Insight as a Prognostic Factor in Mental Illness. L. H. Kashe (VA-Psychiat.) and S. G. Klebanoff (VA-Psychol.)

Two groups of schizophrenic patients are to be studied with one group of 25 patients classified as possessing insight into the illness and the second group of 25 patients as not manifesting insight into the illness. Insight is then evaluated in relation to prognosis as indicated by trial visit from the hospital. In addition, a major portion of the study is to engulf the psychiatric and psychopathological concomitants of insight.

NASHVILLE, TENN.

Effect of Lysergic Acid Diethylamide on Isolated Enzyme Systems. N. S. Olsen (VA-Bch.), G. G. Rudolph (RI-VA), V. J. Burkhalter (VA-M. T.), and S. G. Nichols (VA-M. T.)

In an effort to elucidate the mode of action of LSD experiments with phosphoglucomutase, glucose-6-phosphate dehydrogenase, hexokinase, and phosphohexose isomerase systems were done. Only phosphoglucomutase was inhibited by some preparations of LSD. Due to confusion about the purity of LSD it is contemplated to study some of the

physical properties, especially the infrared and ultraviolet absorption spectra.

Serotonin in CSF. M. L. Doyle (VA-Bch.) and N. S. Olsen (VA-Bch.), S. G. Nichols (VA-Med. Tech.)

Attempts to establish a method for the determination of serotonin in spinal fluid have followed the procedure outlined by Udenfriend. These are based on the extraction of 5-hydroxytryptamine (serotonin) from the spinal fluid and its determination by ultraviolet absorption or colorimetric means. We shall then administer various convulsive and tranquilizing drugs to animals to see if a variation in serotonin level has occurred in CSF.

NEW ORLEANS, LA.

Psychological Test Results in Cerebral Pathology. R. Barrett (VA-Clin. Psychol.) and I. A. Fosberg (VA-Clin. Psychol.)

A record is kept of all patients with diseases of the brain on whom psychological tests have been ordered. These cases are followed through to final termination and where autopsies are available the psychological findings and the clinical findings are compared. It is the purpose of this study to perfect the predictive value of the psychological tests. This study is still in progress but is proceeding slowly owing to transfer of principal investigator to another station.

Controlled Study of the Value of Chlorpromazine in Allaying Anxiety. G. H. Fromm (VA-Psychiatrist) and I. A. Fosberg (VA-Clin. Psychol.)

By the method of pairs of patients matched for age, sex, diagnosis, and length of illness, chlorpromazine and placebos were administered in such a manner that the attending physician was unaware whether his patient was receiving the drug or the placebo. After a prescribed period of medication, the evaluation of the patient's anxiety level after the course was compared to his level prior to treatment. It was concluded that this drug is of help in two-thirds of the cases.

Clinical Evaluation of the Tomkins-Horn Picture Arrangements. W. Morris (VA-Clin. Psychol.) and I. A. Fosberg (VA-Clin. Psychol.)

Fifty copies of this test have been sent to this station by the authors of this test. They requested our cooperation in administering, scoring, and interpreting the test in order to help them establish norms. This study is currently being carried out.

Sexual Dominance as Reflected in the Draw-a-Person Test and the Wechsler-Bellevue Test. I. A. Fosberg (VA-Clin. Psychol.)

The draw-a-person test and the Wechsler-Bellevue intelligence test are administered to patients. The height of the male and female figures are compared to each other and note is taken of the answers given on the Wechsler test item: "How tall is the average American

in various NP hospital subgroups (geriatric patients, closed-ward patients, open-ward patients) as they view various types of motion pictures (comedies, westerns, dramas, adventures, and the VA-banned war movies). Analysis of various techniques will be used to determine whether level of disturbance varies with patient group and with movie type.

Study of the Effects of Cortisone Administration upon Sensitivity to Intoxication with LSD-25 in Schizophrenic Patients. Lincoln D. Clark (VA-Med.) and Louise S. Clark (VA-Med.)

Summary: This study represents an effort to determine whether sensitivity to LSD–25 is modified by administration of cortisone, a substance of known psychotogenic potential. The minimum dose of LSD necessary to produce definite LSD effects (elementary visual patterns) is individually determined during a control period. This actual dosage will then be repeated after the subjects have been maintained on varying periods of cortisone at 200 mgm per day.

Comparative Study of the Effects of Thorazine, Reserpine, and Reserpine-Thorazine Combinations on the Behavior of Chronic Schizophrenics. William Barrett (VA-Med.), Robert B. Ellsworth (VA-CP), Lincoln D. Clark (VA-Med.), and Jane Enniss (VA-Nurse)

Summary: This double-blind study is designed to study the relative effectiveness, as judged by rating scale methods, of these drugs and drug combination in individually maximized dosage, upon the behavior of 32 chronically hospitalized schizophrenics in a stabilized environment. All subjects, regardless of nature of drugs or dosage prescribed, received the same number of identical capsules daily. This study will be of 3 months duration.

Observations on the Social Dynamics of Patient Government on a Psychiatric Ward and Evaluation of the Effects upon Patient Behavior (Judged by HAS) of Active Participation in Patient Government. Robert B. Ellsworth (VA-CP)

Summary: The ward psychologist observed during 2 years, the introduction and evolution, in interactional terms, of patient government on a ward of chronic psychiatric patients. Several parameters of a successful patient government were defined. The HAS was administered every 3 months to each patient on the ward. Individuals elected as patient representatives, for a 1-month term, showed in 16 of 18 instances definite improvement in hospital adjustment, reflected as a difference between preterm and postterm scores. With a few exceptions, this improvement was not sustained at reevaluation 6 months or more after the term of office. Results correspond with clinical impression that experience as a patient representative leads temporarily to a better adjusted patient; however, the possibility of rater bias and lack of a control group is recognized as limiting the conclusiveness of the study as regards the therapeutic value of patient government.

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2d Session } HOUSE COMMITTEE PRINT NO. 188

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PREPARED BY

THE DEPARTMENT OF MEDICINE AND SURGERY

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ARC00000961

A Study of Ataractic Drug Withdrawal in Chronic Psychotic Patients. *E. Z. Levy (VA-P.), W. P. Benjamin (VA-P.), and A. D. Cook, Jr. (VA-P.)*

Study initiated January 1957. Many chronically ill psychotic patients have been receiving ataractic drugs over a long period of time (e. g., 1 year or more) without any dramatic effects but they seem to have become "easier to manage" on the ward. By placebo substitution in a small group of such patients, an attempt was made to assay the need for continuation of these drugs for "ward management" purposes. Subjective behavior reports and Lorr and Ferguson scale ratings were used. By June 1957, data had not been fully analyzed and no definitive judgments could be made. It was the investigators' impressions, however, that two or three of the patients showed clinical deterioration when substitution of the placebo took place. No further deterioration was noted upon withdrawal of the placebo and subsequent absence of all medication. Other patients in the project showed no change as far as could be determined from interviews when placebo was substituted and when all "pills" were withdrawn. Study terminated.

An Experimental Investigation of the Effects of Mescaline. *L. J. Silverthorn (VA-Psychol.) and A. H. Milne (VA-P.)*

A group of subjects were given a drug, mescaline sulphate, which is known to produce definite subjective symptoms in practically all people. Psychological observations were made on the manner in which various subjects reacted to the appearance of these drug-induced changes in their body. Subjects were tested before and during the intoxication. An attempt was made to correlate these observations with the personality structure of the subject, especially in terms of reflectiveness. The data show a wide individual variation, but also statistically significant impairment of memory. A decrease in organization and integration on the part of the subjects under the experimental conditions reported by other investigators appears confirmed. The methodology used in this and other studies is questioned as to its being the most adequate to handle the intraindividual variation shown in this and other psychological studies using drugs. It is concluded that mescaline facilitated a changed organization in the subjects but by no means insured it. It became less possible for the subjects (*a*) actively to organize and integrate verbally presented meaningful material, (*b*) to construct a plan for threading paper and pencil mazes and execute it efficiently, and (*c*) to visualize 3-dimensional structures from a 2-dimensionally portrayed pile of blocks and count them. Results are not sufficiently uniform to support original premise unreservedly, but do offer some support for the proposal that subjects become more psychologically flaccid or immobile. Further refinement of the methodology and testing is required for full documentation of this formulation of the change that occurs in subjects after taking mescaline. Study completed.

The Evaluation of Long Term Effects of Chlorpromazine and Reserpine. *J. W. Chotlos (VA-Psychol.), R. E. Reinert (VA-P.), W. P. Benjamin (VA-P.), and A. H. Milne (VA-P.)*

Study initiated July 1955. The study is a continuation of a 3-month evaluation of changes induced by chlorpromazine and reserpine. The treatment period was extended for an additional year

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1st Session

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VOLUME I

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ARC000002394

E. MENTAL, PSYCHONEUROTIC, AND BEHAVIORAL DISORDERS

Comparison of Clinical Effectiveness of Thorazine With Sparine. *Thomas H. Gilmore (Psychiat.), Leo Shatin (Psychol.); Albany, N.Y.*

Forty-five schizophrenic patients received promazine, thorazine, and a placebo in a double-blind method. Behavioral evaluations were performed independently on the patients by three members of the treatment team. During the 60 days while the patient was receiving the experimental drug, blood and liver function studies were done. The results are now being analyzed. (2027)

Categorization and Factorial Study of a Behavioral Rating Scale. *Leo Shatin (Psychol.); Albany, N.Y.*

The groupings of scale items which have emerged from preliminary statistical analysis are similar to the groupings which emerged from the clinical analysis as reported in J. Mental Science, *101*: 644, 1955 (A Behavioral Rating Scale, Shatin, L. and Freed, E. X.). It was therefore deemed unproductive to continue this statistical study. (2028)

Relationships Among Sex Knowledge, Sex Adjustment and Intelligence. *Leo Shatin (Psychol.), J. A. Southworth (Psychol.); Albany, N.Y.*

Forty-three psychiatric patients received the following tests: Otis S–A, Sex Knowledge Inventory, and Terman-Miles Attitude-Interest Analysis. They were also rated on sexual adjustment by themselves (Self-Rating Scale) and by their individual psychotherapist. Relationships among these tests and ratings are being determined. Statistical evaluation is in process. (2031)

Relationship Between Responses to the Spiral After Image Test and Typical Electroencephalograph Records of Chronic Brain Damaged Patients. *John E. Tucker (Psychol.); Albany, N.Y.*

Preliminary to collecting standardization from brain damaged patients, the spiral test is being given to a selected sample of 60 normal subjects. This is for the purpose of establishing a base line of normal responses. The sample is stratified after 1950 Census data as to age, sex and education. Order of spiral presentation is being controlled in the design of this preliminary study. Twenty normals have been tested to date. (2033)

Prediction of Introversive-Extroversive Occupational Preferences From Drawings of the Human Figure. *Alvin R. Talkoff (Psychol.), Norman Paris (Psychol.); Albany, N.Y.*

The purpose of the study is to investigate the relationship between introversive-extroversive orientation as revealed by the Machover Drawing of the Human Figure (DAP) and introversive-extroversive

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2d Session }

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ARC000010730

with the NIMH Psychopharmacology Research Branch and is considered to be jointly sponsored by the VA and NIMH. The study will evaluate, over a 3-week period, the relative effectiveness of chlorpromazine and lithium carbonate in reducing manic symptoms during the acute episode, and determine by comparison with placebo whether lithium carbonate is effective in preventing the recurrence of manic episodes during outpatient treatment lasting at least 2 years. The study will also evaluate the relative effectiveness of lithium carbonate, imipramine, and placebo in preventing the recurrence of depressive episodes during outpatient treatment of at least 2 years.

Project 19 is an attempt to establish the validity of a typology for psychotics identified in previous research by Dr. Lorr, formerly chief, Outpatient Psychiatric Research Laboratory and Dr. Klett, chief, Central NP Research Laboratory. This work began nearly 10 years ago with the development of the inpatient multidimensional psychiatric scale. After the basic parameters or syndromes of psychosis measured by this scale had been established by factor-analytic studies, a search for homogenous patient types defined by these syndromes was initiated. The types discovered in a series of studies are now being investigated to determine the correlates of type membership.

Early Drug Screening Studies

These studies, partially supported by an NIMH grant, are conducted by VAH Palo Alto in collaboration with several other VA hospitals. In project series 7, a controlled comparison of chlorpromazine and an acridan derivative, was made in 84 newly-admitted schizophrenics. Both drugs were effective, neither was better overall than the other, nor in any special diagnostic subtypes of schizophrenia. The drugs were relatively comparable in terms of side effects.

A comparative study is underway of oxypertine and thiothixene in other newly admitted schizophrenics. Of the antipsychotic drugs, oxypertine in early reports seemed to be most different from others in regard to the profiles of patients who responded to it. Thiothixene was chosen as a comparison drug to support previous results and it was expected to have a contrasting pattern of clinical response.

In Project Series 13, the investigators at the participating VA hospitals embarked on a three-pronged antidepressant study, based on advance classification of patients into depressive subtypes and computerized assignment to drugs on this basis. They are nearing completion of the first phase of the anxious depression subtype study in which diazepam was compared to acetophenazine. For further investigation, diazepam will be included in a subsequent study and probably with another phenothiazine.

The on-going studies of hostile depression (diazepam versus nortriptyline) and retarded depressions (nortriptyline versus acetophenazine) are proceeding more slowly as these types of depression are less frequent.

Other Studies

Palo Alto continues to work on "social" or psychotomimetic drugs. Additional work is being conducted on synthetic tetrahydrocannabinol (THC) and synhexyl. THC in relatively high doses appears to combine some of the effects of LSD and alcohol. It produces perceptual and mood changes but without any sympathomimetic effects.

Reactions of synhexyl are similar although it appears only one-third as potent, with the onset slower and the duration longer than those of THC.

This VA hospital is spearheading a collaborative clinical trial on the evaluation of chlormethiazol (Heminevrin, Astra) in alcohol withdrawal states. This represents the first U.S. trial and several VA hospitals are participating.

Clinical analysis of preparations containing phenothiazines was formerly limited to urinary excretion data. Measures of blood levels are being made in an investigation conducted with chlorpromazine, following various dosage forms in patients maintained in steady-state conditions as well as volunteers given acute doses. This should be a valuable contribution to the field of biopharmaceutics.

Cooperative Studies in Surgery

1. Amputation Study

A prospective study of a series of amputees admitted to 21 VA hospitals was begun in January of 1967. Amputations done for arteriosclerotic peripheral vascular disease was the only indication for admission to this study.

The objective of this study is to assess the predictive value for wound-healing and rehabilitation of various factors including age, diabetes, prior sympathectomy, prior vascular surgery, duration of inability to ambulate prior to amputation, type of operation, above- versus below-knee amputation; type of prosthesis, early- versus late-fitting of prosthesis.

Rehabilitation is measured in terms of whether the patient can use the limb to walk and work. In the one year, 1967, 529 amputations were admitted to the study and we are now in the second year evaluating the degree of rehabilitation and assessing many other factors that have been accumulated as a result of this study.

2. Anesthesia and Analgesia

This cooperative study within the Veterans' Administration hospitals was formed in February of 1963, with the aim to investigate analgesics for the relief of postoperative pain and sedatives for nighttime sleep-inducing properties. Six VA hospitals have been involved since the beginning.

Methodology for the quantitative assessment of pain relief and effects of sleep-inducing drugs has progressed. Improvements in management techniques is providing greater utilization of the input data at an earlier date. Several drugs have been proposed for investigation. An additional station will begin to function this year. The following studies were completed: Analgesic Bioassay of EN1620A (N-3,31-dimethylallylnoroxymorphone hydrochloride); Hypnotic Bioassay (Interaction) of caffein and phentobarbital; Hypnotic Bioassay of methyptylon (Noludar); Hypnotic Bioassay of glutethimide (Doriden); Hypnotic Bioassay of methaqualone (Quaalude).

The following studies are currently active: Analgesic bioassay of d-propoxyphene napsylate and hydrochloride; analgesic bioassay of dihydromorphinone (dilaudid); analgesic bioassay (interaction) of dextroamphetamine and morphine; hypnotic bioassay of diazepam (Valium); patient self-administration of analgesia via a four-channel demand dropmaster system.