

Letter from . . . Chicago

Year of the apricot

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Perhaps the most important discovery of the year was the observation that the cancer-curing drug laetrile could cause not only cyanide poisoning but also nationwide confusion and hysteria. The miracle *v* menace issue raised by "one of nature's cures" was aired in the medical journals and throwaways, in lay newspapers and magazines, and in "special reports" available at local bookstores and Playboy Clubs. The Food and Drug Administration's (FDA) ban provoked and united the enemies of bureaucracy; and allowed the surfacing of a growing hostility against overprotective regulation. Patients, writers, and professional consumer advocates vented their spleen against such traditional scapegoats as the American Medical Association (AMA), the medical establishment, the regulatory bodies, and the politicians. Everybody used the opportunity to express an opinion. Some said that the fear of death was keeping laetrile alive; others that vested interests were pulling strings behind the scene; and yet others that the whole business was absurd and that laetrile should be sold at local groceries without prescription. And Dr William Barclay of the AMA declared that mixing politics and medical flim-flam had produced an astonishing performance and had led to the return of the medicine show.

Vociferous but suspect anticancer organisations rose to defend the elixir. The courts acted schizophrenically, some allowing the use of the drug, others supporting efforts to stamp out a dangerous cult. Some 13 State legislatures succumbed to local pressures and voted to legalise the drug. In Illinois the governor had the good sense to veto the bill but the legislature overrode his objections. Dr Franz Ingelfinger, himself a cancer patient, said he would not take laetrile under any circumstances, nor would he recommend it to his patients. But others argued that hope was not a crime, and that they would not object to their patients taking laetrile, or for that matter going to Mecca or Lourdes. Some doctors prescribed the drug, some were sued for malpractice, and some came out in favour of legalising a harmless drug, but then 17 people got cyanide poisoning and the surgeon-general proclaimed laetrile a health hazard. For once the AMA backed the FDA, and patients vowed to stick with the drug even if they had to travel abroad to obtain it.

Already 50 years have passed since Dr Ernest Krebs of San Francisco first concocted his apricot-pit brew to improve the flavour of bootleg whiskey and then to cure cancer. There has not been, so far, a single shred of evidence that amygdalin, or vitamin B₁₇, or laetrile, as the extract is variously called, has ever benefited man or rodent afflicted with cancer. Yet laetrile will remain with us for many years to come; and the pathetic stories of cancer patients crossing into Mexico to obtain the

miracle drug suggest that something has gone wrong with the well-intentioned design to protect the public against charlatanism.

Discrimination, drink, and driving

Meanwhile, in San Francisco Ms Francine Patterson has been trying for the past six years to break down the barriers separating man from beast—by teaching Koko, a gorilla, the sign language for the deaf. So far Koko has mastered 400 words, has learnt to respond to spoken language, and has made up some new words such as "finger bracelet" for ring and "white tiger" for zebra. She can tell when she feels happy, sad, or bored; and, while she has expressed no views about reverse discrimination, it is known from the *Planet of the Apes* that gorillas no longer impose quotas restricting the entry of chimpanzees to institutes of higher education.

But, while chimpanzees may lack incentives to emigrate from their happy planet, South Africans are reported to be leaving their native land in droves; and the 2000 individuals who emigrate each month include large numbers of doctors leaving for other countries where English is spoken. Last year in January some 220 doctors entered the USA in time to beat the new regulations for foreign medical graduates. In September some 400 took the examinations required to allow them to practise in the USA. Many of the doctors prefer the warmer climate of the south—Houston, Texas, being a particularly favoured city. In Chicago, South African expatriates find the medical opportunities for practice attractive but the climate appalling.

Yet, according to the *Farmers' Almanac*, cold winters can be, if not prevented, at least predicted. Signs to look for are squirrels hoarding nuts and chattering, bears getting fat, pigs gathering sticks, insects marching in a line, an unusual abundance of acorns, woodpeckers sharing a tree, caterpillars growing fat and fuzzy, spiders spinning large webs, and cows growing thick hair on their necks. Some farmers, however, think that these signs are unreliable, being developed by the pioneers who had a great apprehension about the winter and their ability to survive the cold.

Yet in Chicago, despite a particularly cold winter, there has been a gratifying decrease in the incidence and severity of frostbite injuries. Last winter less than 26% of frostbite victims admitted to the County Hospital needed amputations compared with 80% in previous years. This improvement has been ascribed to the 1976 law eliminating penalties for public drunkenness and encouraging skid-row residents to seek shelter in detoxification centres rather than lie down in the snow and suffer loss of life or limb. By contrast, the implied consent law requiring suspected drunken drivers to take breath tests or lose their licence for three months is seemingly less successful. The number of drunken driving arrests in Chicago has decreased greatly, and the police complain that the provisions of the law are too burdensome—particularly the 90-minute period of grace during which the driver may decide whether to take the test, a

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provision which, according to the State's attorney, makes the policeman a baby sitter for the drunken driver, thereby removing him from other duties for an extended period. And on a related subject, the Transportation Department report has found that Americans are increasingly ignoring the 55 miles-per-hour speed limit introduced after the 1974 Arab oil embargo. In a recent telegram to 22 governors, President Carter expressed concern about this trend, and his administration has prepared a proposal that would put pressure on the States to enforce the speed limit in order to save lives and energy.

Don Juan a dying species

From Dallas, Texas, come reports of the first successful transplantation of a human testis, between two identical twins. In Atlanta urologists have successfully reattached a human penis—which now has full and satisfactory function. Drs Anthony Pietropinto and Jacqueline Simenauer have found that Don Juan is a dying species and that most Americans prefer sex within the context of marriage—but do not consider it the most important pleasure in life. Most men enjoy kissing even if no sexual intercourse follows, believe it is important for women to have an orgasm, and blame themselves if the women has not responded fully. About half have never “cheated” on their wives or current girlfriends; and most are attracted by women who display self-assurance and take pride in their appearance, but are “turned off” by obesity, bad teeth, poor complexion, dirty hair, poor posture, and body odour. But above all they are “turned off” by a disinterested, unresponsive woman. Meanwhile from Washington a study sponsored by the National Institute of Mental Health shows that more men than women are the victims of domestic violence, that women go on the offensive more often, that as many women kill their husbands as husbands kill wives, and that “big women are beating up frail husbands too proud or scared to report it, mostly in the kitchen, where a number of weapons are used.”

In Florida bible-bashing Anita Bryant led a crusade against homosexuality, won, and was later elected as the second most obnoxious American of the year. In the US Supreme Court the majority of judges refused to hear the appeal of a schoolteacher fired for being homosexual—perhaps thereby implying that such individuals were outside the law. In New York a taxi driver once more demonstrated the wonderful flexibility of the English language by referring to a bearded individual wearing a skirt as “transitional.” And on the same subject the judges allowed Dr Renee Richards to play against genetic women in

the US Open Tennis Championships. Her former wife went into court for back alimony—but the doctor who bought Dr Richard's former ophthalmology practice on condition of making alimony payments refused to continue such payments because unfavourable publicity had made the \$102 000 practice worthless.

Medical legislation

In Washington a 20-year-old girl added yet another dimension to the malpractice crisis by suing her parents for \$5 million damage for gross negligence. Five years ago, while diving from a pier at a summer cottage, she struck her head and was left paraplegic. “She would never do anything inimical to her parents” declared her father, an attorney, and “we are all more precious to one another than ever before.” For doctors, however, malpractice premiums remain high and contribute to the much talked about escalation of health costs. Meanwhile, President Carter's plan to impose a 9% annual cap on hospital expenditures has become bogged down in Congress, at least for 1977. In November Congress passed a tough law increasing penalties for Medicare-Medicaid providers found guilty of fraud or abuse. Guilty individuals could be treated as felons, punished by up to five years in jail, and fined up to \$25 000; and a similar law was also passed in Illinois.

In a Chicago suburb a private group of consumer activists has produced a directory of doctors, listing their specialty, qualifications, fees, office hours, and educational background. The Federal Trade Commission is suing the AMA for alleged violation of antitrust laws, claiming that its ethics code on advertising and soliciting inhibited competition among physicians. North Carolina lost its lawsuit challenging the constitutionality of the 1974 National Health Planning Act—it had claimed that the provisions of this law violated the rights of the States, but the court ruled that since acceptance of Federal aid by State was voluntary, the requirements of the Act did not constitute coercion. Finally, it is reported that the Carter administration is now in favour of decriminalising marijuana—and so is the AMA; a doctor from the National Institute of Health wants heroin for his dying patients; and the FDA has ordered stringent labelling of oestrogens, stating that they may cause breast and endometrial cancer, gall bladder disease, and may not be needed in the first place. Whether the FDA itself is still needed, at least in its present form, remains a subject open for debate; but an irksome drug-lag has continued to oppress doctors and patients in this year of the apricot.

ONE HUNDRED YEARS AGO Christina J, of Tingwall parish, came into Lerwick to consult me regarding a sore on her tongue. She came to me on November 6th, 1875. She was then aged 66; was living with a sister older than herself; had a good family history; had enjoyed average health all her life; had never been married. I found a large “sore” on the right border of her tongue opposite to and touching the only tooth in her head: a molar in the lower jaw, with a sharp inner edge. The sore had all the characters of an epithelioma, and involved the anterior third of the posterior half of the right lateral half of the tongue, which was much indurated. The glands were, so far as I could make out, unaffected. I recommended extirpation, to which she readily consented. She, with her sister, took a suitable room in the town, and on the 9th I, with two assistants, proceeded to remove the whole organ. She was put deeply under the influence of chloroform (given on four thicknesses of towel); and I seized the tongue with a pair of forceps, and transfixed the tip of it with a needle carrying a stout double thread, which was afterwards looped and given to an assistant, by which he pulled the tongue well out of the mouth. I then laterally transfixed the tongue with a blanket-

pin, beginning at the right angle of the mouth and bringing it out at the left, and by this means carried the pin immediately in front of the epiglottis. I then placed a single loop of very stout whipcord around the tongue behind the pin, giving it one turn of a knot, ready to be tightened. Next, I divided the attachments of the tongue to the floor of the mouth by means of a pair of scissors, while it was being dragged well out by the looped thread—taking care to hold the face well sideways and close as possible to the pillow. Then I quickly severed the tongue with the whipcord, which cut it much as it would cut hardened butter in frosty weather. There was very smart haemorrhage during the time the scissors were being used, and the patient lost, as near as I could tell, about three ounces of blood. There was no further haemorrhage after the tongue was removed—never a drop from the surface traversed by the whipcord; and no ligature, or even mopping of parts with styptic, was required. The patient remained in bed three days, and went home—on foot, I believe—on the eighth day, a distance of eleven miles. She had eight months of comparative health, when the cancer returned, this time in the larynx, and ended her life thirteen months after the operation. (*British Medical Journal*, 1878.)