

THE DOCTOR'S WORLD

28 Years After Dallas, A Doctor Tells His Story Amid Troubling Doubts

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In recent weeks, the conspiracy theories about the assassination of John F. Kennedy have been fueled by an unusual new source: an eyewitness account by a surgeon on the trauma team that tried to save the President's life in 1963 and who had not testified before the Warren Commission.

The surgeon, Dr. Charles A. Crenshaw, broke a 28-year silence and was co-author of a book, "J.F.K. Conspiracy of Silence" (Signet). It could have been a valuable contribution to the history of the assassination, as any eyewitness account should be. But Dr. Crenshaw's contribution to history is particularly hard to evaluate, largely because it was written so long after the event and because he now says the book exaggerated his role in Kennedy's care.

The book has been on the New York Times paperback best-seller list for six weeks. Dr. Crenshaw's principal charge is that the bullets that struck the President entered from the front, not the back, contrary to the findings of the Warren Commission and other independent committees of experts.

Last week The Journal of the American Medical Association dealt punishing blows to Dr. Crenshaw's thesis. The journal published interviews with the two Navy pathologists who performed the autopsy on Kennedy and who affirmed their original findings. The journal also published interviews with five of Dr. Crenshaw's former colleagues on the trauma team in Dallas, and most ridiculed his charges.

The journal did not publish a scientific report, but interviews for which it can validly claim credit. The doctors cooperated because they wanted their accounts to appear in a peer-reviewed journal, said its editor, Dr. George D. Lundberg, who is also a pathologist. He then called Dr. Crenshaw's book "a sad fabrication based upon unsubstantiated allegations."

The merit of the book aside, it turns out that the journal's research was less than thorough. It did not try to interview Dr. Crenshaw. Although the Dallas doctors told the journal they never saw Dr. Crenshaw in the Ken-

neddy trauma room, two actually had told the Warren Commission that he was a member of the team.

Dr. Crenshaw said in an interview that he stood by his charges but was concerned about the book's exaggerations, like the description of his race to Kennedy's side in the emergency room: "The President of the United States was waiting for me."

And another: "Many of us have dreamed that history's grand scheme will involve us in some far-reaching role or experience, thrusting us into notoriety and dramatically changing our lives."

Hardly the views to inspire confidence in the objectivity of a witness.

The book casts Dr. Crenshaw, who was a third-year surgical resident in 1963, in the forefront of the effort to resuscitate Kennedy.

Dr. Crenshaw, now a surgeon in Fort Worth, Tex., admitted in an interview that the role he played in Kennedy's case was minor. He and another resident made a small incision in a vein in Kennedy's right leg to insert a tube to pour fluids and blood through the circulatory system.

Dr. Crenshaw said that he relied on his co-authors, Jens Hansen and J. Gary Shaw, who are long-time conspiracy theorists, for the facts of the

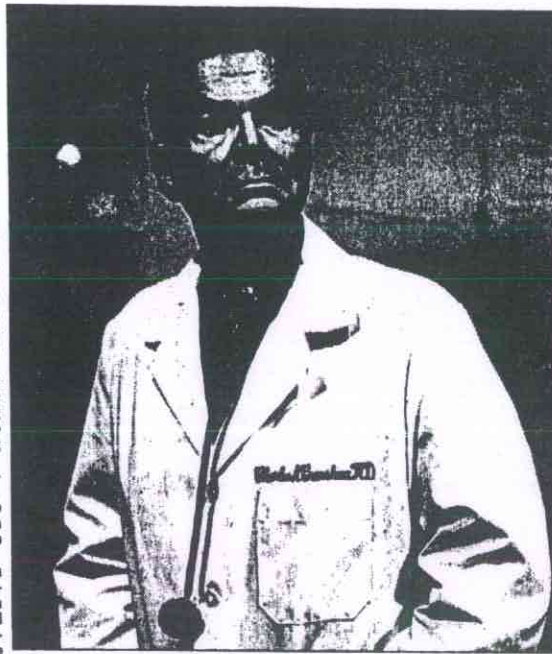
Did Johnson seek a deathbed confession from Oswald?

assassination and that they took "poetic license" in describing his role in the attempt to save Kennedy's life.

"I am sorry that image came through," Dr. Crenshaw said, but "it's the way they edited it" after he last saw the material. Efforts to reach the co-authors by telephone over the holiday weekend were unsuccessful.

Dr. Crenshaw said he planned to further discuss his complaints and possible changes in the book cover and text of his book with his publisher and co-authors this week.

Dr. Crenshaw was also on the team that tried to resuscitate Lee Harvey



Dr. Charles A. Crenshaw, a surgeon on the trauma team that tried to save John F. Kennedy, broke a 28-year silence as co-author of a book.

Oswald after the assassin was shot, and one of Dr. Crenshaw's most astonishing assertions is that he answered a call from the new President, Lyndon B. Johnson, who asked about Oswald's condition. Johnson also demanded a "death-bed confession from the accused assassin," Dr. Crenshaw wrote.

An important new wrinkle to history, if true.

In the journal interviews, Dr. Charles Baxter, the emergency room chief, denied that such a call was received by any doctor. But the denial came from a surgeon who could not have known about the call because he was not present during Oswald's surgery, Dr. Crenshaw said.

Indeed, another doctor has confirmed such a call, although the details and who made it are not clear.

The doctor, Phillip E. Williams, now a brain surgeon in Dallas, was an intern pumping blood into Oswald's right leg. In an interview, Dr. Williams said he had long remembered reports of two White House telephone calls to the operating room.

"I vividly remember someone said,

this day, I do not understand why the Warren Commission did not interview every doctor in President Kennedy's room."

That is a valid point, given the number of doctors who did testify. Dr. Crenshaw said he believed the reason he was not invited to testify stems from his refusal to submit his version of the trauma scene to a superior at the hospital who was collecting such reports for a medical journal paper. Dr. Crenshaw said he believed the papers should be published as a surgical treatise. But by failing to write such a paper himself, Dr. Crenshaw weakened his position.

Dr. Crenshaw makes repeated references to the vast experience he and

'Poetic license' mars what might have been a contribution to history.

the Parkland team had with gunshot wounds, and he cites it to support his theory that the bullets struck Kennedy from the front.

Dr. Crenshaw said an independent new investigation was needed, in part because Senator Arlen Specter, then assistant counsel to the Warren Commission, pursued only one line of questioning on the trajectory of the bullet and did not explore other theories with the Dallas doctors.

But there are limits to the conclusions surgeons can draw about the wounds they see in an emergency or operating room because their efforts are generally devoted to saving a life, not tracing the path of bullets. For instance, none of the Dallas doctors saw the bullet wound in Kennedy's back that was detected by the pathologists. Also, what surgeons see may not correlate with findings that forensic pathologists make at autopsy after studying the path of a bullet, the depths of a wound and by considering ballistics and a wide variety of other factors.

But here Dr. Crenshaw's case is weakened because he said he had not done a formal study correlating his clinical observations of gunshot wounds with findings from forensic pathologists. With expertise in forensics, Dr. Crenshaw's charge might be taken more seriously.

Dr. Kenneth E. Salyer, the surgeon with whom Dr. Crenshaw made the incision on Kennedy's right leg, told the commission that because so many doctors were standing around, "I didn't really get to observe the nature of the wound in the throat."

One bullet went through Kennedy's neck. The size and shape of the wound

— and whether it was altered after the body left Dallas — are the subject of one of Dr. Crenshaw's charges and pointed rebuttals by the pathologists and Dallas doctors.

Dr. Crenshaw said he got a clear view of Kennedy's head and neck wounds before other surgeons operated on them because he arrived on the scene earlier than Dr. Salyer.

After the President was declared dead, Dr. Crenshaw said he examined the wounds again and was the only doctor who stayed in the room while Kennedy's body was placed in a casket.

"Four of us lifted the President into the casket and placed his neatly folded clothes at his feet," he wrote.

In the interview, Dr. Crenshaw said he did not actually lift the body into the casket but, as described in the book, lightly stroked Kennedy's hair.

Again, the literary license damages Dr. Crenshaw's credibility.

The book also said: "The hospital was nervous about the image of residents playing such a supreme role in its services, although it was true. As a result, certain med-school officials deliberately masked the major role that I and other resident surgeons played in the medical aspects of the Kennedy assassination, and the Warren Commission failed to obtain from us what would have been important testimony."

In the interview, Dr. Crenshaw said officials of the University of Texas Southwestern Medical School were anxious about how so few staff physicians were involved in Kennedy's care and over "a real need to give the image of more mature doctors treating Kennedy."

But in the Warren Commission testimony, at least four surgical residents on the trauma team made no effort to hide the fact that they were in a training status.

The doctors' silence for so long in the case may have unintentionally contributed to the mushrooming of the conspiracy theories. Long ago, they could have set the record straight on reports that Kennedy's body arrived in a body bag, not the casket in which it was placed in Dallas. Even when the pathologists spoke in an interview to affirm their original findings, they left many people bewildered by their refusal to appear at a subsequent news conference.

And nearly three decades after the autopsy, the pathologists still have not written its final chapter: an account of the condition of the President's adrenal glands. Kennedy is widely believed to have suffered from adrenal insufficiency and to have taken cortisone-like drugs as replacement therapy. Beyond the assassination, Kennedy's adrenal status bears on the issue of full disclosure of a President's medical history.

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