

Brian Kost

Phil 2625-21633

Mrs. Haines

March 03, 2017

The Devil's in the Details

Ignorance can be a dangerous thing. On its own, ignorance is typically defined as the lack of knowledge or information, yet how that ignorance manifests is where the danger lies.

Searching for truth, gaining knowledge and information for the betterment of man – these are noble causes, and some of the brightest points in human history regarding the advancement in science or medicine. Alas, this search has also cast some of the darkest and longest shadows in mankind's history – the Devil is truly in the details.

In 1997's *Miss Evers' Boys*, a study was launched in an area with some of the highest concentration of untreated syphilis in the nation – Macon County, Alabama. Initially the study utilized maximum disclosure (for its time), telling those who participated that they wanted to study and treat an ailment (syphilis) that was rampant in the area. With both government funding and a candidate pool that was busting at the seams, things looked to be a golden story with a silver lining. Fourteen hundred men were receiving regular checkups and the best available known treatment.

However, the program ran out of funding... and the details changed. Government support changed from attempting treatment on syphilis to studying the long term effects of untreated men. Faced with the choice of nothing or being able to stay funded, the doctors in charge chose to move to a placebo routine – but included general care and quality of life

support, but chose to not to disclose the change to the individuals involved. One of the doctors in question uttered the phrase in rebuttal (and exasperation): “Do no harm”.

This explicit agreement of nondisclosure – “make them believe that nothing has changed”, under guise of “the nobility of scientific proof” those doctors choose inaction over action while keeping their patients ignorant of the change. Two huge ethical issues are at the center here: refusing available care to a patient for no valid medical reason and having their patients continue to come under false pretenses. In the medical field, there are valid reasons for refusing treatment – the majority of which fall under the umbrella of the treatment likely to do more harm than the ailment itself – yet the medical professionals used a moralistic rationalization that the men were getting the best health care they could... minus the treatment of course.

False pretenses. Even with the prior rationalization, this fact flew under the radar in discussion and dialog – these “professionals” were having people come to their establishment for one thing, while something else was the goal. That something else is what maintained funding and continuation for the study raising the issue that if the men studied actually found out and stopped coming, the funding would end. Those involved in the study found themselves trapped in a worst case scenario: the only way to continue was to lie (or lie by omission).

The falsehoods continued as the placebo treatments continued for years. The men’s health continued to deteriorate, and any known treatments were denied. About this time, the usage of Penicillin had become a common treatment in the medical profession – including syphilis. This information, as the trend had been set, was not shared with the men – they were still led to believe that they were receiving “treatments” for their ailment... which kept them coming back... which kept the study funded.

The advent of Penicillin brings to light these lowest common denominator ethical issues central to Miss Evers' Boys – for again, these men were refused treatment. Additionally, each and every man in the study was blacklisted throughout the geographical area via a list circulated to the other hospitals. Now, not only the study was denying treatment to the men, all of the local health care professionals were accomplices in this travesty. Some of this is attributed to a potential fatal reaction to Penicillin in a syphilis patient, but this reaction had not been examined or studied in depth.

The study continued. Thus, the study remained funded. The men each received a pittance of money for their participation in the study, and had their basic medical needs taken care of. Well, their basic medical needs taken care of minus the fact that they were left untreated by a fatal disease that is easily treated. Here is where I hypothesize an option that may have kept this study from infamy: the medical field (and the government) had the opportunity, nay the responsibility, to switch the scope of the study upon the advent of penicillin. Instead of denying required medical care, the study should have adjusted to the study of the potential reaction to penicillin in a syphilis patient, with the patients' explicit approval of course.

This tack would have accelerated the debunking of the syphilitic reaction to penicillin and provided the medical care that had been denied to the men involved in the study. Yes, the choices the study made over the course of time may very well have still come under the scrutiny of a Senate review board... but it wouldn't have been under the auspice of almost four hundred untreated, and dead, men.

Again and again, we heard that the "funding will come for treatment", yet we knew that it wouldn't. The endgame of the study included the autopsy of those who succumb to the untreated effects of syphilis. The original regents whom thought to create the study did not contemplate a

future which included a cure – and through the study’s creation created an all-or-nothing scenario.

Again, I ask: why couldn’t this story been about the three hundred men saved by forward thinking medical professionals and politicians who decided that saving lives is better than bribing someone for their continued participation, only so that the patient can buy their own coffin? Unfortunately, we know the sad truth – sometimes a machine set in motion does its job all too efficiently until someone else manages to stop it... and sometimes only after someone else leaked the story. Patients untreated in the name of advancing science – long shadows, indeed. Patients studied under a veneer of placebo treatments and false pretenses for continued funding – dark shadows, indeed. Lies by omission, false pretenses, and lifesaving treatments refused to those both in need and deserving – all justified through the study’s duration by a moral high ground that glossed over the details.

Like they say, the Devil’s in the Details.