
The influenza pandemic of 1918 killed more people in a year than the Black Death of the Middle Ages killed in a century—then vanished, leaving only a faint trace in the national memory. My grandparents, who were then about 20 years old, never spoke of it. Searching for books on “Black Death” on amazon.com yields 1,272 citations, compared with only 59 for “influenza 1918.” One of the few descriptions in literature is in the novella Pale Horse, Pale Rider by Katherine Anne Porter. Alfred W. Crosby considered it a piece of medical antiquarianism in his 1976 book Epidemic and Peace: 1918. But in his 2003 preface to the second edition, retitled America’s Forgotten Pandemic, Crosby cites a joke circulating among infectious disease experts: “The nineteenth century was followed by the twentieth century, which was followed by the… nineteenth century.”

We dare not forget the lessons taught by the horrors of 1918. Barry’s probing account is newly relevant today.

Barry features the history and politics of American medicine of the time, the transformation of American medical education on the Johns Hopkins model, and the struggles of scientists trying to understand and conquer the problem of influenza. Tremendous efforts were invested in dead ends, such as the belief that Pfeiffer’s bacillus was the causative organism. Great strides in medical science ultimately resulted, but at the time the heroism of the scientists was no match for the virulence of the virus—or of the disease-spreading policies of the U.S. government.

Once America decided to enter what is now called World War I, President Woodrow Wilson determined to wage total war, without the slightest trace of self-doubt. His fury influenced every act of the government.

“Once lead this people into war, and they’ll forget there ever was such a thing as tolerance. To fight you must be brutal and ruthless, and the spirit of ruthless brutality will enter into the very fibre of our national life,” he said.

During the War Between the States, Lincoln had suspended the writ of habeas corpus and imprisoned hundreds of people. Wilson thought he hadn’t gone far enough. “Thank God for Abraham Lincoln. I won’t make the mistakes that he made.”

Soon after the declaration of war, Wilson pushed the Espionage Act through Congress. The bill gave the Postmaster General the power to refuse to deliver any periodical he deemed unpatriotic or critical of the administration. This wasn’t enough. Wilson demanded that the Librarian of Congress report the names of those who ordered certain books. Attorney General Thomas Gregory called for—and got—a law broad enough to “punish statements made ‘from good motives or … [if] traitorous motives weren’t provable.’”

The new Sedition Act made it punishable by 20 years in jail to “utter, print, write or publish any disloyal, profane, scurrilous, or abusive language about the government of the United States.” In an opinion written by Oliver Wendell Holmes after the war ended, the Supreme Court found the act was constitutional and upheld the lengthy prison terms. Nearly nine decades later, the first posthumous pardons in Montana history were granted to about 80 people convicted under this act, including a pacifist who spent 28 months in prison for being vocal about his refusal to buy war bonds (Associated Press, May 4, 2006).

The teaching of German, the language of America’s largest single ethnic group, was outlawed. Sauerkraut was renamed “liberty cabbage.” All Austrians and Germans were suspected of being spies. Some were lynched.

All the nation’s energy was focused on the war effort. Nothing—not even deadly disease—would slow it down. The U.S. Army grew from a few thousand soldiers to millions in a matter of months, with draftees from various parts of the country jammed together in crowded barracks or tents during the coldest winter on record. The advice of Army Surgeon General William Crawford Gorgas and other physicians was ignored: “The purpose of mobilization is to convert civilians into soldiers as quickly as possible and not to make a demonstration in preventive medicine,” said the authorities.

The first outbreaks of influenza, which occurred after troops from Camp Funston, Kansas, disembarked in France, were relatively mild, although seriously impairing the troops’ ability to fight for a time. Reports were suppressed in Britain, France, and Germany, as well as the United States, to keep up morale. The disease got its name “Spanish influenza” because newspapers in neutral Spain were first to report the outbreak.

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Although the army was having difficulty burying all the dead, the Chicago Tribune trumpeted “Epidemic Broken!” Wilson took no public note of the disease. Unwilling to relent from the path of “force without stint or limit,” even as the Germans sued for peace (the Austrians on any terms that Wilson chose), Wilson was not going to be turned by a mere virus. The draft was expanded from ages 21 to 30 to include ages 18 to 45, and all 13 million men in the wider age range were ordered to register and promised that they would be called up within a year. The army bragged about doing “in a day what the Prussian autocracy had been spending nearly fifty years to perfect.” The only cancellations in the draft were made by Provost Marshal Enoch Powell, and only because utter chaos in the cantonments made training impossible.
As influenza was beginning to appear in Philadelphia, several physicians warned of the dangers of a planned Liberty Bond rally. But there was a quota to meet. Public Health Director Wilmer Krusen refused to cancel the parade and rallies, and newspapers refused to print the warnings. Two days later, the epidemic struck the city with a fury comparable to its onslaught in naval stations. Hospitals overflowed, and were losing 25 percent of their patients each day.

As newspapers continued to print only cheerful reports, they lost all credibility. Public health authorities propagated inane information on how to avoid the flu: “Your nose, not your mouth, was made to breathe through.” “When the air is pure breathe all of it you can—breathe deeply.” “Chew your food well.” “Keep your bowels open.” Meanwhile, rotting corpses piled up. In some areas, steam shovels were needed to dig mass graves.

Some effective medical interventions existed, such as serum that slashed the mortality of certain types of pneumococcal infections that commonly felled recovering influenza victims. But little medical help was accessible to most patients, not even basic nursing.

Industry and public services were seriously disrupted as terrified people refused to go to work. Some local governments collapsed. Many people died simply because there was no one to bring food or fluids to the sick. Orphaned children were in danger of starving.

In Paris while the epidemic raged, Wilson himself was prostrated with influenza, manifesting encephalitic symptoms. British Prime Minister David Lloyd George said that he suffered a “nervous and spiritual breakdown in the middle of the Conference.” Although Wilson was said to have had a “minor stroke,” followed by a massive one months later, influenza at least contributed to his final mental incapacity.

During his illness, Wilson conceded to the French virtually everything they had demanded, and that he had vigorously opposed. Of the Treaty of Versailles, he himself said, “If I were a German, I think I should never sign it.” Herbert Hoover predicted that the treaty would tear down all of Europe. Adolf Berle, Jr., later an assistant secretary of state, said that our government had consented to delivering the world to a “new century of war.”

After circling the globe and killing up to 100 million people—about five percent of the world’s population—the influenza virus somehow lost much of its lethality, perhaps just in time to avert the breakdown of civilization. But its legacy probably includes the rise of Hitler and Bolshevism, and the horrors of World War II.

Fears of another pandemic are now being fanned every year, as people are urged to get their influenza vaccine. Could it happen again, whether by accident of nature, or by deliberate use of the virus that has been resurrected from corpses buried in the permafrost?

The U.S. government is demanding intrusive medical transactions, partly under the pretext of early detection of an epidemic. But it is worth remembering that a solo, horse-and-buggy physician in Kansas, Dr. Loring Miner, made the correct diagnosis of an unusually lethal outbreak of influenza very early and did all he could to sound the alarm. The U.S. Public Health Service ignored him.

The public health establishment of the time was often a creature of a corrupt city government machine. Even if there were competent physicians in the service, they were overruled by politicians. The public was deliberately fed lies, leading to profound distrust of government.

It is quite possible that the pandemic of 1918 was really Wilson’s epidemic, partly caused and hugely amplified by Wilson’s war: troop movements, crowding, censorship, lies, propaganda, diversion of medical resources, and the general willingness to sacrifice human lives to political ends.

Our science and technology may be better now. But we have massive international travel even without troop ships. We have less self-reliance and more dependence on centralized services. The microbes are outwitting our antibodies, and the much-vaunted flu shot could turn out to be a dud. And the collectivist ethic is rampant.

It could happen again. This book provides helpful insights on many levels: scientific, sociologic, historical, and political. Skip over the tedious parts. Study the pictures, themselves worth the price of the book. And examine your personal preparedness plans for getting through a time of panic and chaos.

Jane M. Orient, M.D.
Tucson, AZ


Over many decades an entire industry of “Lincoln scholars” has created a fantasy—the Lincoln myth. It is the legend that today supports the ideological cornerstone of big government in America. In this shocking, well-documented book, DiLorenzo exposes Lincoln and destroys the myth.

Lincoln, DiLorenzo writes, was a tyrant who changed the purpose of American government from the defense of individual liberty to the quest for empire and the pursuit of egalitarianism (socialism). Far from saving the Union, he destroyed it as a voluntary confederation of states. The people no longer would be sovereign, but instead the federal government would be.

Like Franklin Roosevelt, Lincoln was a consummate fence-straddling politician—a conniver, manipulator, and liar. For example, in 1848 he had stated, “Any people anywhere . . . have the right to rise up and shake off the existing government, and form a new one that suits them better.” In addition, he was opposed to racial equality, and he worked to colonize all American blacks in Liberia, Haiti, Central America, or anywhere but in the United States. William Lloyd Garrison, who had advocated Northern secession as an anti-slavery measure, called him “The President of African Colonization.”

Dozens of countries had ended slavery peacefully during the late 18th and 19th centuries. Lincoln’s Emancipation Proclamation was issued in 1863 as a political gimmick, a war measure passed as an act of desperation, when world opinion held that the South was winning the war because it had dealt several major military defeats to the North.

The Founding Fathers considered the right of secession to be the fundamental principle of political philosophy. Jefferson and Madison authored the Virginia and Kentucky Resolutions of 1798 to little criticism. These supported the “policy of nullification” that allowed states to nullify the acts of the federal government they considered unconstitutional.
After Jefferson was elected president in 1800, the New England Federalists tried for more than a decade to secede from the Union, and even held a secession convention in Hartford, Connecticut, in 1814. During the War of 1812, New England was in rebellion, fearing it would be taxed into poverty. The governor of Massachusetts announced that the federal government had failed to live up to the terms of the Constitution, and refused to send troops to the war, in effect seceding temporarily from the Union. Even until just before the Civil War, numerous editorials in Northern newspapers reflected widespread sentiment in favor of allowing the Southern states to secede peacefully. In 1831 South Carolina’s Sen. John C. Calhoun presciently posed the question, “(is) ours … a federal or consolidated government; a constitutional or absolute one; a government resting solidly on the basis of the sovereignty of the States, or on the unrestrained will of a majority; a form of government, as in all other unlimited ones, in which injustice, violence, and force must ultimately prevail?”

About two years later, Lincoln’s fellow Whig, Daniel Webster, along with the New England Federalist icon Joseph Story, rewrote history by developing the “spectacular lie” that the federal government somehow had created the states. It later became Lincoln’s central rationale for denying the right of secession to the Southern states, which he decried as “an ingenious sophism.” Lincoln was a worse tyrant than was George III, DiLorenzo maintains. Lincoln suspended the Constitution and habeas corpus; launched a military invasion without the consent of Congress; imprisoned thousands of Northern citizens without trial; shut down hundreds of opposition newspapers and imprisoned dozens of their owners and publishers; censored all telegraph communication; nationalized the railroads; confiscated firearms; interfered with elections using federal troops; and deported his most outspoken critic, Democratic Ohio Congressman Clement Vallandigham.

Secretary of State William Seward established a secret police force that imprisoned thousands, including newspaper editors and owners, priests, and preachers. Fort Lafayette, in New York harbor, housed so many political prisoners that it was known as the American Bastille. Many prominent Maryland businessmen, as well as most of the Maryland legislature, ended up there. No trials were held because there was no legal process at all.

With the Civil War, Lincoln perpetrated one of the greatest war crimes in history, in DiLorenzo’s view. The 620,000 battlefield-related deaths alone would be 5 million with today’s population. Lincoln abandoned both international law and the accepted moral code of civilized societies in waging total war against civilians. Southern men were executed for refusing to take a loyalty oath to the Lincoln government. Burning entire Southern towns was an essential feature of his war strategy, even though it served no military purpose. Hundreds of Southern churches were torched, with priests and ministers imprisoned. Towns in Tennessee, Mississippi, and Georgia ceased to exist, with the women and children homeless and fearful of starvation.

At Meridian, Mississippi, Union General William Tecumseh Sherman stated, “For five days, 10,000 of our men worked hard … in that work of destruction, with axes, sledges, crowbars, clawbars, and with fire, and I have no hesitation in pronouncing the work well done. Meridian … no longer exists.” Sherman later destroyed more than 90 percent of Atlanta, bombing the city day and night. When his chief engineer was dismayed at seeing so many corpses of women and young children in the streets of Atlanta, Sherman replied that they were “a beautiful sight.”

In late 1864, after the Confederate army had left the Shenandoah Valley, General Grant ordered “one more trip” down the valley, pillaging, plundering, and burning everything in sight, with such devastation that “the crows flying over it would need to pack their own lunches.” Sheridan’s 35,000 infantry and three divisions of cavalry faced no military opposition at all, but terrorized the defenseless women, children, and old men.

Instead of being the Great Emancipator, Lincoln was the Great Centralizer, the patron saint of centralized governmental power. During his 32 years in politics he was devoted to the “American System,” an economic agenda championed by Kentucky slave-owner Henry Clay. This was an extension of the Hamiltonian political tradition that included protectionist tariffs, taxpayer subsidies for railroads and other corporations, and the nationalization of the money supply. It was the same corrupt mercantilist system from which the colonists had fled.

Lincoln’s collectivist philosophy was a precursor to our warfare/welfare state that, with its income taxation, large standing army, and intrusive foreign policy, has resulted in the unnecessary deaths of hundreds of thousands of Americans at war, and a strong central government that confiscates nearly half of national income in taxes—more even than was taken from medieval serfs, DiLorenzo notes.

Lincoln, together with Grant and Sherman, set an ominous precedent for totalitarian rulers of the 20th century, “with their willingness to mass-murder dissenters—whether they be ‘recalcitrant Southerners,’ Mormons, or Indians” (p. 221). Even Karl Marx understood this when he wrote to Lincoln in November 1864: “Sir: We congratulate the American people upon your re-election by a large majority.”

The Lincoln myth—that Lincoln freed the slaves and saved the Union—is history as ideology. It is just one example of the results of our failed government-run public school system—from kindergarten through college and university—that Richard Ebeling has termed “an intellectual sieve of collectivism.” DiLorenzo’s The Real Lincoln is a long overdue “revisionist” history that every American should read.

Jerome C. Arnett, Jr., M.D.
Helvetia, WV


A medical condition, or a human condition? That is the question.

The “propensity of experts to pathologize and medicalize healthy children en masse has gotten way out of hand,” declare Sommers and Satel in the preface.

They roundly condemn the notion that normal American children and adults are “emotionally damaged” and “psychologically fragile.” Recalling, no doubt, the old saw that the same lie, repeated often enough and in varying formats, inevitably results in people believing it, the authors go on to show how the dual fabrications of pervasive emotional damage and psychological fragility are being played out in
America’s educational institutions, homes, and public policy, defying even “common sense”—a term which has itself, they note, fallen into disrepute.

If one can find fault with One Nation Under Therapy, it would be that Sommers and Satel spend too little time on teacher education, save a quotation from Martin Rochester arguing that the nation’s history curriculum has become “nonhierarchical, nonjudgmental, [and] nonacademic” to the point, add Sommers and Satel, that “[y]oung people, by design, are [being] kept ignorant of much of their own history and of the virtues of its own unique institutions.” The authors almost got it, and then missed it, for their term “by design” nails the issue: Teacher education is intentionally geared toward mental “health,” not to excellence or academic mastery.

Sommers and Satel cite a litany of absurd programs that have become part and parcel of youngsters’ school experience—removal of games such as tag and dodgeball and the interdisciplinary inclusion of “feelings” exercises.

The authors focus on the decade of the 1990s as being the point at which education and parenting became therapy-oriented. They are about 30 years late—a fact the authors would have recognized had they continued digging into teacher education until they found the New Education Movement in Europe, as it moved from there to the United States.

Catchy though the title is, One Nation Under Therapy suggests that the United States is at the center of this therapy culture—also not entirely correct. Great Britain virtually launched the therapeutic approach to parenting and schooling in America with the publication, in 1960, of Summerhill: A Radical Approach to Childrearing—a work that author A.S. Neill actually began in the 1940s. It carries a foreword by Erich Fromm, the revolutionary Marxist of German descent, who had penned his own anti-authoritarian tome, Escape From Freedom, in 1941. Fromm coined the term “authoritarian aggressors” to describe defenders of traditional norms and childrearing. His theories form the roots of today’s self-esteem movement in the schools.

Sommers and Satel do discuss the work of Carl Rogers and Abraham Maslow, as well as Sigmund Freud’s role in undermining the Judeo-Christian ethic, but they neglect to mention that it was intellectuals most Americans never heard of in the Mental Hygiene/New Education Movement who gave us today’s therapeutic society—beginning with Wilhelm Wundt, the movement’s founder-by-default. In 1879, Wundt advanced the then-radical notion of man as purely neurochemical, a product of genetics and upbringing, not accountable for his conduct. Behavior, claimed Wundt, was caused by forces entirely beyond human control. This rationale explains today’s lax child discipline and therapy-based schooling.

Few noticed when a landmark treatise entitled the Behavioral Science Teacher Education Project (BSTEP) emerged in 1969. Compiled by Michigan State University, one of the government’s official research centers for teacher training, BSTEP’s purpose was to determine the kind of future world teachers should be preparing for. The document predicted that, by the 21st century, drugs would be available to control behavior, alter mood, and even raise intelligence. It forecast that teachers would become “clinicians” and that education would be “based in the behavioral sciences.”

Government quietly began taking steps to assure this outcome—from its treatment of parents in the courts, to the content of tests and surveys in the classroom, to the placement of psychologists in every public school (via the Elementary and Secondary Education Act of 1965)—again not mentioned in One Nation Under Therapy. Within 30 years of BSTEP, every quirky conduct—or even some behavior that wouldn’t qualify as idiosyncratic—was remediable with “professional counseling” and a psychotropic drug. All behavior needed to be was inconvenient or bothersome, a fact that Sommers and Satel do emphasize in their book.

However, there’s a catch. Parents who refuse “treatment” for their child now can be cited for “medical neglect.” To child “protection” agencies and the courts, it’s no different from denying insulin to a diabetic on religious grounds. The larger point is that parents no longer have legal standing, a fact Sommers and Satel see as the result of BSTEP and the New Education/Mental Hygiene Movement.

Certainly therapy in the schools has snowballed in the past decade, and parenting magazines are still awash with articles advising moms and pops to lay off the discipline and give children their “space.” But the groundwork was established decades ago. Most readers of One Nation Under Therapy, of course, will be parents in their 20s, 30s, and 40s. Sommers and Satel can be, perhaps, forgiven for their omissions, as parents this age are deemed to be uninterested in backgronders.

But the impending mental screening of all youngsters—to “prevent” mental illness and improve academic performance—stems from BSTEP and the New Education/Mental Hygiene Movement. Mental health diagnoses are vague, subjective, often politically motivated, and especially difficult to apply accurately to children. The stubborn fact remains that not a single objective test yet exists to prove the majority of the psychiatric “diseases” listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM). Parents hear terms like “obsessive-compulsive disorder,” “attention-deficit,” and “hyperactive” and erroneously believe some objective medical test shows their child is sick. What kind of heartless parent is going to discipline a sick child? They stop right there, without ever seeking hard medical confirmation, which does not exist. They don’t know DSM labels are often based on transient observations and anecdotal evidence.

What does not seem to square with Sommers and Satel’s book is Dr. Satel’s apparent approval of centralized, mass mental-health screening. Passed with a $20 million appropriation in 2004 by the U.S. House of Representatives under the misnomer “New Freedom Initiative” (at the behest of the President’s New Freedom Commission on Mental Health), this universal psychological screening bill has been called “one of his worst civil and human rights abuses to date.” Yet, Satel serves as an appointee on the Center for Mental Health Services National Advisory Council, which supported the measure. Satel calls “coercive treatment” essential, and is on record as stating that her “capacity as a physician has often been frustrated by laws that prevent me from doing my job.”

Now, the New Freedom Commission, with the blessing of the federal government, is targeting America’s youngest—babies, of all things—by promoting additional mental health screenings in places like daycare and schools. Babies and toddlers, apparently, are victims of “undiagnosed mental illnesses.”

In contrast to One Nation Under Therapy, Satel appears to buy into most of the popularized mental “illnesses.” She cites “the seriously mentally ill” who, she
believes, should be identified before onset of “symptoms.” She avoids mention of school screening instruments. Could that be because she supports them?

Sommers and Satel don’t go into the Individuals with Disabilities Education Act (IDEA) either, even though it has contributed mightily to the culture of therapy in the schools. Dissenting experts who have dealt with youngsters “treated” with psychotropic drugs say such students often feel a certain sense of entitlement. They raise Cain over any perceived injury to their own persona, while remaining oblivious to any harm they inflict on others.

Special-education teachers with students on Ritalin, for example, have said that one reason the pupils wind up in Special Education is that they are manipulative, devious, and destructive, and do whatever they think can get away with, no matter the cost. Lying, stealing, cheating—all is forgiven, inasmuch as they are “sick.” No wonder many parents are beginning to object loudly to psychiatric referrals for what is essentially just childhood naughtiness. Such a parent, reading One Nation Under Therapy, might find it duplicitous.

Moreover, coercive drug therapy (time-release delivery systems are currently in the offing) coupled to mandatory psychiatric counseling, is posing serious challenges to Judeo-Christian concepts about right and wrong and character-building. And Dr. Satel is right in the middle of it.

Discrepancies and inconsistencies aside, One Nation Under Therapy is a revealing must-read for anyone concerned about the direction in which our over-psychologized nanny state is taking us. “At the heart of therapism is the revolutionary idea that psychology can and should take the place of ethics and religion,” state Sommers and Satel on page 216.

They get it.

B. K. Eakman
Washington, DC


“Nero was a committed firefighter by comparison.”

Thus ends a book I enjoyed very much. This one-sentence metaphor represents all the tragedy and futility we see in our world today. Just as the fires of Rome in 64 A.D. destroyed property and lives, so the high prevalence of poor education and moral decadence today leads countless people into lives of misery, poverty, and unhappiness— to an unending sense of hopelessness and a lack of any sense of self-worth.

Nero represents the modern intellectual who spouts forth ideas on how life should be lived—ideas that deny the obvious, and violate all historical precedents and norms. In the words of the author: “They considered the purity of their ideas to be more important than the actual consequences of their ideas.” The unfortunate members of the masses who incorporate this code into their lives suffer needlessly and horribly.

Dr. Anthony Daniels (Theodore Dalrymple) is an English psychiatrist who practices at a hospital in one of the poorest sections of London, and also at a prison. The stories and observations from this work serve as the basis for the book.

His premise states that there is a difference between poor people and people of the underclass. One can be economically poor, but maintain a set of moral values that will eventually overcome the transient economic state. How else can we explain people who immigrate to another nation with nothing but a few personal possessions, but within one to two generations join the upper class?

Members of the underclass, however, have no chance of elevating themselves out of their despair because it is not primarily economic in cause; it stems from a lack of moral values. The book moves through these values with representative stories that make any sensible human being ache with pain. Time and again I wished I could say, “Stop! Go back!” But obviously the stories for these unfortunate individuals are already set in stone.

Dr. Daniels details the common themes of many in the underclass. They blame all their troubles on others. They have no control over their lives. They have no sense of responsibility. They lack any ambition or interest beyond personal pleasure, continuous excitement, and instant gratification (nightclubs, drugs, sex, and television).

He covers cultural relativism, feminism and free love, illegitimacy rates, tattoos, piercing, clothes, grooming, and behavior. He moves on to racism, the lack of any desire for education, and the open hostility awaiting those students who are motivated. Finally he discusses the lack of any discipline or moral code; the effect of lotteries; the phenomenon of homelessness; and the hazards of indiscriminate charity, lack of proper judgment, and policing based on public relations.

The book is more than an impressive compendium of current issues. It conveys basic insights that are of key importance to physicians. As Dalrymple explains:

If the doctor has a duty to relieve the suffering of his patients, he must have some idea where that suffering comes from, and this involves the retention of judgment, including moral judgment. And if, as far as he can tell in good faith, the misery of his patients derives from the way they live, he has a duty to tell them so—which often involves a more or less explicit condemnation of their way of life as completely incompatible with a satisfying existence. By avoiding the issue, the doctor is not being kind to his patients; he is being cowardly. Moreover, by refusing to place the onus on the patients to improve their lot, he is likely to mislead them into supposing that he has some purely technical or pharmacological answer to their problems, thus helping to perpetuate them.

I have to agree with his assessment that so much of what we see in our clinics is self-inflicted by people who either do not know how to live, or refuse to live the way they should. My own practice in pain management has given me hundreds of similar stories, and perhaps that is why the book touched me on a personal level. I can only wonder how many lives could be saved if this book were the first required reading for all American high school freshman—and their teachers.

Mark J. Kellen, M.D.
Rockford, IL