

# MEDICAL HOLOCAUSTS PAST AND PRESENT *Part II*

*Factories of Death: Japanese Biological Warfare, 1932-45, and the American Cover-Up* By Sheldon H. Harris, Routledge, 1994, \$25, 297 pages.

Reviewed by William Brennan, Ph.D.

Sheldon Harris's *Factories of Death* is a pathbreaking look at Japanese medical experimental barbarities conducted in the 1930s and 1940s. As such it is an invaluable companion volume to Henry Friedlander's *The Origins of Nazi Genocide*, reviewed in the November 14 issue of *NRL News*. Together they brilliantly illustrate the centrality of modern medicine in facilitating the euthanasia/genocide/human experimentation nexus.

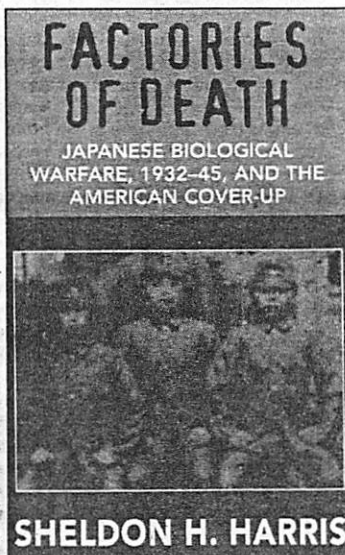
Harris uncovers new revelations about Japanese atrocities which parallel the worst of Nazi medicine. The book also has far-reaching implications for today's medical war on the unborn and the escalating assaults on vulnerable people after birth.

While Nazi atrocities are well known, very little has been written about the horrific practices of the Japanese prior to and during World War II. Before the Nazi doctors exploited human subjects for barbaric experiments at Dachau, Auschwitz, and other death camps, experimental atrocities were already underway in the Japanese-occupied territories of Manchuria and China.

Although Harris concentrates exclusively on the Japanese medical atrocities, unlike Henry Friedlander, he does not rule out possible parallels with the present. *Factories of Death* not only furnishes grisly details on another medical holocaust, but also provides a solid starting point for demonstrating the extraordinarily close resemblance between Japanese research atrocities then and the barbarities inflicted on unborn children now.

In *Factories of Death*, Sheldon D. Harris, emeritus professor of history at California State University, Northridge, provides a long overdue, extensively documented account of secret medical research conducted mainly on Chinese subjects from 1932 to 1945.

The purpose was to produce biological and chemical agents for use against enemies, especially as a counterweight to the numerically



superior Russian army. Harris charges Japanese scientists with turning Manchuria into "one gigantic biological and chemical warfare laboratory."

For sheer barbarity, the Japanese experiments rival the worst Nazi behavior. The subjects were infected with deadly pathogens (including anthrax and plague), frozen and thawed to study frostbite, and exposed to chemical weapons. The researchers closely observed how long it took for the various dosages administered to bring about death.

One experiment, for example, involved forcing subjects to ingest assorted quantities of heroin in their food. From this, it was concluded that 1 gram of heroin was enough to induce death within 46 minutes. The bodies were then dispatched to the pathology laboratory for dissection and anatomical research.

In addition, numerous so-called "field studies" were carried out: chocolates filled with anthrax bacteria were distributed to Chinese children; pathogens were dumped into water reservoirs, ponds, and over 1,000 wells; plague-ridden animals were released into densely populated areas; and shrapnel

bombs containing gas gangrene were exploded near prisoners tied to stakes in the ground to determine the effectiveness of this agent as a biological warfare weapon in sub-zero temperatures.

A particularly appalling revelation highlighted by Harris is the eminence of those doctors who participated in the experimental monstrosities. He describes them as the "cream" of the Japanese medical community chosen for "their medical or scientific expertise, not because they were sadists or evil-minded."

They presented their data before large audiences at army medical colleges, civilian universities, and scientific conferences, and published their findings in Japan's leading technical journals. Many of these men "became deans of medical schools, senior science professors, university presidents, and key technicians in those industries that created the country's economic miracle in the postwar era."

Equally appalling is the fact that none of the individuals responsible for what were clearly crimes against humanity were ever brought before the 1948 Tokyo War Crimes Trials. Harris traces this to an unconscionable arrangement whereby these doctors of infamy were granted immunity from prosecution in exchange for the results of their research.

Harris attributes much of the distinguished researchers' callous disregard for human life to the age-old Japanese concept of racial superiority. The Japanese viewed the Chinese and other prisoners as "inferior beings," "of little value," and "subhumans wasting the planet's limited resources." These demeaning stereotypes served as a foundation for reducing the subjects to "material" or "experimental material."

In the words of one veteran Japanese researcher, the subjects were "not human," but simply "experimental materials." Those few who barely survived the experimental onslaught did not escape the fatal ravages of the degrading language; they were defined as "materials [that] were no longer worth keeping for further experiments."

Just as a major goal of the Japanese research was to assess what amounts of which substances did the best job of killing, an over-

riding aim of contemporary fetal research involves the waging of chemical warfare against the unborn. Numerous comparative studies focus on which dosages of saline, prostaglandins, RU 486, potassium chloride, and other substances are likely to bring about the destruction of the unborn most effectively.

At the Mount Sinai Hospital in New York, the volume of saline necessary to induce abortion varies from 175-250 ml. Physicians at Columbia University add: "The amounts of sodium chloride administered during most abortions far exceed the lethal dosage." According to Dr. Usha Chitkara and associates, in the so-called "pregnancy reduction" procedure, it usually takes an injection of 5-15 mEq of potassium chloride into the hearts of undesired unborn children to bring about "irreversible cardiac arrest."

Like their Japanese counterparts in times past, those today who employ the latest technology to destroy preborn humans and exploit their remains for scientific analysis rank among the most esteemed investigators. They hold prestigious positions in major universities and comprise an entrenched segment of the medical establishment. The results of their medical mayhem are proudly presented before scientific conventions, grace the pages of leading medical and scientific journals, and receive respectful coverage from the media elite.

Contemporary fetal researchers rely upon the same demeaning vocabulary to degrade their subjects -- "inferior," "subhuman," and "non-human" -- as did the Japanese doctors in the death factories of Manchuria and China. The word "material" likewise occupies an honored spot in the lexicon of dehumanization directed against unborn children considered expendable. Anatomical studies conducted at the Oregon Health Sciences University refer to dismembered aborted bodies as "suctioned material," "curetted material," "cellular material," and "abortion material." The central nervous systems of aborted humans transplanted into rat hosts are called "CNS material" at the Karolinska Institute in Sweden.

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The comparisons drawn in these two reviews between some of the findings in Friedlander's and Harris's studies and the current abortion and euthanasia movements merely scratch the surface. Many others exist and need to be probed further. Books such as these provide a powerful factual foundation for demonstrating how history's most sordid practices continue today. It is imperative that the alarming kinship between prior

and current atrocities be communicated to the widest possible audience.

Only when we become more conversant with the egregious errors of the past will we be prepared to challenge them and thus prevent them from being repeated in the present. [See ad, page 24.]

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