

# US federal judge allows lawsuit over illegal experimentation on Guatemalan subjects

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21 January 2019

As the US government prepares ever-more stringent anti-immigration measures aimed at the thousands of Central American workers and peasants fleeing violence and hunger, a decision by a US federal judge has provided a further exposure of the criminal responsibility of US imperialism and US corporations for these intolerable conditions.

On January 3, Theodore Chuang, a US federal judge in Maryland, allowed a \$1 billion suit to proceed against various divisions of Baltimore's Johns Hopkins University (hospital, school of public health, health system corporation), the Rockefeller Foundation, Bristol-Myers Squibb Company, Bristol-Myers Squibb US Pharmaceutical Group and Mead Johnson & Company for their roles in a medical experiment in which hundreds of Guatemalans were infected with syphilis and gonorrhea by the US government between 1946 and 1948. The purpose of the experiments was to test the effectiveness of a then recently developed drug (penicillin) in preventing and curing sexually transmitted diseases, in part because of the high costs associated with US troops becoming infected by those diseases.

The defendants argued a Supreme Court decision shielding foreign corporations from lawsuits over human rights abuses also applied to them. The suit, by the Estate of Arturo Girón Álvarez and 733 others, was launched in 2015.

The experiment, which was similar to the government's infamous Tuskegee study on US Afro-American sharecroppers (1932-1972), left unwitting subjects infected with syphilis and untreated. Similar studies were done on prisoners in Terre Haute, Indiana.

In this study, some 1,500 healthy individuals, prostitutes, peasant military conscripts, prisoners and mentally ill patients (male and female), were deliberately infected, either through the use of prostitutes provided by the scientists, or by pouring the germs onto skin abrasions the researchers caused. The idea was to test penicillin's effect on various strains of these diseases. None of the subjects was informed of the experiment; alcohol was often used to "lubricate" the participants. The illegality and criminal character of the

study (both under Guatemalan and US laws) and the fact that it took place as Nazi doctors were being tried in Nuremberg for similar crimes required that it be kept secret. Needless to say, those that organized the experiment were fully conscious of their criminal conduct.

As the experiment progressed, the methods of infection took the form of medieval torture. Experimenters scraped men's sexual organs with needles and then dressed their open wounds with syphilitic material. Women were forced to swallow syphilitic solutions. Infected pus was injected into subjects' spinal cords. People's eyes were coated with gonorrhea.

According to an account published by the Slate website: "In a particularly gruesome case, a patient named Berta was injected in her left arm with syphilis. More than a month later, she started to develop small red bumps around her injection site, and then she started to develop lesions on her limbs. She was given treatment three months after her injection, but by about three months later, Cutler wrote in his research notes that it looked like she was going to die. The same day he wrote the note, experimenters put gonorrhea pus in her eyes and re-infected her with syphilis. Her eyes soon filled with discharge, and she began bleeding from her urethra. Days later, she died. There were several other case studies of patients who died following their involvement in the studies."

The subjects were infected without their consent or knowledge. Many of them passed on the diseases to their children and grandchildren, unaware of what was afflicting them, suffered from chronic pain and nerve degeneration throughout their lives, which shortened by the crippling effects of syphilis and gonorrhea. Between 1948 and 1953, the study entered a new phase, using children in orphanages, state-run schools and rural communities.

Even if they were later on properly diagnosed, peasants living in isolated villages could hardly afford the treatments for their diseases.

It took almost 60 years before Susan Reverby, a Wellesley College professor and medical historian, discovered the

existence of the Guatemala experiment through her investigation of the files of Dr. John Cutler, who also participated in the Tuskegee study. Several years later, in 2010, Hillary Clinton, then Secretary of State, issued a phony and self-serving apology “to all the individuals who were affected by such abhorrent research practices,” declaring that the event did not reflect US values and that many things had changed since 1948. The apology was followed by a phone call from President Barack Obama to his Guatemalan counterpart, Álvaro Colom.

Obama asked the Presidential Commission for the Study of Bioethical Issues to investigate this Nazi-like experiment. The report was completed in 2011. Eight years later, and nearly 15 years after professor Reverby’s discovery nobody has ever been prosecuted for these crimes. The victims and their descendants have yet to receive any compensation.

A WSWS article, published in 2010, commenting on the twin apologies, indicated that the share of testing of drugs by US-based pharmaceutical companies outside the US and Western Europe rose from 5 percent to 29 percent between 1997 and 2007. Much of that research is conducted in impoverished regions of Africa and Latin America, to avoid high costs, stringent standards and accountability.

Recent profit-driven experimental trials have taken place in Perú (2005, diarrhea), Nigeria (1996, meningitis), India and other poor countries, in violation of the Nuremberg Code that requires “voluntary informed consent” from patients. US government patent rules that extend patent protections for companies that test drugs on children (“pediatric exclusivity provisions”) are powerful incentives to pharmaceutical firms. Firms often facilitate their experiments with financial incentives to induce consent from very poor families. In India, the money paid out for participating in drug trials often exceeds by far what a job would pay.

The consequences are often lethal. Two died in Perú from an experimental rice-based medication. Five children died in Nigeria from an experimental meningitis antibiotic, Trovan, tested on 100 children; six other children also died while taking a comparison drug. In one case, a 10-year-old girl was taken off the antibiotic after three days and left to die. The pharmaceutical firm, Pfizer, later concocted and backdated a letter of approval from the Nigerian government.

According to a 2013 article in the *Atlantic Magazine*:

In 2008, the Center for Research on Multinational Corporations released a document full of examples of the detrimental effects of unethical clinical testing that went on in the 1990s and throughout the 2000s

in the developing world. The report included the case of clinical trials in Uganda between 1997 and 2003, when women taking the anti-transmission drug Nevirapine experienced thousands of serious adverse effects (SAEs). These symptoms went unreported and testing was allowed to continue, resulting in the (also unreported) deaths of 14 women.

In Hyderabad, India in 2003, eight test subjects died during the testing of the anti-clotting drug Streptokinase. The worst part, though, was that the subjects did not even know that they were part of a trial.

In 2008 in Argentina, 12 children died after they were used in a study of a new flu drug by the GlaxoSmithKline pharmaceutical company that involved thousands of impoverished children across South and Central America.

Following the half-hearted apologies of October 2010, nothing has been heard from any government source, Democrat or Republican, let alone President Donald Trump. Nothing has been done to prevent the epidemic of drug testing in underdeveloped nations. No more apologies are forthcoming for the thousands of victims of drug testing around the globe.

No one demands accountability of those responsible, or compensation to the victims of those horrific crimes.

Instead Guatemalans and Central Americans fleeing from poverty and violence are accused of criminal and terrorist conspiracies to justify increasing acts of repression and the persecution of immigrant workers.



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