

is independent of the base, and might give us help in certain psychological testing or other special procedures or devices.

At this point I do not see the necessity for obtaining special clearance for anyone else at this level. If anyone here should be cleared for more detailed information about the true nature of our mission, it should probably be Col. Brua. Dr. Hastings feels that it may be best to work through General Graigie in Washington; such high-level maneuvering I leave in his hands and yours. Enclosed is a copy of this letter for you to send to Dr. Hastings.

You asked me for a fairly detailed and well-considered report of my thoughts about this entire problem up to date, and I have complied with complete frankness. I am sure you will not misinterpret or misconstrue this as "empire-building" on my part. Here you have my honest evaluation of the very real problem before us, and of the realistic methods required to achieve a good solution. These experiments may be of extraordinary value, and I do not want to give them anything less than my best.

Sincerely yours,

Louis J. West
Major, USAF(MC)

ADDENDUM

Having re-read and re-considered and re-written the enclosed correspondence several times, I was ready to mail it today. It has become necessary for me to tear open the envelope in order to add information which changes the complexion of the local scene in an unfortunate way.

Our Chief of Neurology here, Major Robert Williams, is several years my senior professionally, although his experience in Psychiatry is considerably less than mine. Last month he was certified by the American Board of Neurology and Psychiatry in both specialties. (I am not taking the certification examinations until next spring, although I coached Williams for the Psychiatry section of his). After his certification he began eyeing the Psychiatric Service as fair game, and he has just persuaded Col. Brua to combine the departments of Neurology and Psychiatry into a Neuro-Psychiatry Service, with himself at the head. This is a most unhappy turn of events from the point of view of our experiments. Dr. Williams is extremely acquisitive and will be an uncomfortably close scrutinizer of all my activities. The fact that I am still Chief of Psychiatry doesn't alter the fact that it is now merely a section in this new Service, and that many of my administrative and even professional decisions can be hamstrung. Since Dr. Williams is essentially a Neurologist and will continue to function as one, it is unlikely that he will see eye-to-eye with me on a number of topics. And, most unfortunately, he is one of those conservative traditionalists who actively opposes research or treatment involving hypnosis, states that it is "tampering with the soul", and spoken out against some of my previous work; he will undoubtedly hamper my efforts in many ways.

Since it has appeared that the new arrangement is in actuality less efficient than the old one where the two departments were separate and autonomous, I have appealed to Col. Brua today to restore the status quo. He declares that the thing must