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**Afterword: Dr Ewen Cameron's "de-patterning" experiments and the CIA's
MK-Ultra programme**

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The experiments at the heart of Paige Cooper's story sound as if they are straight out of a dystopian conspiracy thriller but they really happened. They were conducted in the 1950s and early 1960s by Dr Ewen Cameron, a British-born psychiatrist and Director of the Allan Memorial Institute in Montreal (McGill University's treatment facility). Cameron sought to develop what he saw as a revolutionary new psychiatric treatment but his experiments were secretly funded by the CIA as part of what historian Alfred McCoy¹ refers to as 'a veritable Manhattan Project of the mind.' Cameron gave his procedures pseudo-scientific names like 'de-patterning' and 'psychic driving.' He varied them over time and from patient to patient but they typically involved a mix of the following:

Drug-induced coma: Each experimental 'treatment' for Cameron's patients (two thirds of whom were women) would usually begin and conclude with 'sleep therapy' (i.e. a coma induced by administering barbiturates).

'De-patterning': During the drug-induced sleep, patients would be woken up for feeding, the toilet and to be given regular electroshocks (i.e. ECT) which would start after about three days of sleep. The combined sleep-electroshock 'treatment' lasted between 15-30 days, sometimes up to 65 days. So that patients did not harm themselves as a result of the epileptic seizures caused by the ECT, they were immobilised with muscle relaxant drugs like Curare. In the standard electroshock therapy of the time, doctors would give patients a single dose of 110 volts, lasting a fraction of a second, every one or two days. However, by contrast, according to John Marks, 'Cameron used a form 20 to 40 times more intense, two or three times daily, with the power turned up to 150 volts'.² Cameron's aim, as stated in his

journal article in *Comprehensive Psychiatry* in 1962³ was to cause disorientation and confusion via 'massive' and 'pervasive' memory disturbance. After this, according to his article, a patient might 'be unable to walk without support, to feed himself, and he [sic] may show double incontinence'.

'Psychic driving': Patients were next subjected to negative taped messages (e.g. 'my mother hates me'). The aim was to 'get rid of unwanted behaviour' and then this would be followed by positive messages 'to condition in desired personality traits'.⁴ The messages (taken from recordings of Cameron's interviews with patients) were played repetitively on a tape-loop system via loudspeakers or a football helmet contraption for 16 hours a day for several weeks. Cameron sought to intensify the effect by placing his patients in a sensory deprivation 'box' in the stables of the hospital and giving them cocktails of drugs which would immobilise them but keep them awake whilst they experienced hallucinations induced by psychedelic drugs. Val Orlikow described her experience as 'terrifying' -- she received LSD one-to four times a week together with either a stimulant or depressant and was then left on her own to listen to a tape playing excerpts of her last session with Cameron. In the case of a patient named 'Mary C,' Cameron kept her in his sensory deprivation box for 35 days, gave her repeated electroshocks whilst she was in a drug-induced coma after which she endured 101 days of 'psychic driving.' At the end of her 'treatment,' according to Cameron, 'no favorable results were obtained', a result that comes as little surprise.⁵

The link with the CIA emerged only after years of dogged investigation. In 1974 the *New York Times* published an article by Seymour Hersh about unconstitutional CIA activities based, in part, on an internal report the CIA called the 'family jewels'.⁶ Hersh's article sparked investigations by President Ford's Rockefeller Commission⁷ and the US Senate's Church Committee.⁸ It was revealed that the CIA had used LSD on unsuspecting members of the public in the US and that, in 1953, Frank Olson (a US Army biological warfare specialist) had fallen to his death from a tenth-floor window several days after being given LSD without his knowledge or permission. However, the investigations were hampered by the fact that CIA Director Richard Helms had ordered all records to be destroyed in 1973.

But in 1977, 16,000 pages of documents relating to the CIA's financial history were found following a Freedom of Information Act request by John Marks, a former State Department employee turned author. Marks and his research team managed

to identify and interview some of those involved and, in 1979, he published *The Search for the "Manchurian Candidate": The CIA and Mind Control*. This revealed that Cameron had begun to receive money for his research from the CIA in 1957 via a front organisation called the Society for the Investigation of Human Ecology. Marks showed that Cameron's research was sub-project 68 of an extensive CIA-funded programme of research into brainwashing and 'mind control' run by Dr Sidney Gottlieb, a chemist who was the head of the CIA's Technical Services Division (TSD). The overall research programme involved many leading psychologists, psychiatrists and social scientists (some who were aware of the CIA's role and some who weren't). It was called MK-Ultra: 'MK' meant it was a TSD project and 'Ultra' was a codename. According to Marks, CIA officials would travel periodically to observe Cameron's work, something Paige Cooper alludes to in her story.

In 1980 the Canadian Broadcasting Corporation's *Fifth Estate* programme broadcast an investigation into Cameron's experiments including interviews with several of Cameron's former patients. In the subsequent decade, three books on the studies were published including Anne Collins' *In the Sleep Room* based on interviews with former patients. In 1988 the CIA finally agreed an out-of-court settlement with nine of Cameron's former patients including Mary Morrow who inspired the character of Joy's stepmother Dorota in Paige Cooper's story. Morrow, a doctor, had approached Cameron for a fellowship in psychiatry but he decided to admit her as a patient claiming she appeared 'nervous'. She underwent Cameron's 'de-patterning' regime of electroshock and barbiturates for 11 days.⁹ In 1992 the Canadian government agreed to pay compensation to 77 former patients on condition that they agreed not to sue the government or the hospital but hundreds of other former patients were left without compensation.

The story of Cameron's experiments is a long and complicated one¹⁰ but he should not be regarded as a rogue maverick. During his time as Director of the Allan Memorial Institute he was President, in turn, of the American Psychiatric Association, the Canadian Psychiatric Association, and the World Psychiatric Association. In the 1950s the numbers of people in psychiatric hospitals were at their peak and provided a captive population on which overly optimistic psychiatrists could try out experimental methods with few safeguards -- these were the days, for example, when lobotomies were routinely practised. Poorly designed studies, such as

Cameron's, were published openly in mainstream psychiatric journals all the time. In 1955 Canada's *Weekend* magazine even included an article on Cameron's work entitled 'Canadian psychiatrists develop beneficial brainwashing.' Patients and families deferred to the authority of psychiatrists: 'I thought he was God,' Val Orlikow said of Cameron.¹¹

The CIA's research programme began in the midst of paranoia and suspicion about 'Communist brainwashing' following show trials in Moscow and Eastern Europe and the coerced 'confessions' of captured US servicemen in Korea in the early 1950s. But this initially defensive purpose was transformed and the programme's results fed into manuals the CIA used themselves and in the training of interrogators in countries allied with the US during the Cold War. An important lesson is that such paranoia, combined with secrecy and a lack of oversight and accountability, can easily lead to abuses – something also seen in the UK's use of interrogation techniques in Kenya in the 1950s and Northern Ireland in the 1970s.¹² Following the attacks in New York on 11 September 2001, the Bush administration embraced 'enhanced interrogation' methods like waterboarding, abandoning well-established legal norms. Once again, some psychologists proved willing to help design psychological interrogation techniques.¹³ We forgot the lessons of history then and, unless we keep re-telling the stories of the past, it is likely we will forget them again in the future.

Notes

1. McCoy, A.W., *A Question of Torture: CIA Interrogation, from the Cold War to the War on Terror*. (New York: Metropolitan Books, 2006)
2. Marks, J., *The Search for the "Manchurian Candidate": The CIA and Mind Control*. (New York: Times Books, 1979).
3. Cameron, D.E., Lohrenz, J.G., Handcock, K.A. 'The depatterning treatment of schizophrenia'. *Comprehensive Psychiatry*, 3(2) (1962), pp65-76. [https://doi.org/10.1016/S0010-440X\(62\)80015-7](https://doi.org/10.1016/S0010-440X(62)80015-7)
4. Marks, J., op. cit..
5. Marks, J., op. cit..
6. CIA's 'Family jewels' report: <https://nsarchive2.gwu.edu/NSAEBB/NSAEBB222/index.htm>
7. Rockefeller Commission: <https://www.fordlibrarymuseum.gov/library/document/0005/1561495.pdf>
8. Church Committee: <https://www.intelligence.senate.gov/resources/intelligence-related-commissions>

9. Remnick, D. 25 Years of Nightmares. *Washington Post*, 28 July (1985).

<https://www.washingtonpost.com/archive/lifestyle/1985/07/28/25-years-of-nightmares/cb836420-9c72-4d3c-ae60-70a8f13c4ceb/>

10. For a recent account see the five-part investigative podcast series by WBUR (Boston's NPR) released in April 2020: *Madness: The Secret Mission for Mind Control and the People Who Paid the Price*

<https://www.wbur.org/endlessthread/2020/04/24/madness-part-one-the-sleep-room>

11. Marks, J., op. cit..

12. McCoy, A.W., op. cit.; Harper, D., 'The complicity of psychology in the security state'. In R. Roberts (ed.), *Just War: Psychology, Terrorism and Iraq* (Ross-on-Wye: PCCS books, 2007), pp15-45.

13. Harper, D., op. cit; McCoy, A.W., op. cit..