Jack Wennberg, M.D.: America's Josef Mengele

by Tony Papert

June 22—For now over forty years, one man has worked relentlessly, ceaselessly, to contrive so-called scientific grounds for denying medical care to the sick, and for cutting back hospital beds and other medical infrastructure in the United States. With generous support from the super-rich, \$7 billion Robert Wood Johnson Foundation, the Daddy Warbucks of the euthanasia movement, Dr. John E.

Wennberg's "Dartmouth Institute" has become the corporate headquarters of a sprawling cottage-industry of anti-medical pseudo-science quackery. The 73-year-old Wennberg has had triumphs aplenty since he was first published in the 1970s, but, if Obama's Hitler-like health-care reforms are passed, the greatest are yet to come.

All of the most salient so-called "facts" cited in support of the Obama plan come from Wennberg and his followers. When, on June 16, Obama told the American Medical Association that McAllen, Texas, performed too many and too expensive medical procedures, that lie came from Wennberg's "Dartmouth Atlas." When Obama claimed in the same speech, that more medical care need not produce better health, his source was Wennberg. Again, when Obama's budget director Peter Orszag repeats endlessly that U.S. medical costs can be cut 30% without hurting patient care, Wennberg is his authority.

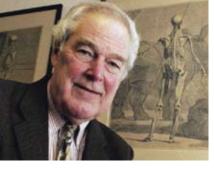
A typical Wennberg fraud is the so-called "cost of end-of-life care." Wennberg has been pushing this for years, and the most recent, 2008 edition of his Dartmouth Atlas, relies on it once more. First, Wennberg gathers death certificates for Medicare recipients who died during a given period and shared certain diagnoses, for instance, "severe chronic illness." Second, he adds up all the costs and other factors from the Medicare treatment records, for each patient, during his or her last two years of life. After allegedly correcting for cost-of-living and demographic factors, Wennberg produces

dramatic variations in the amounts, intensities, and costs of treatment of patients across different hospitals and geographic areas. From these come the "unwarranted variations" about which the Obama health-care reformers complain. From these come the 30% savings in medical costs which Orszag and the Behaviorists demand.

After all, whether the patient costs Medicare \$20,000 or \$60,000 over that period, each of them died just the

same, right? And it took each of them just as long, right? Whether six months in one study, or two years in another. Or, as Wennberg wrote in that 2008 Atlas, "By looking at care delivered during fixed intervals of time prior to death, we can say with assurance that the prognosis of all the patients in the cohort is identical—all were dead after the interval of observation."

They all died after two years anyway; why are we spending so much more on some of them than others? Isn't that just a waste of money? Orszag and Obama think so.



What Wennberg Leaves Out

But what about the *others*, who got the better, more expensive treatment and are still alive? Or, those who simply lived longer, beyond the cut-off date of the study? *They are all deliberately omitted from these fraudulent studies*. Wennberg's statistical hoax captures the *failures* of medical treatment, as it were, but deliberately omits all the successes. After all, what was the purpose of the treatments? So that the people would live only six months? Hardly! But all of those successfully treated are eliminated from the studies!

And why simply compare \$60,000 with \$20,000 worth of treatment for the same period, so-called? Why have any treatment at all? Patients who die completely untreated are still guaranteed to live out the last six months of their lives in exactly six months, aren't they? Why do Wennberg and Orzag limit themselves to 30% savings, when the same method proves that 100% would work just as well!

In the medical literature, Dr. Peter Bach has refuted these Wennberg studies from the standpoint of the cancer specialists, and Dr. Gerald W. Neuberg, from the standpoint of the cardiologists. Dr. Richard Cooper has refuted Wennberg's contention that more medical spending produces worse health, rather than better.

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