

Spandau blood

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My article in *Lobster* 77 (February 2019) asked whether a DNA test had really 'solved the Rudolf Hess *doppelgänger* mystery', as was claimed by a group of thirteen American and Austrian researchers.¹ In response to my question, the lead author of their research paper, Dr Sherman McCall MD, PhD (Cantab), a retired US Medical Corps colonel, formerly resident at the Walter Reed Army Medical Center in Washington DC and at the US Army Medical Research Center, Fort Detrick, Maryland, emailed the editor on 26 April:

'It is unfortunate that the authors did not first contact us. They make some objections which a DNA scientist, but not a layman, would recognize as unwarranted. With all due respect to the authors, they also make erroneous assumptions based in part on misstatements in the popular press. This combination of errors produce an impression of uncertainty about the results which does not exist. Would you publish a rebuttal?'²

Lobster accepted Dr Sherman's offer but nothing further has been heard from him or from any of the co-authors of the research paper.³ The highly prominent magazine *New Scientist* had announced the research by Dr Sherman et al. in an article on 22 January 2019, with the headline: 'Exclusive: DNA solves Rudolf Hess doppelgänger conspiracy theory'.⁴

New Scientist stated on 22 January 2019:

'Adolf Hitler's deputy flew to Scotland in 1941 and was imprisoned for the rest of his life. But was the man in Spandau really Rudolf

¹ <<https://www.lobster-magazine.co.uk/free/lobster77/lob77-dna-hess.pdf>>

² Email to *Lobster*.

³ 'Rudolf Hess – The *Doppelgänger* conspiracy theory disproved', in *Forensic Science International: Genetics* vol. 40 [2019]
<[https://www.fsigenetics.com/article/S1872-4973\(17\)30297-1/abstract](https://www.fsigenetics.com/article/S1872-4973(17)30297-1/abstract)>.

⁴ <<https://tinyurl.com/y5b8qfo8>> or <<https://www.newscientist.com/article/2191462-exclusive-dna-solves-rudolf-hess-doppelganger-conspiracy-theory/>>

Hess? Now a DNA test has revealed the truth.'

The reported match between a 'routine' Hess blood sample (which had been taken by US Army doctor inside the prison in Berlin in 1982) with a sample donated thirty years later by an unnamed member of Rudolf Hess's Bavarian family was soon challenged by two retired doctors.

Both doctors drew on their experience as army officers at Spandau, where they had been entrusted by the British Army with the medical care of Allied Prisoner Number Seven – the man who had been tried and convicted of crimes against peace by the Nuremberg Tribunal as Hitler's deputy, Rudolf Hess. One doctor was the prisoner's dentist and the other was his consulting surgeon.

Dr Hans Eirew, a pioneering orthodontist from Manchester, was dental officer at the Berlin Military Hospital in 1950. *The Daily Telegraph* chose not to publish his 2019 letter to the editor:

'Sir,

During 1950/51 I was the British Army dental officer at Berlin military hospital.

One of my responsibilities was the dental care of the war criminals at Spandau jail.

I had to extract a left upper molar for the very weird prisoner introduced as Rudolf Hess, at his insistence standing up and without pain killing injection.

Later I had access to the full official Nazi party medical records for the real Rudolf Hess, going back to his gunshot wounds in WW1. They showed that he had lost his upper left molar teeth early and had an artificial metal bridge where I was deemed to have extracted a tooth. My suspicions were supported by the fact that the other prisoners appeared to have very little contact with No.7 Hess.

I am in full support of Dr Hugh Thomas, who was then the most tested army gunshot expert with wide experience in Northern Ireland and who provided medical evidence that the man at Spandau was a "ringer".

Dr H L Eirew' ⁵

Hugh Thomas, FRCS Ed., FRCSC [C] MD, consultant in general surgery at the Berlin Military Hospital in 1972, has written two books questioning the

⁵ Email from Eirew to author, 25 January 2019.

identity of Prisoner Number Seven.⁶

Although Dr Eirew died in Manchester on 10 October 2019, both he and Mr Thomas had already complained that neither the *New Scientist*, nor the authors of the research paper, offered any explanation for how a US Army doctor came to be giving routine personal medical care to Prisoner Number Seven in Spandau when the medical care of the prisoners had never been the responsibility of the US Army.

I sent their questions to Emily Wilson, editor of *New Scientist*, in the hope that 'the world's leading science and technology weekly magazine' might undertake the gathering of some answers. Like Prime Minister Neville Chamberlain, broadcasting to the nation on 3 September 1939, I have to tell readers of this magazine that *no such undertaking has been received*.

Abdallah Melaouhi was the full-time Tunisian nurse who cared for the prisoner Hess in the five years between 1 August 1982, and 17 August 1987. According to Dr Sherman and his colleagues, a junior American doctor at Spandau Prison had taken a blood sample from Hess in December 1982 – and had done so in the absence of the nurse. I told *New Scientist* on 14 October that Thomas and Eirew were saying that this could not have happened without Melaouhi being present.

Thomas doubted that DNA extracted from a 20th century blood smear taken in the prison in Berlin, degraded during an 8-hour journey to Heidelberg for analysis and later regularly exposed to ultraviolet light during thirty years in use as a teaching aid in an American hospital, could have been examined by 21st century Austrian technicians and found to be *remarkably well-preserved*.

Neither *New Scientist* nor *Forensic Science International: Genetics* has explained how, or even why, the blood sample was taken by the 'US Army doctor, Phillip Pittman, as part of a routine health check'.

The Austro-American research paper states:

'In the course of normal clinical care, one of the authors drew a blood sample from prisoner Spandau #7 upon which a Coulter® blood count was performed on December 15th, 1982.'⁷

In 1982 particles in blood could be counted and sized on American-

⁶ Hugh Thomas, *The Murder of Rudolf Hess*, (London: Hodder and Stoughton, 1979) and *Hess: A Tale of Two Murders* (London: Hodder and Stoughton, 1988).

⁷ See footnote 3.

designed Coulter Counters ⁸ at both the British and American military hospitals in Berlin. Yet the American doctor chose to use a Coulter Counter at a US Army medical unit 650 kilometres away from Spandau. Hugh Thomas complains that the research paper gives no reason for using such a remote medical facility and does not offer any ethical or medical reason for the taking of a blood sample from the prisoner in 1982.



Coulter Counter Model S-Plus Jr Cell Counter, the type available in 1982.

Both Thomas and Eirew pointed out that 'normal clinical care' of the prisoner was never an American responsibility. Dr Eirew stated:

'I can confirm that only British medical personnel had access to the prisoners at Spandau for medical care or treatment. I cannot visualise an American doctor obtaining access. Prisoner No 7 did not permit me to give him a pain preventing injection for the traumatic extraction of his molar tooth. He made it absolutely clear to me that nobody at the prison would be permitted to inject him for any purpose as he feared that we were out to kill him.

Before the extraction I stressed that it would be most painful, but

⁸ 'Based on the Coulter principle, the Coulter Counter quantifies and sizes particles suspended in a fluid, like blood cells, bacteria, and a wide variety of other substances. The instrument works by drawing liquid containing the particles through a channel, where each particle releases an electrical charge that is measured and counted. The Coulter principle was discovered by Wallace H Coulter in the late 1940s and patented in 1953.' <<https://digital.sciencehistory.org/works/gm80hv697>>

he was prepared to accept this. In these circumstances, I cannot believe that he would permit blood to be taken by anybody.’⁹

Although the task of guarding the Spandau prisoners rotated monthly between the armies of the four allied powers, the medical care of the prisoners remained, at all times, a British responsibility. The prison lay in the British sector of Berlin close to the British Military Hospital. The BMH handled both routine and emergency medical care at Spandau.

The prison warders, along with the lonely prisoner’s own personal Tunisian nurse, were not military personnel and the American, French, Soviet Russian and British military guards had no direct role in the medical care.

Hugh Thomas has complained that the published research paper gave no description of the taking of the blood sample:

‘I can certify that by that stage No. 7 had to be physically supported at all times by his warder, who also had to observe and record visits and procedures.

There is no mention of this in the description of Dr Pittman’s routine health check.

Any attempt to take blood would not have passed muster with prison security and the warders. The discovery of any attempt to take No. 7’s blood in such a fashion would have risked both a criminal prosecution and an international incident.’¹⁰

The unanswered questions posed by the two doctors are:

1. Why does the research paper give no date or time for the taking of the blood sample in Spandau?
2. Who gave Dr Pittman permission to take a blood sample from Prisoner Seven?¹¹
3. Why was the taking of the blood sample not witnessed by the

⁹ Email: Eirew to author, 16 August 2019.

¹⁰ Email to editor of *Lobster*.

¹¹ ‘All necessary tests and invasive procedures were only carried out by the British and only after agreement had been reached by the Four Powers. No single physician or surgeon from any of the four powers was allowed to examine the prisoner unless agreed under the four powers legislation and witnessed by representatives of the other four powers, accompanied by a commanding officer. Minor ailments were assessed by a nurse.’ Email to author from Hugh Thomas, 4 August 2019.

Minutes of the meetings of the physicians of the Spandau Allied Prison 1947-1987 are at the US National Library of Medicine, Bethesda MD 20894 at <<https://oculus.nlm.nih.gov/>>.

prisoner's nurse or recorded by the four powers administering the prison in December 1982? The date means that it allegedly took place during the German festive season, at a time when the prisoner is recorded as being particularly frail and disturbed after an earlier fall and described as 'moaning and screaming' at any attempted physical handling or disturbance?

4. How long did it take the American doctor to get the blood sample from Berlin to the Coulter Counter at the US Army Medical Facility in Heidelberg? This is 650km away from Berlin, eight hours by car through East Germany in 1982.

5. Why did Dr Pittman, a young toxicological researcher without access to the medical notes of Prisoner 7, not make use of Coulter Counters at the British and American military hospitals in Berlin, where expert haematologists and official consultants were available?

6. Why was the analysis of the blood smear, naturally degraded after eight hours in transit to Heidelberg, not aborted on the US Army Coulter Counter at Heidelberg Meddac for lack of the accession code invariably required by the Coulter system to avoid identity fraud?¹²

7. Why did excessive haemolysis and cell damage of the blood smear at Heidelberg not breach the rules that were posted in all hospitals using Coulter Counters? (Those rules stated that the use of Coulter Counters was prohibited in the testing of bloods samples that were more than 24 hours old.)

8. Why is there no reference in the report to an accession code, or the numerically sequenced and dated final report that a Coulter Counter would have routinely delivered, thus leaving the provenance of the slide to depend on a faded and undated slip from the American medical facility?

9. Whose name was given as the attending physician under the Coulter

¹² 'The Coulter Counter security system was designed to prevent misuse and criminal identity fraud. The system limited the use of degraded blood specimens to avoid misdiagnosis from excessive haemolysis and cell damage. A dark colour in the supernatant during the very first wash would immediately suggest that the Coulter Counter was likely to abort the test. The system would record reasons for rejection, such as "outside range of haemolysis", "fragile small WBCs". "RBC anomalous cell fragments" and "danger of false diagnosis". The system would then give a warning before aborting and suggesting submission of a fresh blood specimen. A truncated numerical code would indicate that the test had ceased. Since each attempted test was recorded, the record of any failed attempt would have been sent to a laboratory information service and retained for seven years.' – Information from a British pathologist, 2019.

Counter accession code system?¹³

10. Does the note in the research paper under the rubric 'ethical considerations' (claiming that the Coulter Counter procedure had been carried out under 'US military jurisdiction') suggest that the taking and testing of that sample would have been both unethical and irregular under the Berlin four power legislation?¹⁴

11. In offering an ethical reason for investigating the blood of Prisoner Seven, why have the authors of the research paper surmised that 'several legible numbers on the lab slip indicate an anaemia work-up' when the Coulter Counters available in December 1982, models S Plus II and S Plus III, would not have supported that type of haematological disease investigation?¹⁵

12. Since both Dr Eirew and Mr Thomas were on record as having been dentist and consultant surgeon to Prisoner Number Seven, why were they not consulted by the authors of the research paper? ¹⁶

13. Why have the Austrian scientists not disclosed the identity of the matching donor or the manner of the taking of that reference sample?

¹³ The accession code for the Coulter Counters required 'handwritten entries for the actual date, time of collection, personal identification number or medical record number, with the initials or personal identification number of the person procuring the specimen to be made on the specimen label. Insufficient information on a specimen label would result in the specimen being re-collected [refused]. Without an accession code or a dated final report there is no proof that any test was even attempted at Heidelberg.' – Information from a British pathologist, 2019.

¹⁴ 'The blood sample from prisoner Spandau #7 was taken by one of the authors during regular medical care measures (including the preparation of the slide sample and Coulter Counter® analysis) under US military jurisdiction.' *Forensic Science International: Genetics*, vol. 40, 'Rudolf Hess – The *Doppelgänger* conspiracy theory disproved' at <[https://www.fsigenetics.com/article/S1872-4973\(17\)30297-1/fulltext](https://www.fsigenetics.com/article/S1872-4973(17)30297-1/fulltext)>, p. 21.

¹⁵ An extended numerical anaemia workup code would not have been recognised until the arrival of the Coulter model VC counter in 1985. The limitations of the S Plus II and S Plus III counters were reported by the *Journal of Clinical Pathology* and by the manufacturers. The Coulter Corporation introduced Volume Conductivity and Scatter (VCS) to analyse cells in their 'near-native' state with the VC model in 1985, thereby delivering 'integration of flow cytometry into a hematology analyser' to permit reliable haematological analysis. <<https://tinyurl.com/y49dcw69>> or <<https://www.beckman.com/resources/fundamentals/history-of-flow-cytometry/coulter-electronics>>

¹⁶ The British authorities, pioneers of DNA profiling, had access to reliable DNA tissue samples from the prisoner, sent after his death to a British laboratory by the Senior Honorary Consultant in Forensic Medicine to the Armed Forces, Professor J. M. Cameron of London University (who carried out the autopsy on Hess). <<https://tinyurl.com/y5m68ddz>> or <<http://www.nationalarchives.gov.uk/about/news/files-released-foreign-and-commonwealth-office-and-cabinet-office/foreign-and-commonwealth-office-files>>.

14. Why does the printing on the undated label of the blood slide from Heidelberg (below) appear much superior to the quality achieved by printers available in 1982, printers which rarely achieved much more than 76 dots per inch?



15. Why were the Austrian scientists able to describe the blood smear as 'remarkably fresh' when modern research has identified extensive morphological and fragility changes in blood retained for laboratory analysis in ethylenediaminetetraacetic acid (EDTA)?¹⁷ The smear that was found in Austria to be 'remarkably fresh' was not only thirty years old but had presumably been exposed many times to ultraviolet light when used 'for teaching purposes' by the pathologist Rick Wahl at the Walter Reed Army Medical Center in Washington DC.

16. Why was no DNA sample taken from the most obvious living descendant of Rudolf Hess, his grandson Wolf Andreas Hess?

17. Was the DNA reference sample provided by a male member of the Hess family – and claimed to in an unbroken collateral paternal line to Rudolf – actually taken by independent researchers (as stated in the Austrian report) or was the reference sample left in the custody of the

¹⁷ Metabolomic Quality Assessment of EDTA Plasma and Serum Samples
<<https://www.ncbi.nlm.nih.gov/pubmed/27348730>>

Hess family at any time?¹⁸

¹⁸ *Forensic Science International: Genetics*, vol. 40, 'Rudolf Hess – The *Doppelgänger* conspiracy theory disproved' at <[https://www.fsigenetics.com/article/S1872-4973\(17\)30297-1/fulltext](https://www.fsigenetics.com/article/S1872-4973(17)30297-1/fulltext)> p. 21.