

Wessely's Words

Here's an excerpt from Wessely's letter to USA's CFIDS Chronicle, published in the Summer 1994 issue.

"I run a small, but active, research unit concerned solely with CFS. At the moment we are carrying out inquiries into the epidemiology, immunology, neuropsychology, psychiatry, treatment and virology concerning this condition."

This is typical of the way Wessely presents himself to *patients*. And *this* is typical of the way he presents himself to fellow medics :

"What lies behind all this talk of viruses and immunity?... In consequence, talk of viruses and the immune system is now deeply embedded in popular consciousness ... Viruses are an attribution free from blame ... there's no blame, no shame and no stigma ... and here is the virus research doctor himself to protect us from that shame... And what is it he delivers? Respect!"

What's more :

"viral attribution [reflects] somatization par excellence".

So much for *virology*. What about his claim to be researching *immunology*?

Beard and Mitchell have returned to obscurity, but their disease is back with a vengeance. My local bookshop has just given ME the final seal of approval - its own shelf A little more psychology, a little less T-cells would be welcome"

*Wessely S - 'What your patients may be reading',
British Medical Journal, 1989;298:1532-3.*

Well, so much for his interest in the *immunology* aspect. But if ME doesn't deserve its own shelf in his local bookshop, then why did he try to join the Ramsay Society ? His application was rejected , of course.

What of his claim to "*run a small, but active, research unit concerned solely with CFS.... carrying out inquiries into the epidemiology, immunology, neuropsychology, psychiatry, treatment and virology concerning this condition*" ? Elsewhere he says :

"Many patients referred to a specialized hospital with chronic fatigue syndrome have embarked on a struggle. This may take the form of trying to find an acceptable diagnosis, or indeed, any diagnosis. One of the principal functions of therapy at this stage is to allow the patient to call a halt without loss of face. [M.E. patients are in] a vicious circle of increasing avoidance, inactivity and fatigue..... "

*Wessely S, David A, Butler S, Chalder T -
'Management of the chronic (postviral) fatigue syndrome',
Journal of the Royal College of General Practitioners: 1989;39:26-9.*

But what about his contribution to *neuropsychology* ?

"Most CFS patients fulfil diagnostic criteria for psychiatric disorder. Other symptoms include muscle pain and many somatic symptoms, especially cardiac, gastrointestinal and neurological. Do any of these symptoms possess diagnostic significance? The answer is basically negative... The description given by a leading gastro-enterologist at the Mayo clinic remains accurate. 'the average doctor will see they are neurotic and he will often be disgusted with them.' "

*Wessely S : Chronic fatigue and myalgia syndromes",
in N. Sartorius et al (eds), 'Psychological Disorders in General Medical Settings',
publ. Hogrefe & Huber, 1990.*

"Disgusted". Yes, we're disgusting, apparently. You see :

"Validation is needed from the doctor. Once that is granted, the patient may assume the privileges of the sick role (sympathy, time off work, benefits, etc)"

*S. Wessely - 'Chronic fatigue syndrome: current issues',
Reviews in Medical Microbiology, 1992;3:211-216.*

...and that was presumably his contribution to *epidemiology*.

Here's another quote from Wessely's letter to the CFIDS Chronicle of Summer 1994 :

"I frequently act on behalf of CFS/ME sufferers in their dealings with insurers and the courts - indeed I was the principal expert witness in two recent medico-legal cases concerning CFS. In the first, the sufferer was awarded £160 000 and the second £320 000."

Wessely was in fact one of three medical expert witnesses in both cases and the £320 000 was an out-of-court settlement. The £162, 500 was awarded in the High Court in December 1992. It was subsequently withdrawn by three appeal court judges who accepted Dr. Wessely's testimony, in which he suggested that the plaintiff (a diagnosed ME sufferer) was :

"... suffering from at least some degree of psychological disorder".

His statement was prepared based only on a review of medical records, and not from an examination of the patient.

In a Channel 4 News programme broadcast at 7pm on 26th August 1998 in which the case of Child X was being discussed, when asked by the presenter Sheena McDonald if there can ever be a case for a coercive approach in situations involving forcible removal of a child with ME from the parents, Wessely said :

"You know very well, I know nothing about these cases....."

When Sheena McDonald interposed by saying "So you would agree that unless there is criminal abuse there is never a case for a coercive approach to take children away from parents?", Wessely replied :

"I think it's so rare; I mean it's never happened to me. We've seen lots of children and families and it's just not on the agenda".

Wessely was in fact instrumental in getting a child with ME forcibly removed from his parents and taken under police presence into 'care'. In a letter dated 3rd June 1988 to the Principal Social Worker in Ean Procter's case (Mrs Jean Manson), Wessely had stated that he was :

"approved under Section 12 of the 1953 Mental Health Act"

and in which he wrote :

"I feel that Ean needs a long period of rehabilitation, part of which will involve very skilled management of separation from his parents. For this reason, I support the application made by your department for wardship".

Just a short time after his denial on the Channel 4 broadcast, Wessely again repeated on air his denial of personal involvement in the forcible removal of children with ME from their parents. On 13th September 1998 Radio 5 Live broadcast a programme entitled "Child Abuse by Professionals" (Brian Hayes, Sunday 13th September 1998, 10am -12 noon) in which Wessely again claimed never to have been involved in such cases.