

RECORDED  
MAY 20 1960

5 MAY 1960

**MEMORANDUM FOR THE RECORD**

**FROM:** CGM/Assistant Medical Officer

**SUBJECT:** Medical Evaluation of AEDGSA-1

1. On 22 April this patient was seen and medically evaluated. He gave the following history through an interpreter. On 9 March the patient first became aware of a burning sensation and pain in his perianal, buttock, and thigh regions. He was attending a movie at the time, but when he returned home and removed his trousers three hours later, he found that blisters were forming in these areas. The blisters varied in size from pea size to the size of a plum. During the night these blisters broke and a yellowish fluid oozed.
2. The following day, 10 March, the patient saw a physician and the diagnosis of shingles (herpes zoster) was made. Two days later, on 12 March, the patient again visited the doctor because the pain was becoming worse. He was reassured at that time that the diagnosis was correct, that no more treatment could be given, and that the condition would clear spontaneously in a few days. On 17 March, the patient states, his pains became unbearable. He returned to the doctor and was started on Vitamin B1 and Vitamin B12 shots.
3. On 19 March the pain became worse, so the patient then consulted a "specialist." This specialist told the patient that the diagnosis of herpes zoster was wrong and that the lesions had been "maltreated." He referred the patient to another specialist who agreed that the wrong diagnosis had been made. He diagnosed the condition as "pernicious anemia" or "an infection." He told the patient he thought "blood poisoning" had set in and gave him many different kinds of medicine to take and started him on penicillin injections.
4. The patient states that he received daily injections of penicillin from 19 March through 25 March inclusive. Also during this time, the patient was given rather massive doses of morphine, which kept him in a rather semi-conscious state.
5. On 26 March the pain was becoming so bad that the patient finally called the doctor from the German Embassy in Paris. This physician told the patient that he was suffering from an allergy. He treated the patient for one week and then referred him to an allergy clinic.

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6. The patient states that at this time he had a high temperature and a rash all over his body. He does not know what medicines were given him in treatment, however, he states that after two days he felt much better. After continuing with this treatment for awhile, he felt enough improved so that he would be able to return to Manila.

7. Physical examination at this time revealed a man who did not appear acutely or chronically ill. He did not seem to be in any acute distress and seemed to be carrying on a rather normal activity in his apartment. Physical findings were limited to the skin area in the perianal region, on the left buttock, and down the posterior aspect of the left thigh. The patient also had one lesion on the inner aspect of the right thigh which was nearly healed, but which was still draining a yellow purulent fluid from a small area in the center. These lesions had the appearance of subiding herpes vesicles, except for the fact that they were rather large lesions. However, Andrews, in his book "Diseases of the Skin," states that occasionally the blisters of herpes vesicles coalesce and become several inches in diameter.

8. INFORMATION: It is this examiner's impression that this very unfortunate individual was unlucky enough to have had a very severe case of herpes vesicles which was complicated by the lesions becoming infected, and which was further complicated by the patient being allergic to the penicillin which was used to treat the infection. I believe that this long history of severe pain and discomfort can be entirely explained by normal disease, however, the possibility of a contact poison cannot be ruled out by physical examination alone.

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