

microwave frequencies. And he succumbed in large numbers, in the armies, navies, and air forces of every nation.⁵²

It was during this war that the first rigorous program of medical research was conducted on soldiers with this disease. By this time Freud's proposed term "anxiety neurosis" had taken firm hold among army doctors. Members of the Air Force who had heart symptoms were now receiving a diagnosis of "L.M.F.," standing for "lack of moral fiber." Cohen's team was stacked with psychiatrists. But to their surprise, and guided by cardiologist Paul White, they found objective evidence of a real disease that they concluded was *not* caused by anxiety.

Largely because of the prestige of this team, research into neurocirculatory asthenia continued in the United States throughout the 1950s; in Sweden, Finland, Portugal, and France into the 1970s and 1980s; and even, in Israel and Italy, into the 1990s.⁵³ But a growing stigma was attached to any doctor who still believed in the physical causation of this disease. Although the dominance of the Freudians had waned, they left an indelible mark not only on psychiatry but on all of medicine. Today, in the West, only the "anxiety" label remains, and people with the symptoms of neurocirculatory asthenia are automatically given a psychiatric diagnosis and, very likely, a paper bag to breathe into. Ironically, Freud himself, although he coined the term "anxiety neurosis," thought that its symptoms were not mentally caused, "not amenable to psychotherapy."⁵⁴

Meanwhile, an unending stream of patients continued to appear in doctors' offices suffering from unexplained exhaustion, often accompanied by chest pain and shortness of breath, and a few courageous doctors stubbornly continued to insist that psychiatric problems could not explain them all. In 1988, the term "chronic fatigue syndrome" (CFS) was coined by Gary Holmes at the Centers for Disease Control, and it continues to be applied by some doctors to patients whose most prominent symptom is exhaustion. Those doctors are still very much in the minority. Based on their reports, the CDC estimates that the prevalence of CFS is between 0.2 percent and 2.5 percent of the population,⁵⁵ while their counterparts in the psychiatric community tell us

that as many as one person in six, suffering from the identical symptoms, fits the criteria for "anxiety disorder" or "depression."

To confuse the matter still further, the same set of symptoms was called *myalgic encephalomyelitis* (ME) in England as early as 1956, a name that focused attention on muscle pains and neurological symptoms rather than fatigue. Finally, in 2011, doctors from thirteen countries got together and adopted a set of "International Consensus Criteria" that recommends abandoning the name "chronic fatigue syndrome" and applying "myalgic encephalomyelitis" to all patients who suffer from "post-exertional exhaustion" plus specific neurological, cardiovascular, respiratory, immune, gastrointestinal, and other impairments.⁵⁶

This international "consensus" effort, however, is doomed to failure. It completely ignores the psychiatric community, which sees far more of these patients. And it pretends that the schism that emerged from World War II never occurred. In the former Soviet Union, Eastern Europe, and most of Asia, the older term "neurasthenia" persists today. That term is still widely applied to the full spectrum of symptoms described by George Beard in 1869. In those parts of the world it is generally recognized that exposure to toxic agents, both chemical and electromagnetic, often causes this disease.

According to published literature, all of these diseases—neurocirculatory asthenia, radio wave sickness, anxiety disorder, chronic fatigue syndrome, and myalgic encephalomyelitis—predispose to elevated levels of blood cholesterol, and all carry an increased risk of death from heart disease.⁵⁷ So do porphyria⁵⁸ and oxygen deprivation.⁵⁹ The fundamental defect in this disease of many names is that although enough oxygen and nutrients reach the cells, the mitochondria—the powerhouses of the cells—cannot efficiently use that oxygen and those nutrients, and not enough energy is produced to satisfy the requirements of heart, brain, muscles, and organs. This effectively starves the entire body, including the heart, of oxygen, and can eventually damage the heart. In addition, neither sugars nor fats are efficiently utilized by the