

BOOKS, THE CHILDREN OF THE BRAIN

'Perfect Soldiers'

Ramzi bin al-Shibh, the coordinator of the Sept. 11 attacks, described the feelings among the conspirators just before launching their destructive mission: "These hours were awesome, for you engage in a great battle with all its dimensions, a huge battle. It is a military operation that is unconventional against the mightiest force on Earth, who possess all the weapons and intelligence equipment and the spy satellites while her agents are spread all over the world. And you are facing them on their own backyard, amidst their forces and their soldiers, with a group of youths numbering 19."

In "Perfect Soldiers: The Hijackers: Who They Were, Why They Did It" (New York: HarperCollins, 2005), Los Angeles Times reporter Terry McDermott uses research undertaken in 20 countries to provide a detailed analysis of the events leading up to Sept. 11.

When thinking about this tragedy, many psychiatrists ask the same question: What frame of mind, and what history and past events, prepare a selected group of people to kill large numbers of people they have never met and against whom they have no personal grievance?

The Sept. 11 group underwent indoctrination that lasted from several years to their whole lives. Those recruited from Saudi Arabia exclusively to kill had a long personal and collective history of violence. The more intellectual group from Hamburg had many months of indoctrination in Germany, Pakistan, and Afghanistan. They had been assured by their religious mentors that they were protecting Islam and would, in the process, obtain rewards after their deaths.

As Mr. McDermott notes, several events preceded Sept. 11 by many years, even centuries, and set the stage for the attacks.

Many Arabs lament what they see as the decline of Islam in the midst of the emergence of new, successful, nonreligious political organizations in many countries,

including Arab countries. The Muslim Brotherhood, a militant group founded in the 1920s, called for full implementation of Islamic law. Its adherents believe that a redress is around the corner if they are militant enough.



BY RODRIGO A. MUÑOZ, M.D.

Following Egypt's independence in 1952, Gamal Abdel Nasser told his fellow Egyptians and many others that secular governments would stop any economic and cultural decline of the Arab world. When he cracked down against Islamic fundamentalism, Brotherhood exiles fled the Middle East and became Europe's first generation of pan-Arab Islamists devoted to a broader cause. The defeat of the

Arab armies by Israel in 1967 permitted the emergence of a permanent confrontation between the defeated secular modernizers and the bitter Islamist fundamentalists.

Among the many forces and interactions that shaped the attack, three had a decisive influence: a small, informal group that had had a desire to damage the World Trade Center for a number of years, Al Qaeda, and the Hamburg group.

Two individuals—Abdul Basit (Ramzi Yousef) and his uncle, Khalid Sheikh Mohammed—had focused their hatred on the United States since the early 1990s. In 1993, Yousef's \$3,000 bomb blew up the basement of the World Trade Center's north tower, killing 6 people, injuring 1,000, and causing \$300 million in damage. A friend of Yousef's, Abdul Murad, concocted the idea of using an airplane as a weapon.

Khalid Sheikh Mohammed is central to our narrative. Born in 1965, he attended college in the United States in the 1980s. By then, having joined the Muslim Brotherhood, he was already an Islamic militant. He took Murad's idea about airplanes and proposed it to Osama Bin Laden.

Mohammed, Osama Bin Laden, and their advisers progressively simplified the basic elements of the attack: They realized that young, educated individuals could be

trained as pilots and backed by other reliable assassins recruited from among the jihadists.

The members of the Hamburg group—Mohamed Atta, Marwan al-Shehhi, Ziad Jarrah, and Ramzi bin al-Shibh (Omar)—were university students who became increasingly religious and militant while interacting with fiery imams and mentors who introduced them to the ideas of the Muslim Brotherhood and to Mohammed and Bin Laden. Atta, always self-contained, demanding, and conscientious, was in charge of the plan and the attack.

The bombings that took place this summer in London showed that fiery preachers in western countries can arouse young people who are likely to believe in the cause of the Muslim Brotherhood and similar groups, and that these true believers are willing to sacrifice their lives for the

One definition of fanatic is "a person with extreme and uncritical enthusiasms or zeal, as in religion or politics." I have tried to stay away from the word because it tends to be meaningless, especially when one tries not to be biased in studying the actions of others. Were the pilots who bombed Hiroshima fanatics? Were the Israelis who massacred the Palestinians in Lebanon fanatics? Part of the problem, it seems to me, is that we tend to regard all fanatics as our adversaries.

I fail to see the relationship among fanaticism, the disregard for one's own life, and mental illness. This subject has been explored in great detail by Jerrold Post, M.D., of George Washington University, Washington. What are the symptoms of mental illness among people who are highly committed to efforts that endanger their

lives, or lead them to destroy the lives of others?

I would prefer to avoid characterizations that do not lead to more knowledge and stay with the facts we know. Whatever our characterizations of them, highly indoctrinated and motivated young people in the Middle East will continue to see violence as a way of redressing their real or supposed grievances. Western countries can no longer believe that they are just witnesses to foreign struggles in distant lands. Each has to cooperate in

remediating the shortcomings that facilitated the enormous tragedy of Sept. 11. ■

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Editor's note: This is the final installment of "Books, the Children of the Brain." We join Dr. Muñoz in thanking the many psychiatrists who expressed their support for the column throughout the last year.



Mohamed Atta (right) and Abdul Aziz al-Omari (center) pass through airport security in Portland, Maine.

causes they come to accept as their own.

Hope and the help needed to end terrorism, it seems, have to come from the same communities that harbor those who are now recruited to destroy. We may want to listen to their ideas and proposals.

Elsewhere in this issue of CLINICAL PSYCHIATRY NEWS, Paul J. Fink, M.D., considers terrorism and asks this question: "Is the kind of belief that leads to the murder of innocent people a form of fanaticism, or is it mental illness? (See p. 19.)"

Morbidly Obese Use 10% of Health Care Dollars in U.S.

BY KATHLEEN LOUDEN
Contributing Writer

CHICAGO — Health care costs for morbidly obese adults are nearly double those of normal-weight adults, according to a study presented at the combined annual meeting of the Central Society for Clinical Research and the Midwestern section of the American Federation for Medical Research.

Morbidly obese individuals make up less than 3% of the U.S. adult population, but they account for more than 10% of all health care spending in this country, reported the study's lead investigator, David E. Arterburn, M.D., of the University of Cincinnati. The study defined morbid obe-

sity as a body mass index of 40 or greater (Int. J. Obes. Relat. Metab. Disord. 2005; 29:334-9).

Of U.S. health care expenditures, \$56 billion were linked to excess body weight in the year 2000, up from a previously published estimate of \$51.5 billion in 1998 (Obes. Res. 2004; 12:18-24). Health care expenses for morbidly obese adults totaled more than \$11 billion, Dr. Arterburn and his colleagues reported. They calculated this total by analyzing data from a na-



tionally representative sample of 16,262 adults from the 2000 Medical Expenditure Panel Survey.

Adults who were morbidly obese had elevated costs in all health care categories, Dr. Arterburn said. Compared with adults considered to be of normal weight, morbidly obese persons had higher per capita annual expenditures for office visits, outpatient hospital care, inpatient hospitalizations, and prescription drugs.

DR. ARTERBURN

Dr. Arterburn and his associates did not

study the effect of age on health care expenditures. However, he said, "it's known there's a delay in onset of obesity-associated morbidities, so one would expect expenditures to go up with age." The mean age of their sample was 45.4 years.

The researchers adjusted the odds of incurring health care expenses for sociodemographic variables, type of health insurance, and smoking status.

Nearly 5 million U.S. adults were morbidly obese in 2000, according to this study, supported by a grant from the Department of Veterans Affairs. Because weight and height were self-reported in the survey data, Dr. Arterburn said he believes the study underestimated the prevalence of morbid obesity. ■