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In this 1950s photo released by the National Archives, a black man included in a syphilis study has blood drawn by a doctor in Tuskegee, Ala. For 40 years starting in 1932, medical workers in the segregated South withheld treatment for unsuspecting men infected with a sexually transmitted disease simply so doctors could track the ravages of the horrid illness and dissect their bodies afterward. Finally exposed in 1972, the study ended and the men sued, resulting in a $9 million settlement. (National Archives via AP)

The Tuskegee Study should have taught us that the U.S. government has few qualms about performing medical experiments on unsuspecting subjects. That experiment involved an estimated 600 Black men in Alabama who had syphilis and was conducted between 1932 and 1972 by the U.S. Public Health Service and the Centers for Disease Control and Prevention (CDC).

The men thought they were receiving medical treatment but the government purposely withheld the correct treatment so that researchers could observe the effects of the disease left untreated. The men were not informed of the nature of the experiment and more than 100 died during the experiment.

The Tuskegee Experiment, which has since been deemed unethical, is just the tip of the iceberg. The U.S. government has for years been doing medical experiments on another unprotected group —

prisoners.

Some 40 years ago, the U.S. government felt it was OK to experiment on disabled people and prison inmates. Some of the experiments were conducted by U.S. government doctors. Some were medical experiments funded and paid for by the government.

Black Americans are incarcerated in state prisons across the country at nearly five times the rate of whites, according to Sentencing Project. Given the longstanding demographics of the U.S. inmate population, the bulk of these experiments would have been done on Black inmates.

There are a number of documented experiments. Doctors working for the government gave hepatitis to mental health patients in Connecticut, squirted a pandemic flu virus up the noses of Maryland prisoners, and injected cancer cells into chronically ill people at a New York hospital who had consented to the medical trials but were not informed about the cancer cell injections, NBC News reported on Feb. 27, 2011.

From 1946 to 1948, the U.S. government purposely infected nearly 700 Guatemalan prisoners with syphilis for public health studies, The New York Times reported. From the 1950s well into the 1970s, biomedical experiments were conducted at Holmesburg Prison in Philadelphia. And until the early 1970s, pharmaceutical research was conducted on prisoners. By 1972, more than 90 percent of drug toxicity testing was conducted on prisoners, the Harvard Civil Rights-Civil Liberties Law Review reported.

Associated Press reporter Mike Stobbe told PBS about interviewing one former prisoner who'd been at a prison in Philadelphia in the 1960s.

The prisoner was told he was to take part in a test for a new type of bubble bath. "He went through excruciating pain. They removed a layer of skin from his back and put on very painful chemicals. Not what you'd expect for a test for a bubble bath," Stobbe said.

These studies and numerous others violated the concept of "first do no harm," an ages-old fundamental medical principle.

"When you give somebody a disease — even by the standards of their time — you really cross the key ethical norm of the profession," said Arthur Caplan, director of the University of Pennsylvania's Center for Bioethics, in an NBC interview.

But there are some arguments that such experiments benefit humans as a whole. "History is rife with unethical experiments on inmates. But with proper safeguards, prisoner studies may hold the key to the accurate representation of vulnerable groups and lead to health benefits," Dina Fine Maron reported for Scientific American on July 2, 2014.

The is also a school of thought that the inmate population could help diversify medical test groups. African Americans represent 12 percent of the U.S. population but only 5 percent of clinical trial participants. Since prison populations are disproportionately from minority groups, they could provide a diverse test subject group.

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As recently as 2018, using prisoners for experiments has been debated.

In June 2018, the New York Times reported on a proposal by researchers in the medical journal Hypertension, including the former head of the Food and Drug Administration, for a massive clinical trial on the effects of various salt intake levels on a diverse population, such as death and strokes. The proposed test subjects would be prisoners. The proposal called for 10,000 to 20,000 prisoners to be tested for five years in an experiment funded by the National Institute of Health. In this proposed salt study, prisoners were afforded the opportunity to opt out, the Harvard Civil Rights-Civil Liberties Law Review reported.

Research involving human subjects is supposed to be regulated.

Under the Federal Policy for the Protection of Human Subjects, a prisoner or the prisoner representative must be informed and give consent, according to the Code of Federal Regulations' specific requirements to enhance protections for prisoners.

"Because prisoners may not be free to make a truly voluntary and uncoerced decision regarding whether or not to participate in research, the regulations require additional safeguards for the protection of prisoners," the National Institutes of Health reported.