

Bi-weekly Random Bits from the Internet

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(START TO READ SOME CHINESE BOOK THIS WEEKEND)

Breast-Cancer Screening – Viewpoint of the IARC Working Group

P2, Béatrice Lauby-Secretan, Chiara Scoccianti, Dana Loomis, Lamia Benbrahim-Tallaa, Véronique Bouvard, Franca Bianchini, and Kurt Straif, The New England Journal of Medicine Vol 372 No 24

The Hillary in Our Future

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In November 2014, experts from 16 countries met at the International Agency for Research on Cancer (IARC) to assess the cancer-preventive and adverse effects of different methods of screening for breast cancer. (The members of the working group for volume 15 of the IARC Handbook are listed at the end of the article; affiliations are provided in the Supplementary Appendix, available with the full text of this article at NEJM.org.) This update of the 2002 IARC handbook on breast-cancer screening is timely for several reasons. Recent improvements in treatment outcomes for late-stage breast cancer and concerns regarding overdiagnosis call for reconsideration. The definition of what constitutes the best implementation of mammographic screening programs (e.g., which age groups should be screened and with what frequency) needs to be revisited in light of the results of recent studies. New studies on clinical breast examination and self-examination warrant the re-evaluation of these screening practices, and imaging techniques other than mammography, which were not evaluated in the 2002 handbook, now warrant rigorous scientific evaluation. Finally, the screening of women at high risk for breast cancer requires a thorough reassessment, particularly in the context of the improved data that are now available on possible alternative screening methods.

In preparation for the meeting, the IARC scientific staff performed searches of the openly available scientific literature according to topics listed in an agreed-upon table of contents; searches were supplemented by members of the working group on the basis of their areas of expertise. Group chairs and subgroup members were selected by the IARC according to field of expertise and the absence of real or apparent conflicts of interest. During the meeting, care was taken to ensure that each study summary was written or reviewed by someone who was not associated with the study being considered. All studies were assessed and fully debated, and a consensus on the preliminary evaluations was achieved in subgroups before the evaluations were reviewed by the entire working group. During the final evaluation process, the working group discussed preliminary evaluations to reach consensus evaluations. (For details on the process used and on the evaluation criteria, see the working procedures on the IARC handbooks website.) This article briefly summarizes the evaluation of the scientific evidence reviewed at the meeting (Table 1). The

full report is presented in volume 15 of the IARC Handbooks of Cancer Prevention.

Breast cancer is the most frequently diagnosed cause of death from cancer in women worldwide, the second leading cause of death from cancer in women in developed countries, and the leading cause of death from cancer in low- and middle-income countries, where a high proportion of women present with advanced disease, which leads to a poor prognosis. Established risk factors for breast cancer include age, family or personal history of breast cancer or of precancerous lesions, reproductive factors, hormonal treatment, alcohol consumption, obesity (for postmenopausal breast cancer only), exposure to ionizing radiation, and genetic predisposition.

Screening for breast cancer aims to reduce mortality from this cancer, as well as the morbidity associated with advanced stages of the disease, through early detection in asymptomatic women. The key to achieving the greatest potential effects from this screening is providing early access to effective diagnostic and treatment services. Comprehensive quality assurance is essential to maintaining an appropriate balance between benefits and harms.

The most common means of screening women for breast cancer is standard mammography (film or digital), offered either by organized programs or through opportunistic screening. Organized screening programs are characterized by invitations to join a target population at given intervals, systematic recalls for the assessment of detected abnormalities, and delivery of test results, treatment, and follow-up care, with regular monitoring and evaluation of the program and a national or regional team responsible for service delivery and quality. Opportunistic screening typically provides screening to women on request and coincidentally with routine health care.

As a consequence of the results of randomized, controlled trials that showed a reduction in breast-cancer mortality several decades ago,¹ mammographic screening has been implemented to a great extent in high-income countries and regions and less so in countries in Central and Eastern Europe, through either opportunistic or organized screening. Most countries in Latin America have national recommendations or guidelines, including those calling for mammographic screening combined with clinical breast examination and breast self-examination. In other low- and middle-income countries, breast-cancer screening is promoted primarily by advocacy groups and periodic campaigns to promote breast-cancer awareness.

In 2002, on the basis of findings from randomized, controlled trials, the previous IARC Handbook Working Group concluded that the evidence for the “efficacy of screening by mammography as the sole means of screening in reducing mortality

ty from breast cancer” was sufficient for women 50 to 69 years of age, limited for women 40 to 49 years of age, and inadequate for women younger than 40 or older than 69 years of age. We carefully reviewed the results of all available randomized, controlled trials and reaffirmed the findings from the previous evaluation of the efficacy of mammographic screening in women 50 to 69 years of age; the evidence of efficacy for women in other age groups was considered inadequate.

Table 1. Evaluation of Evidence Regarding the Beneficial and Adverse Effects of Different Methods of Screening for Breast Cancer in the General Population and in High-Risk Women.*	
Method	Strength of Evidence†
Mammography	
Reduces breast-cancer mortality in women 50–69 yr of age	Sufficient
Reduces breast-cancer mortality in women 70–74 yr of age‡	Sufficient
Reduces breast-cancer mortality in women 40–44 yr of age§	Limited
Reduces breast-cancer mortality in women 45–49 yr of age§	Limited¶
Detects breast cancers that would never have been diagnosed or never have caused harm if women had not been screened (overdiagnosis)	Sufficient
Reduces breast-cancer mortality in women 50–74 yr of age to an extent that its benefits substantially outweigh the risk of radiation-induced cancer from mammography	Sufficient
Produces short-term negative psychological consequences when the result is false positive	Sufficient
Has a net benefit for women 50–69 yr of age who are invited to attend organized mammographic screening programs	Sufficient
Can be cost-effective among women 50–69 yr of age in countries with a high incidence of breast cancer	Sufficient
Can be cost-effective in low- and middle-income countries	Limited
Ultrasonography as an adjunct to mammography in women with dense breasts and negative results on mammography	
Reduces breast-cancer mortality	Inadequate
Increases the breast-cancer detection rate	Limited
Reduces the rate of interval cancer	Inadequate
Increases the proportion of false positive screening outcomes	Sufficient
Mammography with tomosynthesis vs. mammography alone	
Reduces breast-cancer mortality	Inadequate
Increases the detection rate of in situ and invasive cancers	Sufficient
Preferentially increases the detection of invasive cancers	Limited
Reduces the rate of interval cancer	Inadequate
Reduces the proportion of false positive screening outcomes	Limited
Clinical breast examination	
Reduces breast-cancer mortality	Inadequate
Shifts the stage distribution of tumors detected toward a lower stage	Sufficient
Breast self-examination	
Reduces breast-cancer mortality when taught	Inadequate
Reduces the rate of interval cancer when taught	Inadequate
Reduces breast-cancer mortality when practiced competently and regularly	Inadequate
Screening of high-risk women	
MRI as an adjunct to mammography	
Reduces breast-cancer mortality in women with a <i>BRCA1</i> or <i>BRCA2</i> mutation	Inadequate
Increases the detection rate of breast cancer in women with lobular carcinoma in situ or atypical proliferations	Inadequate
Clinical breast examination as an adjunct to MRI and mammography	
Increases the detection rate of breast cancer in women with a high familial risk	Inadequate
Ultrasonography as an adjunct to mammography	
Increases the detection rate of breast cancer in women with a personal history of breast cancer	Inadequate
Increases the proportion of false positive screening outcomes in women with a personal history of breast cancer as compared with those without such a history	Inadequate
MRI as an adjunct to mammography plus ultrasonography	
Increases the proportion of false positive screening outcomes in women with a personal history of breast cancer as compared with those without such a history	Inadequate
MRI as an adjunct to mammography vs. mammography alone	
Increases the proportion of false positive screening outcomes in women with lobular carcinoma in situ or atypical proliferations	Limited

* For the complete evaluation statements, see International Agency for Research on Cancer² or the IARC Handbooks of Cancer Prevention website (<http://handbooks.iarc.fr>). MRI denotes magnetic resonance imaging.

† For detailed information on the evaluation criteria, see the working procedures section of the IARC Handbooks of Cancer Prevention website (<http://handbooks.iarc.fr/workingprocedures/index.php>).

‡ The evidence for a reduction in breast-cancer mortality from mammography screening in women in this age group was considered to be sufficient. However, published data for this age category did not allow for the evaluation of the net benefit.

§ The evidence for a reduction of breast-cancer mortality from mammography screening in women in this age group was considered to be limited. Consequently, the net benefit for women in this age group was not assessed.

¶ The majority of the voting members of the IARC Working Group considered the evidence as limited; however, the vote was almost evenly divided between limited and sufficient evidence.

|| An interval cancer is a cancer that develops in the interval between routine screenings for that particular cancer.

The working group recognized that the relevance of randomized, controlled trials conducted more than 20 years ago should be questioned, given the large-scale improvements since then in both mammographic equipment and treatments for breast cancer. More recent, high-quality observational studies were considered to provide the most robust data with which to evaluate the effectiveness of mammographic screening. The working group gave the greatest weight to cohort studies with long follow-up periods and the most robust designs, which included those that accounted for lead time, minimized temporal and geographic differences between screened and unscreened participants, and controlled for individual differences that may have been related to the primary outcome. Analyses of invitations to screenings (rather than actual attendance) were considered to provide the strongest evidence of screening effectiveness, since they approximate the circumstances of an intention-to-treat analysis in a trial. After careful consideration of the limitations of case-control studies in the evaluation of effectiveness, these studies were also considered to provide information that was relevant to organized screening programs and to other venues, such as opportunistic screening, for which cohort data were not available. Among ecologic studies, only those that controlled for time- and treatment-related factors in design or analysis were considered to be informative.

Some 20 cohort and 20 case-control studies, all conducted in the developed world (Australia, Canada, Europe, or the United States) were considered to be informative for evaluating the effectiveness of mammographic screening programs, according to invitation or actual attendance, mostly at 2-year intervals. Most incidence-based cohort mortality studies, whether involving women invited to attend screening or women who attended screening, reported a clear reduction in breast-cancer mortality, although some estimates pertaining to women invited to attend were not statistically significant. Women 50 to 69 years of age who were invited to attend mammographic screening had, on average, a 23% reduction in the risk of death from breast cancer; women who attended mammographic screening had a higher reduction in risk, estimated at about 40%. Case-control studies that provided analyses according to invitation to screening were largely in agreement with these results. Evidence from the small number of informative ecologic studies was largely consistent with that from cohort and case-control studies. A substantial reduction in the risk of death from breast cancer was also consistently observed in women 70 to 74 years of age who were invited to or who attended mammographic screening in several incidence-based cohort mortality studies. Fewer studies assessed the effectiveness of screening in women 40 to 44 or 45 to 49 years of age who were invited to attend or who attended mammographic screening, and the reduction in risk in these studies was generally less pronounced. Overall, the available data did not allow for establishment of the most appropriate screening interval.

The most important harms associated with early detection of breast cancer through mammographic screening are false positive results, overdiagnosis, and possibly radiation-induced cancer. Estimates of the cumulative risk of false positive results differ between organized programs and opportunistic screening. The estimate of the cumulative risk for organized programs is about 20% for a woman who had 10 screens between the ages of 50 and 70 years. Less than 5% of all false positive screens resulted in an invasive procedure. Owing to differences in health systems and quality control for screening performance, recall rates for additional investigation tend to be higher in opportunistic screening (e.g., in the United States) than in organized screening programs. Overall, studies show that having a false positive mammogram has short-term negative psychological consequences for some women.

Overdiagnosis can be estimated on the basis of data from observational studies conducted in organized programs or through statistical modeling. There is an ongoing debate about the preferred method for estimating overdiagnosis. After a thorough review of the available literature, the working group concluded that the most appropriate estimation of overdiagnosis is represented by the difference in the cumulative probabilities of breast-cancer detection in screened and unscreened women, after allowing for sufficient lead time. The Euroscreen Working Group calculated a summary estimate of overdiagnosis of 6.5% (range, 1 to 10%) on the basis of data from studies in Europe that adjusted for both lead time and contemporaneous trends in incidence. When the same comparators were used, corresponding estimates of overdiagnosis in randomized, controlled trials after a long follow-up period from the end of screening were similar (4 to 11%). Similar non-European and more recent European observational studies have led to higher estimates of overdiagnosis.

Radiation-induced breast cancer is a concern in women who are offered screening. The estimated cumulative risk of death from breast cancer due to radiation from mammographic screening is 1 to 10 per 100,000 women, depending on age and the frequency and duration of screening. It is smaller by a factor of at least 100 than the estimates of death from breast cancer that are prevented by mammographic screening for a wide range of ages.

After a careful evaluation of the balance between the benefits and adverse effects of mammographic screening, the working group concluded that there is a net benefit from inviting women 50 to 69 years of age to receive screening. A number of other imaging techniques have been developed for diagnosis, some of which are under investigation for screening. Tomosynthesis, magnetic resonance imaging (MRI) (with or without the administration of contrast material), ultrasonography (handheld or

automated), positron-emission tomography, and positron-emission mammography have been or are being investigated for their value as supplementary methods for screening the general population or high-risk women in particular.

Evidence for population screening with other imaging techniques is based solely on data from observational studies. The use of adjunct ultrasonography in women with dense breasts and negative results on mammography may increase the detection rate of cancers, but it also increases false positive screening outcomes. As compared with mammography alone, mammography with tomosynthesis increases rates of detection of both in situ and invasive cancers and may reduce false positive screening outcomes; however, evidence for a reduction in breast-cancer mortality was inadequate (Table 1) and the radiation dose received with dual acquisition is increased.

Clinical breast examination is a simple, inexpensive technique. In three trials in which women were randomly assigned to receive either clinical breast examination or no screening, breast cancers detected at baseline and in the early years of the trials tended to be of a smaller size and less advanced stage in the former group of women than in the latter. Results on breast-cancer mortality have not yet been reported. In addition, five observational studies, conducted mostly in the 1970s, reported that clinical breast examination combined with mammographic screening increased the breast-cancer detection rate by 5 to 10 percentage points as compared with mammography alone.

As has been previously reported, the available data from randomized, controlled trials and observational studies generally did not show a reduction in breast-cancer mortality when breast self-examination was either taught or practiced competently and regularly (Table 1). Overall, surveys in general populations have shown that the numbers of women who report practicing breast self-examination are probably too few to have had an effect on mortality from breast cancer.

Women with a family history of breast cancer, with or without a known genetic predisposition, are at increased risk for breast cancer and therefore may benefit from intensified monitoring, with a combination of methods, from an earlier age and possibly at shorter intervals than women at average risk. However, high-risk women may be more sensitive to ionizing radiation, and screening from an earlier age increases the risk of radiation-induced cancer. A number of observational studies have evaluated the sensitivity, specificity, incremental rate of breast-cancer detection, and false positive outcomes associated with various imaging techniques in high-risk women (Table 1). There is abundant literature showing that the use of MRI as an adjunct to mammography significantly increases the sensitivity of screening in women with a high familial risk and a BRCA1 or BRCA2 mutation as compared

with mammography alone, but the addition of MRI also decreases the specificity; data for other high-risk groups were fewer and provided weaker evidence. The sensitivity of ultrasonography was found to be similar to or lower than that of mammography and was consistently lower than that of MRI. The evidence regarding other screening techniques was too sparse to allow any conclusions.

The Hillary in Our Future

Michael Tomasky, *The New York Review of Books* Jun 25, 2015 Issue



As Hillary Rodham Clinton pursues the 2016 Democratic presidential nomination, we face a situation that is wholly without precedent in modern American electoral history. There have been presumptive nominees before, usually sitting vice-presidents—Al Gore in 2000, George H.W. Bush in 1988, and Hubert Humphrey in 1968, to name three. But even they faced competition from candidates who were certainly from the “first tier”—Bill Bradley, Bob Dole, Jack Kemp, Bobby Kennedy, and Gene McCarthy.

Clinton faces no such opposition within her party. It’s good that Senator Bernie Sanders has decided to enter the race. Clinton will have to debate him, and his mere presence will force her to take positions she could otherwise get away with not taking. But it’s rather unlikely that a socialist from Vermont can capture a major-party nomination. Similarly, former Maryland governor Martin O’Malley probably doesn’t arouse much concern at Clinton’s Brooklyn headquarters. He has a solid record of achievement in Annapolis and intriguing credentials as a Catholic committed to social justice. But he comes with baggage, too—the extremely incompetent implementation of Obamacare in his state and, now, the mere fact that he was once

the mayor of the sad, segregated city of Baltimore, perpetually suspended in a kind of bitter aspic of deindustrialization, disinvestment, and broken promises. Sometimes governors exude clear presidential potential, as did Bill Clinton and George W. Bush. O'Malley, so far anyway, does not.

And that's about it. Massachusetts Senator Elizabeth Warren is out; she plainly does not want to be president. Although she's been active in opposing Obama's proposed Pacific trade agreement, she's never shown a deep interest in foreign policy, which is a rather important part of any president's job, particularly so at this point in history. Short of incapacitating illness or a scandal of enormous proportions, Clinton will almost certainly be the Democratic nominee.

This puts her in a strong position, but it also places a special burden on her. It means that the nation's liberals and Democrats, millions of people who usually have a choice to make, in essence don't have one here. There is much at stake in next year's election. For a start, a new president who serves two terms may well nominate three or even four justices to the Supreme Court, meaning either that the Court's conservative majority will be solidified and enlarged, with more allies of Antonin Scalia and Samuel Alito, or that it will be reversed, giving the country a liberal Supreme Court majority for the first time since the 1980s. Such a Court could spend a generation or two reversing the precedents set by the Courts of William Rehnquist and John Roberts.

So Clinton, who leads in national polls and will benefit from an Electoral College map that favors any Democratic candidate, has a special obligation as a candidate. She has to run a better race than she ran in 2008. She needs to show—as she already has on issues like immigration, criminal justice, and the tax rates of hedge fund managers—that she is attuned to where the electorate is today. And she needs to take all reasonable steps to avoid taints of scandal. If a late-breaking controversy over Clinton's record and character propels someone like Scott Walker to the White House, the sense of betrayal and despair will be ferocious.

The Clinton Foundation—until recently the Bill, Hillary, and Chelsea Clinton Foundation—has done a lot of good in the world since its founding in 2001. By far its largest program—\$128 million spent in 2013—is the Clinton Health Access Initiative, which facilitates the provision of, and negotiates price reductions for, AIDS and malarial drugs to millions of people in Africa and elsewhere. It does other work to expand access to health care in developing countries.

The second-largest of the foundation's seven major programs (\$23.6 million in 2013) is the Clinton Global Initiative (CGI), which “convenes global leaders to create and

implement innovative solutions to the world's most pressing challenges," according to the foundation's website. In early May, the CGI hosted a meeting in Marrakesh where regional leaders were introduced to experts on youth unemployment, innovation, entrepreneurship, and kindred topics. The foundation also funds work related to domestic poverty and the effects of climate change both in the United States and around the world.

Some critics have raised questions about several of the foundation's programs. For example, does anything constructive actually happen in poor countries once those regional leaders go back home after getting to hobnob with Bill Clinton for a few days? The foundation often operates at the intersection of the nonprofit, public-sector, and management-consulting worlds, and it is hard to discern clear results of some of its activities. Yet at the same time, there can be little doubt that Bill Clinton's work has saved and improved lives. Back when the foundation still used to get good press, an Atlantic article described in detail how Clinton and his old friend Ira Magaziner, then working with the foundation, succeeded in negotiating with pharmaceutical companies for lower anti-AIDS drug prices:

So the foundation went to governments in Africa and the Caribbean and organized demand for AIDS drugs, obtaining intentions to place large orders if prices could be cut. It simultaneously went to drug companies, offering them a much larger and less-volatile market for AIDS drugs in return for lower prices based on the projected higher volume. Although the foundation asked for aggressive "forward pricing" to kick-start demand, it pointedly did not ask for donations or charity. "To be sustainable," says Magaziner, "this can't be a charitable act." Rather, the foundation was offering a business proposition: If we get you the demand, can you get us the supply?

It's hard to argue with that, and no one outside of the right-wing fever swamps really does.

What people argue with are two things: the donations the foundation accepts from foreign governments and individuals, and the speaker fees paid to Bill and Hillary Clinton. For the most part those payments are not specifically related to the foundation; but they are given much emphasis by the Clintons' numerous opponents. There is palpable fear among them that she will win the presidency, serve eight years, reshape the Supreme Court, and pursue the other lamentable goals one might expect from the Clintons.

The foundation took in \$198.8 million in 2013, a staggering \$55,000 a day. It claims on its website that 90 percent of its donations are \$100 or smaller (how many peo-

ple must it employ simply to stay on top of this inflow?). But it's the large foreign donations that have raised questions. Often, the foreign donors are looking to make money on various kinds of business deals in far-flung locales where it just might help to know Bill Clinton; even better would be to show up in the dusty capital city at his side. The Canadian investor Frank Giustra, who figures in the current controversies and is a foundation board member, gave or pledged more than \$100 million around the same time that he was pursuing business opportunities in Kazakhstan and Colombia.

A bigger problem is that the foundation has accepted donations from foreign governments, some of which aren't especially known for their commitments to democracy and transparency. The awkward appearance of all this was compounded, of course, while Hillary served as secretary of state. During her tenure, *The Washington Post* has reported, the foundation accepted donations from seven foreign governments, including Algeria, Kuwait, Qatar, and Oman. In 2010, the year of Algeria's donation, Hillary Clinton's State Department issued a human rights report noting that in Algeria there were restrictions on the press and academic freedom, as well as instances of torture.

On the subject of the speeches, the amounts are simply stunning. *The New York Times*, looking through newly released disclosure forms, reported in mid-May that Bill and Hillary Clinton made—the *Times* said “earned,” though that verb seems difficult to justify—at least \$30 million delivering speeches in the previous sixteen months. Her average fee was \$235,000; his, around \$250,000. Together, they have made more than \$125 million giving speeches since 2001, to say nothing of book royalties and investment income.

First of all—and here's a question that is rarely raised—what on earth do they say in exchange for this kind of money? It's difficult to know. Generally, the speeches are what we call “closed press” in the trade, and texts and transcripts are usually not posted anywhere. But on YouTube, I did find one paid speech by Bill Clinton, to something called the SharePoint Conference, held by Microsoft in March 2014. According to disclosure forms the *Times* posted alongside its mid-May article, he received \$225,000 for this speech.

It went about as you'd expect if you've caught snippets of Clinton talking about his foundation work and his larger view of the world. During his forty-four-minute talk, he thanked Microsoft for its work with the foundation; boasted about the foundation's work; segued into a broader discussion about the power of technology; and invoked the great challenges of inequality and global instability. The overriding theme of the talk was how we choose to define ourselves as a species, as identi-

ty-based competitors or common-good-pursuing cooperators.

He must have said some version of “what we have in common is more important than our interesting differences” fifteen times. He concluded by quoting E.O. Wilson to the effect that “the conquest of Earth has come only to the cooperators. The great cooperating species are ants, termites, bees, and people.” The talk was wide-ranging, stuffed full of interesting facts about this or that project in China or Haiti, occasionally charming, a bit on the windy side, and it cost Microsoft \$5,113.64 a minute.



So now we have Clinton Cash, by the conservative author and researcher Peter Schweizer. It is worth knowing that Schweizer has been an occasional consultant to Republican, and only Republican, politicians. He was a speechwriting consultant to the George W. Bush White House. He helped write Louisiana Governor Bobby Jindal’s autobiography. And in what was probably among his more challenging assignments, he advised Sarah Palin on foreign policy.

He’s written a short book, with fifty-six pages of footnotes, a few of them as long as Op-Ed columns, and only 184 pages of text. Its eleven chapters cover different episodes during which, the author alleges, Hillary Clinton took some action as secretary of state or changed her position as a senator in exchange for money paid either

to the Clinton Foundation or to Bill in the form of a speaking fee. He cites Giustra's investments in Kazakhstan and Colombia; there's a chapter called "Warlord Economics" on Africa; another on Haitian disaster relief; another on a Russian uranium deal; one on "Rainforest Riches"; and one on Hillary Clinton's position on a United States agreement with India on nuclear technology. Australia doesn't have a chapter, so at least that's one continent spared the effects of the Clintons' alleged cupidity.

Clinton Cash has been the subject of much controversy, which was kicked off by an April 19 New York Times article announcing its imminent arrival. The article noted that the book is published by Harper, and it pointed out that the Fox News Channel had struck an "exclusive" deal to use some of the book's findings to pursue its own reporting angles (it did not mention that both of those entities are owned by Rupert Murdoch). Rather more surprisingly, the article explained that two other news organizations had struck similar "exclusive" deals with Schweizer: The Washington Post and The New York Times.

From the moment that Times article appeared, which was about three weeks before the book itself did, both sides went to their respective barricades. On the right, that meant Fox, talk radio, and a few websites like Breitbart.com. On the left, it chiefly meant the nonprofit group Media Matters for America, led by David Brock, the one-time conservative Clinton critic who is now a powerful figure in the Washington liberal nonprofit world and a committed Clinton booster. Media Matters devoted several consecutive days to a feverish project of correcting some factual errors and bringing to light issues such as Schweizer's partisan background. In return, Schweizer, on a May 4 radio appearance with conservative talk-radio host Dana Loesch, joined in speculation that the Clintons might literally have him, to use a piece of old Mafia slang, clipped:

Loesch: I know you don't want to talk too much about it, but there is that, there is always that concern for anyone who goes up against the Clinton machine that they could be Vince Fostered, and I'm sure that that was something that you took into consideration.

Schweizer: Yeah, I mean look—there are security concerns that arise in these kinds of situations. You know, you don't like to go into too much detail, there were some things that were going on that we felt needed to be addressed.

What can be made of Schweizer's allegations? Some of what he puts forward is disquieting. For example, of the thirteen speeches Bill Clinton had given for fees of \$500,000 or more during the period Schweizer researched, eleven occurred while Hillary was secretary of state. This suggests that even assuming the Clintons them-

selves are squeaky clean, rich corporations or individuals may have thought they had the chance of getting something in return for such high fees. There are a number of such points in the book, where readers will say to themselves, “Wow, if this is true....”

But that “if” turns out to be a big one, because here is the book’s fatal flaw: Schweizer doesn’t engage in journalism. He does a decent—and, clearly, convincing, at least to a number of observers, including some journalists—imitation of journalism. But it isn’t really journalism.

Investigative journalism involves three basic parts. First, a reporter collects his documents. This, Schweizer has done (mostly). But that’s just step one. Step two is finding sources who can discuss the documents and what lies behind them. An investigative journalist would, for example, have tried to develop sources within Frank Giustra’s organization, or other sources of inside information, in an effort to get them to confirm or explain certain facts. And third, a journalist goes to the target of his allegations and gives the target a chance to respond. One may do this for legal reasons, but also because there may actually be reasonable explanations for odd-seeming occurrences, and the reporter is not only obliged to be accurate but also doesn’t want to wind up discredited.

Schweizer largely dispensed with steps two and three. He does write that he made “repeated calls” to Giustra asking him to confirm or deny whether he was an investor in a Russian uranium deal. But there’s no evidence in the book that Schweizer tried to develop inside sources or give the Clintons an opportunity to comment. (I asked the foundation and the campaign if Schweizer ever contacted them, and both said no.)

When you don’t do these things, your story has a way of collapsing, as appears to be the case with Schweizer’s allegations pertaining to a deal between the US and India on nuclear development. When I first read the book, I thought this was perhaps the single most damaging allegation in it, involving as it did the transfer of nuclear technology to a state that hasn’t signed the nuclear nonproliferation treaty and is thought to possess around one hundred nuclear warheads. Schweizer’s basic charge here is that as a senator in 2006, Hillary Clinton opposed the deal, but two years later, after wealthy Indian donors gave millions to the foundation, she did an abrupt about-face and backed it. According to Schweizer, this constituted “a clear reversal of her previous policy positions” and, he implies, went against the dominant (he means honest) thinking in the Democratic Party at the time.

But this isn’t quite what happened. Politifact.com, the independent website that

fact-checks such claims, looked into Schweizer's allegation and rated it "false." It's a complicated story that turns on the nature of specific amendments the Senate voted on in 2006 and 2008; but the bottom line is that Clinton spoke publicly in support of the deal back in 2006, so whether her position was a good or bad one, there was certainly no about-face.

In the pages of Clinton Cash, the case seemed airtight. But if he can't even track down—or chooses not to share—a public statement Senator Clinton's office issued on June 29, 2006, in support of the pact (it's linked to in the Politifact piece), then it's fair to wonder what else he left out.

The book worked its way through the news cycle in late April and early May. It's hard to measure its impact. But the foundation and speeches are not going away as issues. The press smells a big story here.

Indeed, there seems to be something more going on than that. Toward the tail end of the Schweizer wave, Politico's Dylan Byers wrote a post arguing that Hillary Clinton was the clear favorite for 2016. The Electoral College advantage, he wrote, is probably just too formidable. Besides, her opponents have thrown everything they could at her, from Whitewater on up to Benghazi, and not enough of it has stuck.

Then Byers, whom I've always found to be a reliable barometer of the collective thinking of the Washington media establishment, wrote a very revealing sentence. Mitigating against all of the above, he wrote, is the fact that "the national media have never been more primed to take down Hillary Clinton (and, by the same token, elevate a Republican candidate)." Not primed to investigate, or primed to scrutinize, or even primed to rake over the coals. Primed to take down.

I think there is much truth in Byers's assertion. He doesn't go into the reasons for this. They are many and complex. For some, maybe it's simply that she is such a clear front-runner, and they want to slay Goliath. There is likely some sexism involved, whether conscious or unconscious. Maybe some do believe that the Clintons are unusually corrupt. Also, in fairness, it must be said that the Clintons, especially Hillary, have never been very accommodating to the press, so the traffic on this street runs two ways.

But at bottom, there seems to be a feeling—and I am talking here about the mainstream, even "liberal," media, not conservative outlets—that the Clintons play by their own rules and keep getting away with one thing or another. Washington is a city of custom, and the permanent class of insiders who live here have fashioned a certain set of rules for all who come here to live by, and the Clintons have never re-

ally lived by those rules. In 1998, after the Lewinsky story broke and polls showed majorities favoring resignation or impeachment if he lied under oath, Bill Clinton said, “Well, we’ll just have to win, then.” He was breaking the rules. And he did win, because the public didn’t find a sexual liaison to be an impeachable offense and because the economy was blazing. This outcome infuriated the keepers of the conventional wisdom.

The New York Times is worth keeping an eye on here. It will endorse Hillary Clinton when the time comes, but the far more important question is how it will use its news pages to write about her between now and then. It was shocking that the Times based a piece on Clinton Cash, a book with an obvious political motive that was written by a former adviser to Republican politicians, some very right-wing. The paper that pushed the Whitewater story hard in 1992 and in 1998 ran a series of editorials calumniating Bill Clinton and praising prosecutor Ken Starr is now apparently prepared to continue in that tradition. In recent weeks, the Times has published two more articles along these lines, one about Hillary’s brother Tony Rodham, and another about Clinton confidant Sidney Blumenthal. Whether it will devote similar resources to scrutinizing Jeb Bush or other prospective Republican nominees seems a fair question.

Meanwhile, though, the Clintons need to think about and address their own situation as well. It is precisely because she is the all-but-inevitable candidate on whom so many hopes will be pinned that she has a clear responsibility, as does her husband, to take into account these media biases and still do everything they can to make these allegations float away.

As I’ve written previously, they should announce, and soon, a series of dramatic steps they will take to change the way the foundation does business. On April 15, the foundation announced three changes, including that it will now accept foreign money only from Australia, Canada, Germany, the Netherlands, Norway, and the United Kingdom. The Clintons should go much farther, even to the point of downsizing the foundation’s operations, eliminating some programs.

And with respect to the speaking fees, while she stopped taking them once she became a candidate, it’s a little hard to understand why he can’t just stop for a while, or say he’ll no longer accept more than X amount, or do only ten a year, or something. They have amassed a fortune north of \$125 million. The next several generations of Clintons could lead very expensive lives, and they would still be quite rich. But Bill seems defensive on this point. Recently, an NBC reporter asked him about the half-million-dollar fees, and he said: “I’ve got to pay our bills.”

They need to do better than this, and not just for political reasons, but because judgments about their integrity and future use of power are at stake. It's one thing to be secretary of state. It's another to be the president. A presidency can't have questions like this swirling around it from day one. Imagine speculation that a White House decision with regard to Russia or Pakistan was influenced by a donation to the foundation from someone pursuing a business deal in one of those countries. Even if wholly unfounded, in today's media environment, the mere speculation could alter outcomes. Bill Clinton could also be a tremendous asset to his wife's administration as an envoy, but if the press is chasing "appearance of conflict" stories, it will be much harder for him to be effective.

The record so far suggests, though, that the Clintons won't take dramatic steps. They'll take just enough steps. It almost seems that they prefer living inside the maelstrom at this point. But it's hard on a lot of other people.