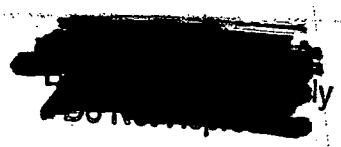


CIA HAS NO OBJECTION TO  
DECLASSIFICATION AND/OR  
RELEASE OF THIS DOCUMENT

THIS DOCUMENT HAS BEEN APPROVED  
FOR RELEASE, AS SANITIZED, BY  
Dept of Army ON 15 Jul 98



AGO RECORD CHECK

CURRENT DATE: 22 October 1962  
DATE CHECKED: 18 October 1962

NAME: Cancio, Pedro Casanova

NUMBER: 282444

RANK: SFC. Army RA 13361393  
(Component) (Serial Number)

ADDRESS: 600 21st St., N.W., Washington, D. C. (1953)

BIRTH: 22 August 1926, Matanzas, Cuba

OFFICERS: \_\_\_\_\_ TO: \_\_\_\_\_

ENLISTED: 9 October 1950 TC: 27 April 1953 Hon. (Medical)  
(Discharge)

FOREIGN SERVICE: 1 October 1952 22 January 1953 USARCARIB  
28 March 1951 TO: 7 March 1952 Korea  
(Theatre)

MILITARY SPEC: Tank Crewman

CIVILIAN OCCUPATION: Bookkeeper

EDUCATION H. S. -3

COURT MARTIAL: 0 TIME LOST: 2

EFFICIENCY REPORT (OFFICERS): \_\_\_\_\_

SECURITY CLEARANCE: \_\_\_\_\_ SUBJECT granted CRYPTOGRAPHIC  
 SECRET - SECRET Clearance \_\_\_\_\_ on the basis of a \_\_\_\_\_  
 \_\_\_\_\_ by \_\_\_\_\_

REMARKS: Subjects file reveals letters he wrote to President Eisenhower, President Truman and several Generals complaining of being sick and nervous. His letter dated 19 December 1952 to President Truman contains the following comment: "I am glad General Batista took over in Cuba, he is going to stop the Reds over there, and he likes the American peoples, he wrote me the other day but I cannot answer him I do not feel good, I'll wait, he was good friend of my father in 1940 when my father was member of Congress in his Government." Time lost 23 June 1952 to 24 June 1952. No record of disciplinary action. A clinical abstract concerning Subject is attached.

BROOKE ARMY MEDICAL CENTER  
BROOKE ARMY HOSPITAL  
Port Sam Houston, Texas

SGM/mds  
16 March 1953

CLINICAL ABSTRACT

RE: CANCIO, Pedro C., SFC, RAIS 361 393

This 25 year old single, Cuban SFC with approximately 2-6/12 years service was admitted to the Open Psychiatric Section of Brooke Army Hospital 25 January 1953 as a transfer from USAI, Ft. Clayton, Canal Zone, with the transfer diagnosis "Anxiety reaction."

**HISTORY OF PRESENT ILLNESS:** The patient was originally admitted to the hospital in the Canal Zone on 20 November 1952 because of diffuse anxiety symptoms. At the time, he complained of being confused, loss of memory, insomnia, feelings of unworthiness, and concern that he was unfit to be an NCO. He also seemed to be preoccupied and concerned about the welfare of his mother and sister, who live in Cuba. It is stated in the transfer summary that the patient over-dramatized his situation because of his inability to verbalize his feelings. During his hospitalization in the Canal Zone he wrote letters to the professional personnel complaining of various somatic symptoms and also several letters to such people as the President of the United States, President Batista, the Secretary of Defense, etc. "He also tended to handle his inadequacies by bragging by seeking assurance from us that he was an excellent NCO who could not be blamed for his inability to adjust because of his traumatic combat experiences." He apparently showed some improvement while in the hospital in the Canal Zone, but it was felt that his secondary gain of being discharged as a medical patient was so great that return to duty was neither practical nor possible and he was therefore transferred to this hospital with a diagnosis of Anxiety Reaction.

On interview at this hospital the patient stated that he had been nervous since his return from Korea in April of 1952 and that he was unable to perform duty as a Sgt., feeling that he no longer possessed enough confidence and was unable to assume responsibility which goes with that rank. He also again expressed a great deal of worry and concern about his mother in Cuba, who reportedly has heart trouble and high blood pressure and his sister, who has tuberculosis. He complained of feelings of depression, marked tension, frequent frightening dreams, usually related to combat or dreams of someone chasing him with a knife, occasionally his father, and a fear of "going insane." He expressed a strong desire to return to Cuba, both to see and help take care of his mother and also for the purpose of obtaining shock treatments, since he has an uncle who has derived considerable benefit from these treatments at a Catholic sanatorium. He further complained of forgetfulness and a heavy feeling in his head.

**PAST PERSONAL HISTORY:** The patient was born and reared in Cuba and from an early age always had a strong desire to go to the US, become a soldier in the US Army and a US citizen. His father was a doctor who died in 1946 and who apparently was a very stern and at times cruel disciplinarian.

*Entirely 3*

CLINICAL ABSTRACT

MC: CANGIO, Pedro C., SFC, RAIS 361 393

ian against whom the patient constantly rebelled. The mother, who is still living, always treated the patient as her favorite and tended to be overly protective and overly indulgent. The patient is the oldest of three children and the only boy. His father was apparently fairly prominent in the political life in Cuba and the patient had contact with members of the American Embassy and as a result through an American colonel arranged to come to the US. He went to Washington, D.C. and enlisted in the Army shortly thereafter in October of 1950. Following basic training he was sent to Korea, in April 1951 was assigned to a tank company and eventually became a tank commander. Apparently he was considered to be an excellent NCO and did well in combat. He was not subjected to any unusual stress with the exception of one or two traumatic experiences, one time when a close friend of his was killed when the tank hit a land mine, and another occasion when his outfit was cut off for a period of several hours from the American lines by the Chinese. The patient was rotated back to the ZI in July of 1952, since which time apparently he has had considerable difficulty adjusting, writing numerous letters requesting transfer, demotion, discharge, and return to Cuba. He was given a leave and returned to Cuba at his own expense. This only served to increase his tension and anxiety, as his mother apparently fainted at the airport when he was leaving on his return to the States. Eventually as a result of his constant complaints, letters and pressure which he brought to bear upon numerous individuals, he was transferred to the Caribbean Command, supposedly so he would be nearer home. However, he was sent to the Canal Zone, which obviously did not help him too much. Immediately upon arrival he reported on sick call and was hospitalized because of his nervousness.

**DIRECT EXAMINATION:** Physical and neurological examinations were essentially within normal limits. Routine laboratory examinations including urinalysis, serology, and hematology were negative. A chest x-ray was reported as negative. On mental status examination the patient was in excellent contact, appearing moderately tense, but without any marked objective signs of anxiety. Thought content was not abnormal and consisted primarily of preoccupation with family problems at home and a tremendous concern about himself, his inability to function, and his rather diffuse symptoms of anxiety. He referred on occasion to thoughts of suicide, fears of going insane, and expressed a strong desire to obtain shock treatment. He also related numerous terrifying dreams and complained of insomnia. The sensorium and judgement were not impaired.

**COURSE IN HOSPITAL:** The patient since hospitalization has made a fairly adequate adjustment to the Open Ward, although he has not been too cooperative insofar as participation in any group activities. He has requested passes very rarely, the most recent time occurring when the patient desired to contact some visiting Cuban officers whom he had read in the paper were at Lackland Air Force Base. He has not, as far as is known, written any letters to such figures as the President of the US; however he has written numerous letters to the doctor in a rather pleading vein begging for help and making rather unusual requests such as expecting the Army to finance a trip to the shrine in Lourdes, France. The content of these

*Handwritten signature/initials*

CLINICAL ABSTRACT

RE: BANCIO, Pedro C., SPC, RA13 361 393

letters reveals a rather immature and dependent personality, who seems unable to face his own problems or make any attempts at adjusting himself to his situation and environment and is constantly seeking help and support from such father figures as the doctor, the President, etc. The same emotional immaturity is perhaps evident also in his earlier life in his rather naive goal to become a soldier in the US Army. This goal together with the support which he must have obtained from other members of his outfit was apparently sufficient for him to maintain his emotional control through a period of combat in Korea. At the present time, however, this is no longer present and he has now decided that he would be much better off in Cuba and has practically no motivation for return to duty.

During his hospitalization he has attended typing classes but claims that he has considerable difficulty in memorizing the keyboard, primarily because of his tension and nervousness. He has also expressed some guilt over having had VD overseas and some preoccupation and concern with the fact that he might still have VD. He was seen in the VD Clinic on 4 February 1953 and VD clearance was given and GU consultation suggested because of a chronic prostatitis. He was seen in the GU Clinic 11 Feb 1953 where no GU disease was found except for a very mild urethritis.

The patient attended approximately five group therapy sessions with little benefit other than perhaps achieving some intellectual understanding of his symptoms. During these sessions he constantly referred to himself and his own problems, showing little or no interest in those of other members of the group.

It is felt that further hospitalization or treatment will not be of material benefit to this patient and that because of his continued symptoms of tension and anxiety which at least partially are related to his combat experience in Korea, combined with his extremely poor motivation, dependency, and strong desire to return to Cuba, that he should be recommended to meet a Physical Evaluation Board at this time to consider separation from the service. It is felt that his underlying immature personality should be considered and that he should be separated from the service permanently, although it is quite possible that his illness may improve if separated and returned to his former environment in Cuba.

  
STEPHEN D. KAY, Major, MC  
Chief, Open NP Section

Exhibit G<sup>4</sup>

SECRET

U/S/C Attach to UFGS-2191 Dtd 2 Nov 62

IDENTITY SHEET

IDEN A

B

Adjutant General's Office

Central Office, Veterans  
Administration

SECRET