

Gun laws as a public health issue

By Timothy W. Wheeler
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Public health gun-control activists are getting palpitations over *District of Columbia v. Heller*, now before the U.S. Supreme Court. The only Second Amendment case to come before the court in nearly 70 years will soon settle the question of whether that amendment affirms an individual right to own guns.

It's not looking good for gun-control advocates. Analysts of the March 18 oral arguments now believe chances are good that the justices will strike down the District's gun ban as unconstitutional, even though they may leave plenty of room for reasonable regulation of firearms.

The *New England Journal of Medicine* was the great spin factory for public health gun prohibitionists in the 1990s. But history proved them wrong, as deadly gun accidents continued to decline to almost insignificant levels, and state right-to-carry laws didn't result in the bloodbaths they predicted. Now after a very long silence, the *NEJM* can't resist jumping into the political arena again, with a new article sounding the alarm that gun rights may actually be upheld.

The article's author, University of California Davis physician Garen Wintemute, starts out with the usual recitation of annual firearm-related deaths (30,694 in 2005, 17,002 of which were suicides). He laments that the 30 percent case fatality rate for hospital-treated firearm injuries is 18 times that for injuries to motorcyclists.

This is pure emotional manipulation, a specialty of public health do-gooders. Most firearm injuries are deliberately inflicted acts of lethal force. But motorcycle injuries are accidents, with no intent to kill. Comparing the two is inexcusable for a peer-reviewed author in a supposedly respectable medical journal.

Wintemute tries to mitigate the evidence supporting gun ownership for self-defense. He claims that Florida State University criminology professor Gary Kleck's widely quoted figure of 2.5 million annual defensive gun uses is too high by a factor of 10. But even if Wintemute were correct that the real number is 250,000, that's still a remarkable number of beatings, rapes and murders prevented every year. Furthermore, Kleck found that in 75 percent of defensive gun uses, the defender only had to display the gun, and not fire it, to end the attack. This shows that proper defensive gun use does indeed prevent injuries and deaths. But saving lives this way apparently gets no love from public health advocates.

Wintemute goes on to insist that the District of Columbia's 1976 gun ban subsequently reduced both homicides and suicides. He cites a 1991 *New England Journal of Medicine* study by Loftin, et. al. However, this study is so flawed that it should never have been published.

The amicus brief of the Claremont Institute and various scholars dissects this and other misleading research relied on by the District of Columbia to justify its unusually harsh gun ban. The Loftin study's major flaw is that instead of measuring the District's homicide and suicide rates before and after the ban started, it measured actual numbers. As it happens, the District's population declined from 809,000 to 622,000 from 1968 to 1987, the time frame of the study. This 23 percent population decrease would by itself bring about some decrease in deaths. But murder rates actually rose after the ban, a fact completely denied by this much-cited study.

Surprisingly, Wintemute struggles to disprove the remarkable success of right-to-carry concealed firearm laws.

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He asserts that states with more liberalized concealed firearm permit laws have higher rates of firearm homicide. But the values on the map he cites to support his case are, well, all over the map.

Vermont requires no permit to carry a concealed firearm, but it is in the lower end of gun homicide rates. The 34 states he rates highly likely to issue concealed-carry licenses represent a wide range of firearm homicide rates, failing to support his “more guns, more deaths” argument.

But this geographical analysis, weak as it is, misses the fundamental lesson of the great 20-year policy experiment of right-to-carry laws. If these laws are not sound public policy, why have so many states adopted them? Why have states as different as Minnesota and Texas come to the same conclusion that right-to-carry laws are a good thing? The compelling truth is that these laws have proved their worth by providing good citizens a way to defend themselves against violent criminals.

And that is the point that public health gun-banners cannot see. A Supreme Court decision broadening gun owners' rights, Wintemute writes, “could weaken the framework of ordered liberty that makes civil society possible.” But history tells us that such a decision would have just the opposite effect.

■ Wheeler, a physician, director of Doctors for Responsible Gun Ownership, a project of the Claremont Institute.

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