

1 SUPERIOR COURT OF THE STATE OF CALIFORNIA

2 FOR THE COUNTY OF LOS ANGELES

3 DEPARTMENT NO. 47

HON. ADOLPH ALEXANDER, JUDGE

4  
5 THE PEOPLE OF THE STATE OF CALIFORNIA,

6 Plaintiff,

7 -vs-

8 CHARLES WATSON,

9 Defendant.

6026

No. A-253,156

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12  
13 REPORTERS' DAILY TRANSCRIPT

14 Friday, September 17, 1971

15  
16 VOLUME 26

17 Pages 4148 - 4252

18  
19  
20  
21  
22 **APPEARANCES:**

23 See Volume 1.

24  
25 HAROLD E. COOK, C.S.R.  
26 CLAIR VAN VLECK, C.S.R.  
27 Official Reporters

28 COPY

I N D E X

DEFENDANT'S WITNESSES:

DIRECT CROSS REDIRECT RECROSS

Tweed, Andre R.

4148-SB 4166-K 4201-SB 4217-K

Markman, Ronald

4225-MK 4237-K 4250-MK 4251-K

No exhibits.

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1 LOS ANGELES, CALIFORNIA, FRIDAY, SEPTEMBER 17, 1971, 9:35 A.M.

2 --oOo--

3 THE COURT: Good morning.

4 THE JURORS: Good morning.

5 THE COURT: Gentlemen.

6 People against Watson; let the record show all  
7 jurors, counsel, defendant present.

8 Mr. Bubrick or Mr. Keith, you may proceed.

9 MR. BUBRICK: Dr. Tweed, please.

10 THE CLERK: Raise your right hand, please.

11 You do solemnly swear that the testimony you may  
12 give in the cause now pending before this court shall be the  
13 truth, the whole truth, and nothing but the truth, so help you  
14 God?

15 THE WITNESS: I do.

16  
17 ANDRE R. TWEED,

18 called as a witness by the defendant, testified as follows:

19 THE CLERK: Thank you; take the stand and be seated, and  
20 would you state and spell your name, please?

21 THE WITNESS: Andre R. Tweed; A-n-d-r-e; middle initial  
22 R, Tweed, T-w-e-e-d.

23 THE CLERK: Thank you.

24  
25 DIRECT EXAMINATION

26 BY MR. BUBRICK:

27 Q You are a medical doctor licensed to practice in  
28 the State of California, are you, Dr. Tweed?

1 A Yes, I am.

2 Q And in addition to being a medical doctor, do you  
3 have some sort of a specialty?

4 A My specialty is psychiatry since 1943.

5 Q Now, beginning with your medical education in 1936,  
6 Dr. Tweed, will you give us some of your training and experiences  
7 in the field of medicine and psychiatry?

8 A Well, after graduating from medical school, I  
9 received a rotating internship, after which I spent approxima-  
10 tely three years in the military service, during which time I  
11 received some initial psychiatric training at the school of  
12 military neuropsychiatry, Mason General Hospital, Brentwood,  
13 New York.

14 Upon release from the military service during World  
15 War II, I then did postgraduate work at the New York University  
16 Bellevue Hospital and a little later on some postgraduate work  
17 at Columbia University in New York City.

18 I spent a year as a psychiatrist at the LaFogg  
19 Clinic in New York City and a year as an alienist in mental  
20 hygiene at Queens General Hospital.

21 I then spent approximately two and a half years  
22 at Cleveland State Receiving Hospital in various psychiatric  
23 capacities.

24 Shortly after coming to California in 1950, I was  
25 recalled to the military service and served during the Korean  
26 conflict as chief of the closed wards at Valley Forge in  
27 Phoenixville, Pennsylvania.  
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1 I was certified a diplomate of the American Board  
2 of Psychiatry and Neurology in 1949.

3 I am a fellow of the American Psychiatric Associa-  
4 tion, a fellow of the Association for the Advancement of  
5 Psychotherapy, a fellow of the American Association for the  
6 Advancement of Science.

7 I am on the teaching staff at Loma Linda University  
8 with the rank of associate clinical professor of psychiatry.

9 I am a medical examiner for the Superior Court,  
10 the civil, the criminal, and juvenile departments.

11 In the past, since 1963, I have been receiving  
12 court appointments to examine all of those who are considered  
13 to have some drug problem, alleged narcotic drug addicts.  
14 That number now is upwards of 12,000.

15 I am in private practice. I am also a medical  
16 advisor to the Medical Program in Southern California.

17 Q Can you tell us how the referrals are made to you  
18 for the examination of the people in Department 95 of the  
19 General Hospital?

20 A Each one is a court appointment.

21 Q And you are asked to determine whether or not  
22 they are addicted to the use of narcotics or in imminent danger  
23 of becoming addicted?

24 A Yes.

25 Q All of those people that you have been talking  
26 about are people that are suspected of having a drug problem;  
27 is that correct?

28 A Correct.

1 Q And has that been your major field of endeavor  
2 while at the County General Hospital?

3 A Since 1963.

4 Q Have you ever lectured in the field of drugs or  
5 drug addiction?

6 A Well, I was on a seminar for the Superior Court  
7 judges up in Santa Barbara -- I believe the year was 1967 --  
8 on drugs, and I lectured to medical students and various others,  
9 civic groups.

10 Q Have there been involved in the people you have  
11 examined for drug abuse people with the problem involving use  
12 of LSD and amphetamines?

13 A In the last five years, this has been increasingly  
14 the case, so that I would say those who we see now most of them  
15 are mixed drug users rather than using pure drugs, that is to  
16 say, one drug.

17 Q As a result of your examination of these people  
18 with drug abuse problems, and your readings in the field of  
19 drug and drug abuse, have you become familiar with the drug  
20 LSD?

21 A Yes, I have.

22 Q And have you seen many people at Department 95  
23 with the problem involving use of LSD?

24 A Many people from Department 95 and from other  
25 departments of the Superior Court.

26 Q Is that also true with people who are suspected of  
27 using drugs such as the amphetamines, speed, or dextrine family?

28 A Yes.

1 Q So far as you know, Dr. Tweed, is there any LSD  
2 being manufactured by reputable manufacturers in the United  
3 States?

4 A I believe there is one company that has the right  
5 to do it.

6 Q For what purpose, if you know?

7 A Strictly for experimental purposes, strictly for  
8 medical research. I believe that company is the Sandoz  
9 Company, if I am not mistaken.

10 Q So far as you know, is LSD being prescribed, or  
11 may it be prescribed legally and lawfully by any physician?

12 A No.

13 Q Do you know what form it takes as it is used by  
14 people who are then using it illegally?

15 A It takes all kinds of forms. People have described  
16 it as being a tablet, various types of tablets, in a liquid  
17 form, soaked into various things such as sugar cubes or even  
18 soaked on letter paper and various things, various ways it is  
19 prepared.

20 Q Can you give us some idea of the dosage as you  
21 found it through your experience that is required to have any  
22 effect on its user?

23 A Well, very, very small doses, very, very tiny  
24 doses have an effect. It depends upon the individual. Some  
25 individuals would take larger amounts and others would take a  
26 very tiny amount to throw them over into some type of illness  
27 of a mental nature.

28 Q When you say small dose, can you give us some idea?

1 A In micrograms.

2 Q What is a microgram?

3 A A thousandths of a gram.

4 Q And there are 28 grams to the ounce; is that  
5 correct?

6 A Approximately.

7 Q Does the drug LSD affect all people the same?

8 A No.

9 Q Which people are more susceptible to the effects  
10 of LSD?

11 A People who are emotionally unstable and who have  
12 underlying emotional problems much more readily are affected  
13 by the drug.

14 Q Can you give us some of the effects that the drug  
15 has on its user?

16 A Some of the effects would be their distortion in  
17 perception. The individual sees things that are ordinarily  
18 stationary, that are moving, going into various forms.

19 There is different color sensations and things of  
20 that nature, distortions, peculiar ideas, bizarre behavior,  
21 compulsive thoughts, sometimes of a self-destructive nature,  
22 sometimes of an aggressive nature.

23 Hallucinations, that is to say, an individual  
24 might see things that do not exist or hear voices of things  
25 that no one else would hear, if he were in the same environ-  
26 ment.

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1 Q Does the personality structure of the user have  
2 anything to do with the effect the drug will have on him?

3 A Yes, the personality of the individual at all  
4 times is the thing that determines just how any type of mental  
5 illness manifestation will show itself; so that it is the  
6 predrug use personality that the drug acts upon, and then  
7 causes the individual to behave in that certain manner.

8 Q Will these, then, these preexisting personality  
9 difficulties, accentuate the effect of a drug?

10 A They will accentuate it and in most instances will  
11 do that, yes.

12 Q What would you consider the effect of a prolonged  
13 use of the drug?

14 A The effect of the prolonged use of the drug appears  
15 to have some disintegrating effect on the individual's  
16 personality.

17 Say, for instance, an individual might use it  
18 once and have what we call a bad trip and hallucinate and do  
19 various things and have an acute psychotic episode; and then  
20 it clears up from that.

21 If he keeps taking the drug, there is a very good  
22 likelihood that he might not clear up from these, that there  
23 would be residual signs which would be indicative, that we  
24 would determine clinically and say, well, this individual  
25 appears to have organic symptoms, that he appears to be  
26 functioning in a way in which there is an organic disturbance  
27 of his brain.

28 However, the main thing, if you continue to take

these drugs, as I feel, is the prolonged effects on the individual which takes some time before he recovers and the drug has not been in use long enough to know whether or not there will be what we call permanent changes. I suspect there will be.

Q Does the social setting and the peer group within which the drug is used have any significance?

A Yes, the social setting is a very important thing in individuals who use these drugs. It is a sort of -- if the individuals believe a certain way or there is someone who is more or less in a leadership role and has certain ideas -- I like to think of it as the individuals being like an A-frame, they hold each other up, they cause these feelings to be stronger, whatever they are, and if you separate the A-frame it falls to pieces.

Q Can the leader, in your opinion, with the aid of the drug, instill new beliefs in the people who are using and listening?

A In my opinion, he can, yes.

Q Does that somehow assist in the restructuring of the personality?

A Yes, if that individual happens to be a weak person.

Q Have you, personally, Dr. Tweed, ever been involved or treated a person under the effects of LSD?

A Yes, I have treated many people in the hospital, young people, from the effects of LSD, privately.

Q Have you ever worked with anybody who committed

1 any crime under the effects of LSD?

2 A Yes, I have.

3 Q What was that?

4 A I did examine someone for court on a court appoint-  
5 ment who did, under the effects of LSD, killed his mother and  
6 his grandmother.

7 Q Were you able to discern any reason for those  
8 homicides other than the use of LSD?

9 A It was the mental illness that was caused by the  
10 effects of the LSD that he was at that particular time having  
11 delusions and hallucinations, and he was responding to this  
12 type of setting.

13 MR. BUGLIOSI: Your Honor, I think I will make a motion  
14 to strike this on the grounds it is a conclusion of this wit-  
15 ness whether or not this person was under the influence at the  
16 time of the killings.

17 I don't think he is in a position to make that  
18 statement unless he was there at the time and he examined the  
19 person.

20 We don't know the facts of that case; there may  
21 have been many, many other psychiatrists who testified that the  
22 man was not under the influence.

23 THE COURT: That is true, but as an expert, he is  
24 permitted to give his conclusions, Mr. Bugliosi.

25 Q BY MR. BUBRICK: You have used the expression  
26 "hallucination," Dr. Tweed; can you define that for us, please?

27 A Yes, a hallucination is a false sensory impression  
28 that is experienced by the individual suffering it, and anyone

1 else in that area would not, or under similar circumstances.

2 For instance, a person -- two people are together,  
3 the one who is hallucinating is hearing voices of God telling  
4 him to do certain things or guiding his actions. The other  
5 person next to him does not hear the same voice that the other  
6 person hears.

7 The individual might feel that certain gases are  
8 being blown into a room; no one else in the room would smell  
9 these gases.

10 He might feel peculiar body sensations and say  
11 that he attributes these to certain things happening in the  
12 room, and there is no physical evidence that anything is  
13 happening to the person.

14 Any one of the five senses may be involved; the  
15 most common ones are auditory and visual.

16 Q Now, you have also used the term "delusion."

17 A Yes.

18 Q Can you define that for us, please, Dr. Tweed?

19 A A delusion is a false belief which is not in keep-  
20 ing with the individual's social and cultural background and  
21 is not amenable to logic.

22 I might explain that by saying that here we have  
23 two people, one is a college graduate who comes from a back-  
24 ground whereby he has had all the educational opportunities  
25 and everything is presented to him.

26 Another one comes from a rural district where  
27 they believe in certain things happening to them, such as that  
28 people could put a spell on them, could do certain other things

1 to them.

2 Well, if they both are examined for mental illness  
3 and the individual from the rural background says, "Yes, the  
4 man two miles down in the farm there came up and he sprinkled  
5 things around the door and he performed certain acts and that  
6 is why my mother was sick and we had to go to somebody to have  
7 this spell removed."

8 The college individual, with the other background,  
9 he says, "Yes, my neighbor next door has been sprinkling water  
10 on my doorstep; he has been doing certain things, he has been  
11 performing certain functions and as a result, I have gotten  
12 sick, I have a bad stomach."

13 Well, the one from the rural district would not be  
14 mentally ill, because that is part of his cultural background.  
15 The one with the university education and all the opportunities  
16 would be mentally ill, because that is not part of his cultural  
17 background.

18 Q Is impaired judgment one of the observable effects  
19 of LSD, in your opinion, Dr. Tweed?

20 A Yes, it is.

21 Q Would, in your opinion, the LSD user with impaired  
22 judgment be more or less responsible for his own conduct?

23 MR. BUGLIOSI: This calls for a conclusion.

24 THE COURT: May I have that question again, please?

25 (Record read.)

26 THE COURT: Sustained.

BY MR. BUBRICK:

1 Q Are people under the influence of drugs more  
2 suggestible than people otherwise?

3 A Yes.

4 Q Is this element of suggestibility one of the  
5 apparent effects of the drug, in your opinion?

6 A Yes.

7 Q Can anybody under the influence of drugs, in  
8 your opinion, reject beliefs that they had once held and adopt  
9 new beliefs?

10 A Yes.

11 Q And can you tell us in your opinion where the  
12 source of the new beliefs might come from?

13 A They might come from any strong individual who has  
14 a significant emotional effect on the individual, that is to  
15 say, someone who might be a very strong guiding influence on  
16 the individual.

17 Q Have you ever heard the term folie a deux?

18 A Yes.

19 Q What does that involve, Doctor?

20 A Well, that involves double psychosis. That is  
21 two people, usually of the same family, very closely related,  
22 one the more dominant individual has the original illness and  
23 then the other person, who is usually of a weaker nature,  
24 assumes the same type of illness, believes the same things  
25 that the other individual believes, such as he develops the  
26 same hallucinations.

27 He develops the same delusional structure and  
28 it is a very interesting type of thing to see.

1 Q Have you ever heard of the expression in circles  
2 outside of psychiatry?

3 A Well, I don't know whether I could really answer  
4 that question because I have been in psychiatric circles so  
5 long that I never heard of it before, so I don't know whether --  
6 I don't think it is used outside of psychiatric circles.

7 Q And in your opinion, Doctor, does it ever refer to  
8 people who are not mentally ill in psychiatric circles?

9 A No. That in itself is double psychosis. It would  
10 be a good definition of two closely related people.

11 Q Is this psychosis transmitted, in your opinion,  
12 any easier from one to the other with the assistance of LSD?

13 A It would under any type of drug of the nature  
14 whereby it lowers the ability of the individual to think for  
15 himself.

16 Q Did you ever examine Mr. Watson, Dr. Tweed?

17 A Yes, I did.

18 Q And when did you conduct that examination?

19 A I examined Mr. Watson on three separate occasions:  
20 The 4th of June, the 6th of June and the 14th of June for a  
21 total of eight hours plus.

22 Q And as a result of the examinations, Dr. Tweed,  
23 do you have an opinion as to whether or not Mr. Watson was  
24 mentally ill by medical standards?

25 MR. KAY: That is ambiguous as to time.

26 THE COURT: I beg your pardon?

27 MR. KAY: It is ambiguous as to the time. Could we be  
28 more specific as to the time, please?



1 Q BY MR. BUBRICK: As a result of your examination  
2 did you determine that he was mentally ill?

3 THE COURT: I think that will be followed by another  
4 question.

5 THE WITNESS: I felt at the particular time that he was  
6 suffering from a depression and showed evidences of what I  
7 would consider organic brain changes.

8 Q BY MR. BUBRICK: And this opinion you reached as a  
9 result of the examination at the time you made the examination?

10 A At the time I made the examination.

11 Q Did Mr. Watson describe to you his conduct on the  
12 nights of August 8th, 9th and 10th, the days of the 8th, 9th,  
13 and 10th?

14 A Yes, he did.

15 Q And as a result of your examination --

16 THE COURT: Just a minute, Mr. Bubrick. The examinations  
17 he conducted was on June 4th, 6th and 14th of '71. You are  
18 now asking about the events of August 8th, 9th and 10th of  
19 '69?

20 MR. BUBRICK: Of '69, yes, what we might refer to as  
21 the events involved in the Tate-La Bianca murders.

22 THE WITNESS: Yes.

23 Q BY MR. BUBRICK: And with respect to those events  
24 now, the Tate-La Bianca murders, in your opinion, did Mr.  
25 Watson at the time of the commission of those events have the  
26 mental capacity to meaningfully and maturely reflect upon the  
27 gravity of his contemplated acts and if so to what extent  
28 could he so reflect?



1           A       It was my opinion that he could not meaningfully  
2 reflect upon the gravity of his contemplated acts.

3           Q       Do you have an opinion as to whether or not Mr.  
4 Watson could at the time of the Tate-La Bianca murders pre-  
5 meditate?

6           A       I do have an opinion.

7           Q       What is that?

8           A       That he did not have the ability to premeditate.

9           Q       And how about whether or not he could deliberate?

10          A       I do have an opinion.

11          Q       And what is that?

12          A       That he did not have the mental capacity to  
13 deliberate.

14          Q       And did you have an opinion as to whether or not  
15 he could harbor malice at the times of the commissions of those  
16 offenses?

17          A       Yes, I did.

18          Q       What was that opinion?

19          A       That he did not have the mental capacity to harbor  
20 malice.

21          Q       Doctor, did you read any reports, or other report,  
22 or gather as the basis of information reports or documents  
23 which you had under your control or had access to?

24          A       Yes, I did.

25          Q       Can you tell us what you had access to at the time?

26          A       Well, at the time I had access to some examinations  
27 that had been done by some doctors at UCLI.

28                   I had access to examinations and reports of doctors

1 who had examined him prior to his going to the Atascadero  
2 State Hospital.

3 They had available to me the reports from the  
4 Atascadero State Hospital.

5 Q Did you read or consider any of those reports that  
6 you have just referred to before making your diagnosis of Mr.  
7 Watson?

8 A No.

9 Q I take it, it was after you came to an independent  
10 diagnosis of Mr. Watson and reached your independent conclusion,  
11 that you read the other material?

12 A I have always done that.

13 Q Now, you had some involvement in the original  
14 trial, that is the trial we might refer to as the Manson trial,  
15 where he and some young ladies were defendants; is that right?

16 A Yes, I did.

17 Q And as a result of your prior experience in the  
18 Manson trial, did you have access to the testimony of Linda  
19 Kasabian?

20 A Yes. I remember Mr. Kanarek gave me 46 volumes  
21 to review.

22 Q Of Linda Kasabian's testimony?

23 A Yes.

24 Q And you did that in connection with the original  
25 trial; is that correct?

26 A Yes.

27 Q Have you reread the 46 volumes?

28 A No.

1 Q For this proceeding?

2 A No.

3 Q I take it, you had in mind Linda Kasabian's testi-  
4 mony in the original trial at the time you wrote your report  
5 in connection with Mr. Watson in these proceedings?

6 A Yes. I feel I was sufficiently acquainted with  
7 that from that other trial.

8 Q Did you, Dr. Tweed, in the other trial ever have  
9 a chance to talk to Linda Kasabian personally?

10 A No.

11 Q Did you file any documentation with respect to  
12 Linda Kasabian in the other trial? You personally?

13 MR. BUGLIOSI: Irrelevant, your Honor.

14 THE COURT: Yes or no. We won't go into it.

15 Q BY MR. BUBRICK: Just answer yes or no. That is  
16 all.

17 A Yes.

18 MR. BUBRICK: I think we should approach the bench,  
19 your Honor.

20 (The following proceedings were had at the  
21 bench, outside the hearing of the jury:)

22 MR. BUBRICK: One of the issues that has been raised  
23 throughout the examination or the cross-examination of the  
24 defense doctors has been the fact that nobody has ever talked  
25 to Linda Kasabian or perhaps bothered to read her testimony  
26 as much as they would have liked to.

27 I have reason to believe that Dr. Tweed would  
28 testify that he personally filed an affidavit in the last

1 trial recommending that Linda Kasabian be examined by a  
2 psychiatrist, that an order was prepared and presented to Judge  
3 Older and that that order was not issued.

4 Now, it is my contention that if the district  
5 attorney had been willing to submit Linda Kasabian to examina-  
6 tion by a psychiatrist, that that could have been accomplished  
7 very easily with or without a court's order directing that.

8 MR. BUGLIOSI: Your Honor --

9 THE COURT: I don't think that that is material in this  
10 case. Had he examined her and expressed an opinion as to her  
11 competency or incompetency, that might be admissible, but the  
12 fact that he offered to do it and it was not done, I don't  
13 think it would be helpful.

14 MR. BUBRICK: It was not done because the People would  
15 not permit it to be done.

16 MR. BUGLIOSI: No, it was up to Judge Older to make that  
17 decision, and he ruled that there was no need under the  
18 Ballard case, Ballard vs. Superior Court, 64 Cal. 2d, I think  
19 -- there was no need in his opinion for Linda to be examined.  
20 It was strictly up to Judge Older. It was a determination he  
21 made under Ballard against the Superior Court.

22 THE COURT: I am going to sustain the objection.

23 (The following proceedings were had in open  
24 court, in the presence of the jury:)

25 MR. BUBRICK: I have nothing further.

26

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## CROSS-EXAMINATION

BY MR. KAY:

Q Good morning, Dr. Tweed.

A Good morning -- good afternoon.

Q Let me get my notes organized here.

We had a phone conversation last night, didn't we?

A Yes.

Q About a quarter of 3:00, and you were nice enough to talk to me for about half an hour; is that right?

A Yes, that's correct.

Q Now, you were in your office at the time; is that correct?

A Yes.

Q Now, Dr. Tweed, in this case you were appointed by Judge Lucas to examine Mr. Watson; is that correct?

A Yes, I was.

Q And you were also, in your appointment by Judge Lucas, you were to give Mr. Bubrick, who was Mr. Watson's sole attorney at the time -- Mr. Keith wasn't in the case at that time -- that you were appointed to give Mr. Bubrick a confidential report on your examination of Mr. Watson; is that correct --

A Yes.

Q -- and I take it you did so?

A Yes.

Q And your report is addressed to "Sam Bubrick, Esq."; is that right?

A Correct.

1 Q Now, Doctor, approximately how much time elapsed  
2 between the time of the murders and the time of your examina-  
3 tion of Mr. Watson?

4 A Well, the murders, as I gather, occurred in 1969 --

5 Q August?

6 A In August of 1969; and I examined him in June of  
7 1971, so I'd say approximately 23 months; 22, 23.

8 Q Now, don't you feel that the longer the time period  
9 between the time of the murders and the time of your examination,  
10 just -- and I'm not criticizing you at all -- but don't you  
11 feel generally that this makes it harder to formulate an  
12 opinion about a defendant's state of mind at the time of the  
13 murders, some almost two years earlier?

14 A In some instances that would be true, but I think  
15 in this, because of the very special nature of this and the  
16 tremendous amount of public interest in it and the tremendous  
17 amount of bombardment of the individuals involved in it with  
18 it, that it wouldn't really make too much difference.

19 Q What do you mean by the tremendous bombardment of  
20 the individuals?

21 A Everything is "Manson, Manson, Manson"; everything  
22 in the newspapers, so everybody who has been involved in it,  
23 has been aware of what has been going on so that the individual  
24 would have no time to really forget it.

25 Q And I take it that you have read a lot of the  
26 publicity about the Tate-La Bianca trials, both the first trial  
27 and this second trial?

28 A Yes.

1 Q And would it be fair to state that from this  
2 publicity, even, say, before you examined Patricia Krenwinkel  
3 at the last trial --

4 MR. BUBRICK: If your Honor please, I am going to object  
5 to that; it assumes a fact not in evidence.

6 THE COURT: Sustained.

7 Q BY MR. KAY: Well, Dr. Tweed, you did examine  
8 Patricia Krenwinkel at the last trial, did you not?

9 A Yes.

10 Q And you examined her what, February 21?

11 A I don't know the exact date, but it was in February  
12 sometime.

13 Q That even before you examined Patricia Krenwinkel,  
14 you had formulated some sort of an opinion about the mental  
15 condition of the people involved in the murders?

16 A I think no more than anyone else would say, "God,  
17 people who do something like that, they must be crazy," in  
18 the sense that the average, normal person just wouldn't do  
19 that.

20 Q Right; so you did have this opinion?

21 A Well, I'm putting it in the context of everyone  
22 else; I'm sure everyone else must have had something of that  
23 nature, I mean, but no --

24 Q Including yourself?

25 A -- but nothing definite, no.

26 Q Now, when you examined Patricia Krenwinkel, I  
27 believe you testified -- you did testify in the penalty phase  
28 of the last trial --



1 MR. BUBRICK: Your Honor, I am going to object to any  
2 reference to the examination of Patricia Krenwinkel in this  
3 proceeding as being outside of the scope of the direct.

4 MR. KAY: May we approach the bench?

5 THE COURT: Yes.

6 (The following proceedings were had at the  
7 bench, out of the hearing of the jury:)

8 MR. KAY: Your Honor, I believe that in all fairness  
9 that his examination of Patricia Krenwinkel and the informa-  
10 tion that -- well, I am not going into any of the information  
11 he got from her, but I feel that this is quite relevant because  
12 this is a basis of his source of information --

13 THE COURT: What is relevant? What is relevant?

14 MR. KAY: Her state of mind; in other words, his state  
15 of mind is important now and we have to find out every element  
16 that went into the makeup of his state of mind; in other words,  
17 the mental state that he felt other defendants have.

18 Now we have had several psychiatrists in this court-  
19 room, defense psychiatrists that have testified about the  
20 state of mind of other defendants --

21 MR. BUGLIOSI: Manson, for example; Mr. Keith asked --

22 MR. KEITH: But that was relevant to the issue of the  
23 folie a deux where Manson was out of his mind or not --

24 MR. BUGLIOSI: Krenwinkel is part of this family he has  
25 testified he examined --

26 MR. KEITH: I don't think his opinion of Patricia  
27 Krenwinkel's mental state is in issue here.

28 THE COURT: No, the real damage is this, that apparently



1 he testified for Patricia Krenwinkel; apparently the jury  
2 did not accept his opinion, see.

3 If he is permitted to testify that he rendered an  
4 opinion on Krenwinkel and had an opinion, this jury knows that  
5 the last jury did not accept his opinion. The danger is that  
6 this jury may feel compelled to reject his opinion, too,  
7 because of that.

8 MR. KAY: But, you see, an important factor, Judge, is  
9 that he and these other psychiatrists are making Watson out  
10 to be so bad, but we want to show that his opinion -- the  
11 people with him had the same mental state; his opinion of  
12 Krenwinkel was that she was psychotic and schizophrenic.

13 MR. BUGLIOSI: But Watson is the only one we are con-  
14 cerned with; Watson's, not the frame of mind of the co-  
15 conspirators.

16 MR. KAY: We are concerned with the state of mind of the  
17 family, particularly; Watson can't be looked at, your Honor,  
18 as just an abstract, because he was interacting with these  
19 other people. I think it is relevant, what kind of individuals  
20 they were.

21 THE COURT: You want to bring out from Dr. Tweed exactly  
22 what?

23 MR. KAY: I want to bring out only that he testified  
24 after examining Patricia Krenwinkel that he felt that she was  
25 schizophrenic and she had -- showed residual effects of being  
26 psychotic, that's all.

27 I won't ask him if he testified to that or anything;  
28 I want to ask him if this is --

1 MR. BUBRICK: That has absolutely nothing to do with  
2 an opinion about Watson.

3 THE COURT: No, Mr. Bugliosi asked one psychiatrist --  
4 he did ask about the others and there was no objection, and  
5 the doctor answered.

6 MR. BUGLIOSI: Right.

7 THE COURT: I don't recall which one it was, but there  
8 was one of them.

9 MR. BUGLIOSI: Right; and I think the defense has done  
10 so, also, with respect to Mr. Manson.

11 THE COURT: With relation to this folie a deux.

12 MR. BUBRICK: Right.

13 THE COURT: Yes, I am going to sustain the objection,  
14 Steve.

15 MR. KAY: Judge, may I ask the doctor if I can't get  
16 into his opinion, if, in fact, he testified for Patricia  
17 Krenwinkel in the penalty phase, without getting into --

18 MR. BUBRICK: Absolutely not.

19 THE COURT: How would that be material?

20 Let's assume that he testified in a thousand other  
21 cases and in every other case the jury said, "This guy is  
22 crazy," they wouldn't accept his opinion. Does that have any  
23 probative value in this case?

24 MR. KAY: Well, to me, here's a guy that is getting  
25 involved with the family members, all the time testifying on  
26 their behalf; I think it is something that --

27 THE COURT: Well, he has testified in thousands of  
28 cases.

1 MR. KAY: I realize that --

2 THE COURT: So you can't say he's getting involved in  
3 the family. He's getting involved because he was appointed to  
4 get involved.

5 MR. BUGLIOSI: He has testified that he read Linda  
6 Kasabian's testimony --

7 THE COURT: He testified he read her testimony; but he  
8 is giving no opinion as to what he thought about her testimony --

9 MR. BUGLIOSI: True, true.

10 THE COURT: No, I am going to sustain the objection.

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5A-1

(The following proceedings were had in open court, within the presence of the jury:)

Q BY MR. KAY: Doctor, getting on to another subject, you state in your report, in substance, that "Watson felt estranged and alienated before he joined the family," referring to the Manson family, "but that after he joined the family that he felt for the first time in his life that he actually belonged."

Do you remember that, putting that in your report?

A Yes.

THE COURT: Do you have a page number?

THE WITNESS: Yes, I have it.

Q BY MR. KAY: Now, by putting that in your report, are you suggesting that while Mr. Watson was in Texas, although he appeared to get along in school and in society and with his parents, that actually he was very unhappy?

A A developing, gradually, gradually increasing unhappiness with the state of his affairs.

Q Internally he was a very unhappy person?

A Yes.

Q And is this why you feel he left Texas, to come to California?

A Yes.

Q And in your report you also state that Watson, Mr. Watson told you that, "After joining the family he began to feel more and more like a whole person."

Is that true, did he tell you that?

A What page is that on?

1 Q It is on Page 2 -- well, it would be the third  
2 paragraph down, starts out, "He was showered with affection  
3 by the girls of the group and began to feel more and more like  
4 a whole person."

5 A Yes, I see it.

6 Q He told you that; is that right?

7 A Yes, he did.

8 Q And did he also tell you that when he joined the  
9 family that he looked up to Manson with admiration?

10 A Yes.

11 Q Now, other than receiving information from Mr.  
12 Watson about his background and history, did you verify this  
13 with any other source, like talking to his parents or talking  
14 to other members of the Manson family, or anybody like that?

15 A No.

16 Q On Page 3 you state that Mr. Watson told you that  
17 "After he left the family in December of 1968 that Manson  
18 caught up with him and convinced him to rejoin the family."

19 I take it that since you say this, that he didn't  
20 tell you that he, Mr. Watson, was the one that called back to  
21 Spain Ranch and got in contact with the family to return; is  
22 that true, he didn't tell you that, did he?

23 A No.

24 Q At the time of your examination, did Mr. Watson  
25 realize who you were?

26 A Yes, he knew who I was.

27 Q And did he realize that there was a good possibility  
28 that you might be testifying in court as to his mental state

1 at the time of the murders?

2 A I don't know; I didn't ask him. He may have.

3 Q Was that your feeling, that he recognized that?

4 A He recognized that I was there to examine him at  
5 the request of his attorney and submit a report to his attor-  
6 ney. I don't know what his attorney had told him as to whether  
7 or not I would testify, so I would be assuming something that  
8 I really don't know.

9 Q Now, at the time of your examination did he, mean-  
10 ing Mr. Watson, did he realize that he would shortly be on  
11 trial for seven counts of murder for which his co-defendants  
12 had already been convicted and sentenced to death?

13 A Yes, I'm sure he was realizing that at that time.

14 Q Do you feel that at the time of your examination  
15 that he realized that his defense was going to be based on his  
16 mental state of mind at the time of the murders?

17 MR. BUBRICK: Object to that, if your Honor please. He  
18 wouldn't know. How can -- that calls for a conclusion of the  
19 witness.

20 MR. KAY: I am asking if he knows.

21 THE COURT: If the doctor knows, he can answer that.

22 THE WITNESS: No, I don't know.

23 Q BY MR. KAY: You didn't talk to him about that,  
24 or he didn't talk to you?

25 A No, I didn't talk to him about the penalty. I  
26 was concerned just as a medical man with the individual's  
27 emotional background and information in that area.

28 Q And I take it that basically you concluded that

1 at the time of the murders that he had diminished mental  
2 capacity; is that correct?

3 A Yes.

4 Q Now, in your report, Doctor, I notice that you  
5 don't include anything that he told you about the two nights  
6 of murder, or the Tate-La Bianca murders.

7 Was there any reason for that?

8 A Well, the only reason for that was that I had  
9 taped everything that he said to me and I made a separate, have  
10 a separate accounting of everything he said to me and how he  
11 said it, and submitted that.

12 My report is merely a summary, a summarization of  
13 my impressions of everything that he told me, and my con-  
14 clusions.

6f.

6R-1

1 Q Do you have a copy of the statement that he gave  
2 to you about the murders?

3 A I have a copy of the tapes I made.

4 Q May I see that?

5 A You may.

6 MR. KAY: May I have just a moment, your Honor.

7 Would this be a good time to take the morning  
8 recess? I haven't had an opportunity to see this before. I  
9 need five minutes or something.

10 THE COURT: If it will help you.

11 MR. KAY: Thank you. I appreciate that.

12 THE COURT: All right. Ladies and gentlemen, we will  
13 recess at this time. Again, please heed the admonition here-  
14 tofore given.

15 I know you are tired of hearing me say that but  
16 the law requires that I do.

17 (Recess.)

18 THE COURT: People against Watson.

19 Let the record show all jurors are present; all  
20 counsel and the defendant are present. You may proceed, Mr.  
21 Kay.

22 Q BY MR. KAY: Dr. Tweed, in formulating your opinion  
23 as to Mr. Watson's mental condition, did you take into con-  
24 sideration everything you knew about the Manson family and the  
25 other defendants in the Tate-La Bianca trial?

26 A In forming my opinion of his mental condition?

27 Q Yes.

28 A Not of his mental condition. My conclusions came



1 strictly from my examination of Mr. Watson, of his mental  
2 condition.

3 Q Did you take the Manson family and the other  
4 defendants into consideration in forming any opinion about  
5 Mr. Watson and if so, what?

6 MR. BUBRICK: If your Honor please, I think that is  
7 ambiguous and irrelevant.

8 THE COURT: Sustained.  
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R-1

1 Q BY MR. KAY: Dr. Tweed, do you remember at the  
2 recess talking to Mr. Bugliosi and myself up at the witness  
3 stand?

4 A Yes.

5 Q And didn't you tell us, basically, that you did  
6 take all of this into consideration in forming your opinion  
7 about Mr. Watson?

8 A My opinion of the case; but not of his mental  
9 condition. His mental condition was strictly on examination  
10 by me, strictly his mental condition is something that you  
11 can only determine a person's mental condition from the man,  
12 himself, not from any outside information.

13 Q Well, didn't you take into consideration all these  
14 other factors?

15 A Those factors were taken into consideration as  
16 historic information, but had nothing to do, actually, with  
17 my determination of his mental condition, as such.

18 Q So, in other words, if you didn't know anything  
19 about the Manson family or Mr. Manson, you could still have  
20 formulated an opinion of Mr. Watson's mental condition?

21 A Yes.

22 MR. BUBRICK: I think that is conjectural.

23 Q BY MR. KAY: Now, Doctor, you state on Page 4 of  
24 your report, I believe, that throughout the examination --  
25 referring to your examination of Mr. Watson -- "He talked  
26 slowly and showed some difficulty in keeping a continuous,  
27 relevant stream of thought. He frequently forgot what he was  
28 saying; he tended to perseverate in his speech. That is to

1 say, he frequently repeated himself."

2 Is that correct, did you put that in your report?

3 A Yes, I did.

4 Q Is that true; is that how he acted during your  
5 interview?

6 A At the time I examined him, yes.

7 Q You state on Page 4, also, that he, referring to  
8 Mr. Watson, "Had difficulty in performing simple arithmetic  
9 problems and gave the clinical impression of having brain  
10 damage as a result."

11 What do you mean by that statement?

12 A Well, if a person has had three years of college  
13 and you ask him simple arithmetic problems such as, "What  
14 is seven times seven and eleven times eleven and six times  
15 nine," and he is slow in responding and doesn't give you the  
16 correct answers at first, in all of them, why, this is an  
17 indication, certainly, of some disturbance; and usually on an  
18 organic level, unless the person is so confused at that time  
19 from an active psychosis of a functional nature.

20 Q Well, Doctor, wouldn't it be fair to state that  
21 you don't know for sure whether or not he was having problems  
22 with these simple arithmetic problems or whether he was pre-  
23 tending to have problems?

24 You don't know that for sure; you suspected, I  
25 take it, but you don't know that for sure, do you?

26 A I think that I have been in this long enough to  
27 be able to determine whether something is real or not real;  
28 and on the basis of that, I don't know for sure that Hitler

1 caused certain things to happen in Germany, but I believe it.  
2 I wasn't there, but I certainly believe they happened, from  
3 the end results -- and the end results are the way in which  
4 he handled the whole examination, and I certainly evaluated  
5 from that point of view.

6 Q How did you tell when a person -- when you say,  
7 "multiple 7 times 7," and a person gives you say, an answer  
8 of 53 or something, which, of course, is incorrect, how can  
9 you tell whether or not that person really doesn't know how  
10 to multiply 7 times 7 or is just giving you the answer of 53  
11 because he thinks that might be what you want to hear, or what  
12 he wants you to hear?

13 A Because there are many ways in which an individual  
14 will handle himself.

15 If throughout the examination there is evidence  
16 that he is going along fine and that he just wants to confuse  
17 the issue by giving you things like that, you can evaluate that  
18 and you think in terms of some other syndrome; but it is not  
19 difficult to determine that.

20 If a person is confused, as he talks to you for  
21 6, 8 hours, and you assume that he is trying to fake you out  
22 in that one little thing like that, no one can keep up a pose  
23 for that length of time.

8R-1

1 Q Did you get the impression during your examination  
2 that Mr. Watson was confused?

3 A Yes, I did get the impression that he was quite  
4 confused.

5 Q Is there any doubt in your mind that Mr. Watson  
6 fully and completely accepted Mr. Manson's philosophy and  
7 philosophy of the Manson family?

8 A At the time he was with him, I have no doubt that  
9 he completely accepted it, because when I examined him, he  
10 still had doubts. He said, "I believe sometimes what he taught  
11 me and sometimes I believe what my parents have taught me."

12 Q When you say "he," that is Manson?

13 A No, Watson.

14 Q When you say "he taught me," you mean that Manson  
15 taught Watson?

16 A Yes, what he had observed from Manson. What  
17 Watson observed from Manson. He said, "Sometimes it is very  
18 confusing to me now that I am here in jail away from my family,  
19 I believe what he said, what he had taught me and sometimes  
20 I believe what my parents have taught me and it is very con-  
21 fusing to me."

22 Q On Page 7 of your report, Doctor, you indicate  
23 that Watson appeared to be Manson's favorite among all of the  
24 men in the family; is that correct?

25 Did you put that in your report on Page 7?

26 THE COURT: Do you have the paragraph?

27 THE WITNESS: Yes. I have that. It is the third para-  
28 graph.

1 Q BY MR. KAY: Doctor, did you arrive at this con-  
2 clusion as a result of things that Mr. Watson told you?

3 A Yes, I did.

4 Q Doctor, you indicate in your conclusions that at  
5 the time of the murders that Mr. Watson heard the voice of  
6 Manson within him computing his every action.

7 Do you remember putting that in the report? I  
8 believe that is probably on Page 7 also?

9 A Yes.

10 Q Doctor, in all the years that you have been  
11 practicing the art of psychiatry, how many subjects have you had  
12 who committed a crime by having someone else computing their  
13 every action?

14 MR. SUBRICK: That would be immaterial, your Honor.

15 THE COURT: Overruled.

16 THE WITNESS: I haven't had any.

17 Q BY MR. KAY: And I take it that the only way that  
18 you arrive at this conclusion is from what Mr. Watson told you?

19 A Comparing that with historical events. I recall  
20 speaking with you yesterday over the telephone telling you how  
21 I became quite interested in Rasputin, the history of Rasputin,  
22 after I became interested, involved in the Manson case.

23 I likened Manson to being Rasputin and how he was  
24 able to, without the use of drugs, have these people -- and  
25 he was the cause of the fall of the Romanoffs of Russia, to  
26 become a communist state, because he had such terrific control  
27 over the Czar, the Czarina and the young Czarevitch and that  
28 it was this powerful control that even ambassadors came there

1 hoping to destroy him and not believing him, and going away  
2 as believers.

3 Every woman who came under his spell fell for him  
4 and he was a rough country bumpkin.

5 Q Doctor, you state in your report on Page 7, para-  
6 graph 5, that -- apparently, this is in regards to Mr. Watson  
7 murdering the victims, "He --" meaning Tex -- "actually believed  
8 at the time that they were really imaginary people."

9 How do you know what he actually believed? You  
10 use the words "that he actually believed at the time." How  
11 do you know what he actually believed? Just what he told you;  
12 isn't that right?

13 A Yes.

14 Q Doctor, would you characterize the actions of Mr.  
15 Watson after he came back to Los Angeles in custody in September  
16 1970, that Mr. Watson was suffering from a severe psychotic  
17 depression and regression?

18 Is that how you would characterize his mental state  
19 at the time he came back here from Texas?

20 A I would characterize that only on the basis of the  
21 history that I obtained by reading the reports of the doctors  
22 who recommended his commitment to Atascadero State Hospital.

23 Now, what his condition was immediately upon return-  
24 ing to Los Angeles from Texas, I do not know, but I know what  
25 his condition was described to be and I believe it, from  
26 competent psychiatric examination, his condition grew to such  
27 that he was recommended to go to Atascadero.

28 Q In your report on Page 8, you state, "After he came

1 back to Los Angeles in custody, that this was followed by a  
2 severe psychotic depression and regression which occurred when  
3 he was returned to Los Angeles and subsequently hospitalized."

4 So at least sometime after he came back --

5 A Yes.

6 Q -- to Los Angeles, you would say that he had a  
7 severe psychotic depression and regression?

8 A Yes.

9f.



9R-1

1 Q And what do you feel caused this state of mind of  
2 Mr. Watson?

3 A I feel that partly this came about because of his  
4 growing awareness of the enormity of the crimes which he had  
5 committed.

6 Q And possibly the enormity of the penalty which he  
7 might face?

8 A No, I don't think that entered into it at all.

9 Q Doctor, you state in your report that, quote,  
10 it was -- and I believe this is on Page 8 -- "It was only when  
11 he fled from Manson to Texas, to his real family, that once  
12 again he began to come under the influence of his original  
13 value system and began to realize the enormity of his act."

14 Where did you get the information that he fled from  
15 Manson?

16 A Well, he did leave the Los Angeles area to go to  
17 Texas, and if I used the word "fled," I mean --

18 Q He went to Texas?

19 A Well, you say, "went," I say "fled"; there is no  
20 real difference.

21 Q Where did you get the word "fled," Doctor?

22 A Out of my armamentarium of the words.

23 MR. BUGLIOSI: What is that word?

24 THE WITNESS: Armamentarium.

25 Q BY MR. KAY: What does that mean?

26 A My storehouse of knowledge.

27 Q That doesn't mean to try and confuse the D.A.?

28 A No, you can't do that.

1 Q Thank you, Doctor.

2 Now, Doctor, in your conclusions on Page 8, in the  
3 end, you state that it was your opinion that Mr. Watson had  
4 at the time of the murders -- "Had the specific intent to  
5 commit murder."

6 What do you mean by the specific intent to commit  
7 murder?

8 I believe that's No. 3.

9 A No, 3, I said, "At the time of the commission of  
10 the alleged offense, while he did have the mental capacity to  
11 form the specific intent to commit murder, this was only because  
12 he had been so brainwashed, programmed and desensitized or  
13 believe that such acts in themselves were not wrong and that  
14 what he was doing was right."

15 Q Well, my question, again, was, Doctor, what do  
16 you mean by the specific intent to commit murder?

17 In other words, what, in your opinion, constitutes  
18 the specific intent to commit murder?

19 A Well, here, using it in this sense, that he knew  
20 he was going to murder some people in an abstract sort of way;  
21 but his knowledge of this was because he had been so programmed  
22 to believe that anything you do of that nature is right.

23 Q Well, are you saying, then, that on these two  
24 nights of murder that he did have the intent to kill the vic-  
25 tims?

26 A He did have the intent to engage in any activities,  
27 destructive in nature, that he was programmed to do.

28 Q Well, again, does this mean that he did on the two

1 nights of murder have the intent to kill the victims?

2 A Yes, in the context that I gave you.

3 Q And do you feel that he had the intent on both of  
4 these nights to kill the victims, from the time he left Spahn  
5 Ranch?

6 A Yes. I would have to modify that: From what he  
7 told me, I gathered that he wasn't aware of what activities  
8 he was going to engage in, but he was just to follow orders,  
9 if I recall correctly.

10 Q In other words, he told you that he didn't know  
11 what was going to happen on these two nights?

12 A On the La Bianca night, I don't believe that he  
13 knew exactly what was going to happen there until he got there.

14 Q So, in other words, you are modifying your opinion  
15 as to the La Bianca night but not as to the Tate night?

16 A As I recall.

17 Q Did he tell you what he thought was going to happen  
18 on the LaBianca night?

19 A I don't recall.

20 Q Doctor, did you ever read the testimony of Diane  
21 Lake?

22 A No.

23 Q Barbara Hoyt?

24 A No, I didn't.

25 Q Juan Flynn?

26 A No.

27 Q Rudolph Weber?

28 A No.

1 Q Paul Watkins?

2 A No.

3 Q Brooks Fosten?

4 A No.

5 Q Dennis Cox?

6 A No.

7 Q Now, Doctor, I'm going to give you some hypothetical  
8 questions here.

9 Doctor, assume that -- this is on the night of the  
10 Tate murders -- assume that Mr. Watson drove to the Tate house  
11 from Spahn Ranch, that this is approximately a 45 minute to  
12 1 hour trip, that he had no apparent difficulty in driving  
13 there.

14 My question is, doesn't this tend to negate the  
15 fact that he was under the influence of an hallucinogenic  
16 drug, assuming this hypothetical to be true?

17 A It doesn't necessarily, because there are lucid  
18 periods that an individual might have; but I doubt that,  
19 seriously, that under the circumstances that he would be capable  
20 of driving.

21 Q Now, Doctor, assume that during that trip, the  
22 trip from Spahn Ranch to the Tate house, that Mr. Watson said  
23 to these three girls -- that's Patricia Krenwinkel, Susan  
24 Atkins and Linda Kasabian -- that, quote, they were going to  
25 a house; he -- he, meaning Mr. Watson -- had been to before,  
26 that he knew the layout of the house and, quote, for those of  
27 us in the car to do what he told us to do and that no one  
28 besides Mr. Watson spoke on the trip between Spahn Ranch to

1 the Tate house. Now, assuming this hypothetical to be true,  
2 doesn't that show some deliberation and premeditation on Mr.  
3 Watson's part?

4 A It would.

5 Q Now, Doctor, also assume during this same trip  
6 from Spahn Ranch to the Tate house during the trip to the  
7 Tate house Mr. Watson told Linda Kasabian to wrap three knives  
8 and a gun, and these were the only weapons in the car, to wrap  
9 these up and if they got stopped to throw them out the window  
10 of the car.

11 Now, assuming that hypothetical to be true, does  
12 this show some deliberation and premeditation on Mr. Watson's  
13 part?

14 A Assuming it to be true.

15 It would be stupidity, too, because you don't  
16 throw things out if you are stopped by cops.

17 Q That happens quite a bit, doesn't it, Doctor?

18 A Not guns.

19 Q Do you feel that in determining a defendant's  
20 mental state at the time of a crime, that what he did and said  
21 at the time of the crime is very important to take into con-  
22 sideration?

23 A That, plus the source of the information.

24 Q But you do feel that what he said and what he did  
25 is very important to take into consideration in forming a  
26 psychiatric opinion?

27 A Yes.

28 Q Now, Doctor, isn't it true that in capital cases --

1 any by a capital case I mean where a defendant has a possibility  
2 of suffering the death penalty -- that normally, although you  
3 might be appointed by the court, that invariably you are  
4 called to the witness stand by the defense?

5 MR. BUBRICK: Immaterial.

6 Q BY MR. KAY: In capital cases --

7 MR. BUGLIOSI: That is a very relevant and material  
8 question, your Honor, and I think it is a standard --

9 THE COURT: I will allow it.

10f.

1 Q BY MR. KAY: I am talking about capital cases  
2 now.

3 A I would say more so.

4 Q How many times would you say over the years that  
5 in a capital case you have testified for the prosecution?  
6 Once, twice?

7 A No; more than that.

8 Q Three times?

9 A No. Over the years I respond to any call from any  
10 side, if I have made an examination and report.

11 I think this gives a very distorted picture, to  
12 answer the question, it would give a very distorted picture,  
13 because you are assuming that when I am appointed to examine  
14 a capital case, that I come up every time with certain con-  
15 clusions that the person is not mentally competent.

16 Of the few times, relatively few times that I do  
17 come to that conclusion, that he is not mentally competent --  
18 you see, all the other times I am never called by either side  
19 -- so, say, if I examine 50 people for capital cases -- 50  
20 people is a good round number -- of that number, I might be  
21 called to testify in two or three of the whole 50, so those  
22 two or three may be all for the defense.

23 Q Can you give us the names of some of these cases,  
24 these capital cases where you have come back with your psychiatric  
25 opinion that the defendant was not legally ill?

26 MR. BUBRICK: I will object to that as completely  
27 immaterial.

28 THE COURT: I will let him answer. Go ahead.

1 THE WITNESS: I will give you one where I was in a very  
2 interesting situation. There was this black man who killed --

3 Q BY MR. KAY: Jermgan?

4 A Who killed three or four people out at Burbank at  
5 Lockheed. You asked me and I am going to give it to you the  
6 whole way or else I am not going to give it at all.

7 Q Okay. Go ahead, Doctor.

8 MR. BUGLIOSI: I object. He doesn't have complete  
9 free latitude to talk as much as he wants.

10 THE COURT: He was asked the question and he can answer  
11 it.

12 MR. BUGLIOSI: What cases, not to go into the factual  
13 history of the entire case.

14 MR. BURRICK: I think the name of the case is meaning-  
15 less. He has been asked for the factual situation and I think  
16 he ought to be able to give it.

17 MR. KAY: I didn't ask him that.

18 THE COURT: The objection is overruled. You may answer,  
19 Doctor.

20 THE WITNESS: There were five or six psychiatrists  
21 appointed to examine the man.

22 I was the only black -- there was another black  
23 psychiatrist and all the others were white psychiatrists. I  
24 was the only one who found the man to be legally sane.

25 Here it is a rather peculiar position because it  
26 is assumed if you are black, that you are going to necessarily  
27 find someone black insane if everyone else comes up with it,  
28 but I couldn't in good conscience find the man insane because



1 from my examination I found that he was legally sane and I so  
2 testified for the district attorney and the jury found him  
3 sane.

4 Q BY MR. KAY: Weren't the facts of that case that  
5 the fellow ran about five miles to get a gun and then went back  
6 and shot a couple of fellows?

7 A The facts of that case were that five psychiatrists  
8 found him legally insane, those are the facts, and I found him  
9 legally sane.

10 THE COURT: Doctor, coming back to this case, were you  
11 subpoenaed by any side to testify in this case? Were you  
12 served with a subpoena?

13 THE WITNESS: No, sir.

14 THE COURT: Didn't you bring some documents to court  
15 here, to this court, when this case started?

16 THE WITNESS: I was subpoenaed to give some -- yes, I  
17 was subpoenaed.

18 THE COURT: May I see that subpoena. Now, you were  
19 subpoenaed by the prosecution in this case, were you not?

20 THE WITNESS: Yes.

21 Q BY MR. KAY: Now, Doctor, you weren't subpoenaed  
22 to testify by the prosecution. You were subpoenaed to turn  
23 over some reports.

24 THE COURT: Let me see that subpoena.

25 Q BY MR. KAY: That is a subpoena duces tecum, isn't  
26 it, Doctor? Dr. Tweed, isn't that true?

27 A Yes.

28 Q And that subpoena was to turn over other psychiatric

1 reports which you had used in making your opinion of Mr.  
2 Watson; isn't that true?

3 A Yes, but it had a lot of misinformation in it.

4 Q In other words, some of the information was that  
5 there was a conflict over whether or not your report to Mr.  
6 Bubrick should be confidential; is that right?

7 A That was the statement that it was supposed to be  
8 for everybody, which wasn't true.

9 Q In other words, your report was only supposed to  
10 be for Mr. Bubrick?

11 MR. BUBRICK: I think that is immaterial, your Honor.  
12 He has already testified as to the manner in which his opinion  
13 was rendered in this case and it was absent reference to any  
14 other reports.

15 MR. KAY: No; I am talking about his report.

16 MR. BUBRICK: His report was an independent report absent  
17 any information he got from any other sources.

18 Q BY MR. KAY: That is not my question. In other  
19 words, you feel that your own report was just for Mr. Bubrick?

20 A On court order, yes.

21 Q The fact is, Doctor, aren't you against the death  
22 penalty? You make no secret of that fact, do you?

23 A No.

24 Q You are against the death penalty?

25 A Yes.

26 Q Doctor, can an opinion of a psychiatrist, is there  
27 any way to either prove or disprove that opinion?

28 THE COURT: Do you understand the question, Doctor?

1 THE WITNESS: It is one of those loaded questions that  
2 really you can't answer except to say no, there is no way of  
3 disproving or disproving it.

4 Q BY MR. KAY: Proving or disproving?

5 A Yes.

6 Q And isn't it true that there is no scientific way  
7 to check the validity of a psychiatric opinion?

8 A Time tells that.

9 Q I take it, Doctor, that you didn't administer any  
10 psychological test to Mr. Watson?

11 A No, I did not.

12 Q You don't usually give any psychological tests,  
13 do you?

14 A Occasionally.

15 Q Very seldom?

16 A Very seldom.

17 Q Is it your opinion, Doctor, that the effect that  
18 LSD has on person's mental state depends entirely, almost  
19 entirely on that person's personality structure?

20 A More or less, yes.

21 Q So, in other words, it is possible for LSD to  
22 have no effect or very minimal effect on a person's mental  
23 state, if that person has a personality structure that would  
24 resist the effect of LSD?

25 A May I ask for a little clarification. This is a  
26 hypothetical case, isn't it?

27 Q Right, just in general.

28 A Just in general, yes.

1 Q So that is true?

2 A Yes.

3 Q In your opinion, does the ingestion of LSD or any  
4 other hallucinogenic drugs have any effect on a person's  
5 ability to tell the truth?

6 A It has been my experience, and I have so testified  
7 many times, that an individual who uses LSD can tell the truth  
8 or can tell lies, I am sure, but that he usually will give you  
9 a picture of what happens, that he does not have amnesia for  
10 what happens.

11 Q So, in other words, people under LSD or hallucino-  
12 genic drugs don't have amnesia?

13 A They don't have amnesia, no. The events, they  
14 usually tell you all the details of what happened, but whether  
15 they lie or tell the truth depends upon --

16 Q That is up to them?

17 A That is up to the individual.

18 Q Doctor, isn't it true that there are different forms  
19 of LSD and some forms may not be harmful and may not have very  
20 much effect on the person taking them?

21 A This is all still in the phase of no real aware-  
22 ness of it. It is thought that some forms of it do and some  
23 don't and then the type of LSD that people use nowadays may be  
24 cut with so many different things, that is to say, diluted  
25 with so many different things, that you are not getting the  
26 real LSD effect.

27 Q Doctor, you don't feel that the difference in the  
28 dosage of LSD has any particular effect on the mental state of

1 a person taking LSD, do you? In other words, it is the  
2 personality structure of an individual and not the dosage of  
3 the LSD?

4 A Well, I am sure that dosage would have some effect  
5 on individuals even regardless of what the personality struc-  
6 ture is.

7 If you take a large dose, it will certainly cause  
8 much more effect, which would be much longer lasting than if  
9 you took a small dose, regardless of what your personality was.

10 Q Doctor, have you done any special research in the  
11 area of LSD or have you written any books or have you conducted  
12 any controlled study in the field of LSD?

13 A I am too busy treating people. No.

14 Q Isn't it true, Doctor, that the number of times  
15 that a person takes LSD doesn't necessarily have any effect on  
16 his mental state, his mental state?

17 A In some individuals it seems that way. I have  
18 seen people who say they have taken it for over 100 times and  
19 I must admit to them they are in pretty good shape.

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11R-1

1 Q I take it, Doctor, that -- well, do you feel  
2 that a person under the influence of LSD or a hallucinogenic  
3 drug realizes that he is under the influence of LSD or an  
4 hallucinogenic drug?

5 A It has been my experience with many of them that  
6 they are aware of what they are under the influence of; but  
7 they don't have control over their thoughts and the manifesta-  
8 tions of it, that even though he may say, "I am under the  
9 influence of LSD," if he is hallucinating and hearing voices  
10 telling him to perform a certain function, he is not going to  
11 be able to integrate the influence that he has -- that, "I'm  
12 under the influence, that therefore I shouldn't do this,"  
13 you see; that he's going to go ahead and follow through with  
14 what the psychotic delusion or hallucination, sort of tells  
15 him to do.

16 Q But while he is having these hallucinations, he  
17 realizes that he is having them, doesn't he?

18 A He may; I'm sure that some of them do, from my  
19 experiences with treating them.

20 Q Isn't it true that under the influence of LSD or  
21 hallucinogenic drugs that violence is uncommon?

22 A Well, I won't say it is true, because I happen to  
23 see only those who commit some violence; so, to me, it is  
24 common.

25 I am sure there is a vast majority of them who do  
26 use it who do not become engaged in either violence directing  
27 toward themselves or outwardly; but I only come in contact  
28 with those who suffer the pathological effects of it, so I'm

1 not in a position to give you any data on that.

2 MR. BUGLIOSI: Could we have just a few moments, your  
3 Honor?

4 (Short pause.)

5 Q BY MR. KAY: Doctor, to clarify a point, again,  
6 you weren't appointed by Judge Alexander in this case, you  
7 were appointed by Judge Lucas; is that right?

8 A That's right.

9 Q And other than this Jernagan case that you were  
10 telling us about, what would you say the percentage of times  
11 is that you have testified for the prosecution in a capital  
12 case?

13 A I really don't know. I don't keep track of those  
14 things, but right now I am in the process of preparing to do  
15 one.

16 Q To testify for the prosecution in a capital case?

17 A Yes.

18 Q What is the name of that case?

19 THE COURT: Just a moment; just a moment.

20 Q BY MR. KAY: Well, Doctor, wouldn't you say that  
21 the percentage of time that you testified for the prosecution  
22 in a capital case is very low?

23 A Yes, I would say that; but, so what?

24 Q Now, in your interview with Mr. Watson did he tell  
25 you that he was doing all right in jail in Texas and that he  
26 started having physical problems after he was brought out  
27 here?

28 MR. BUBRICK: If your Honor please, I think that is beyond



1 the scope of the direct and I think it is immaterial.

2 THE COURT: I will allow the doctor to answer.

3 THE WITNESS: May I have my --

4 MR. BUGLIOSI: When you weren't looking, Doctor, I  
5 stole your report. Page 37, I believe, or in that vicinity.

6 THE COURT: Do you have a ready reference for the wit-  
7 ness?

8 MR. BUGLIOSI: I think on Page 37.

9 MR. BUBRICK: Page 37, about Line 27 or 26.

10 THE WITNESS: Yes, I see that as part of the information  
11 he gave me.

12 Q BY MR. KAY: He did tell you that?

13 A Yes.

14 Q Did you have a meeting with either one of the  
15 defense attorneys before you testified, either Mr. Keith or  
16 Mr. Bubrick?

17 A I had a conference with Mr. Bubrick on July 23rd;  
18 I spent three hours with Mr. Bubrick.

19 MR. KAY: I have no further questions.

20  
21 REDIRECT EXAMINATION

22 BY MR. BUBRICK:

23 Q Doctor Tweed, did Mr. Watson tell you why he was  
24 having difficulty here in the County Jail after his return  
25 from Texas -- and I am inviting your attention again to Page  
26 37 of your report.

27 A Yes.

28 Q What was his problem here in the jail?



1           A       The type of food that he felt that he could eat  
2           and that he couldn't eat. He would spit up certain foods and  
3           he couldn't take anything with fat in it.

4           Q       In that connection, Doctor Tweed, did you have  
5           access to the medical records and the other records in the  
6           County Jail with respect to the kinds of foods that Mr. Watson  
7           was being given?

8           A       I didn't have any records, per se, of what kind of  
9           food he was getting, only from him the type of food he was  
10          getting and the effect it had on him.

11          Q       Did he tell you what sort of food he had been  
12          getting in Texas?

13          A       To sum it up, "Mother's cooking."

14          Q       And vitamin pills?

15          A       And vitamin pills.

16          Q       And medications; is that correct?

17          A       Yes.

18          Q       And he wasn't getting that kind of mother's cook-  
19          ing here in the County Jail, was he?

20          A       No.

21          Q       Dr. Tweed, can you tell us the ratio of the number  
22          of appearances that you make in court as compared to the total  
23          number of reports that you are asked to return by court under  
24          court appointment?

25          A       Cutting out Department 95, which is a regular  
26          thing once a week, I might say on an average of two or three  
27          times a month, at most.

28          Q       You do a lot of work in 95, do you not?

1 A Yes.

2 Q And on whose behalf do you testify in Department  
3 957

4 A 99 percent of the time for the district attorney.

5 Q And those are in drug abuse cases; is that correct?

6 A Yes.

7 Q Doctor, you have told us in response to a question  
8 by Mr. Kay that you are opposed to the death penalty.

9 Would you let that personal feeling of yours be  
10 reflected in any report you were asked to write by the court?

11 A No, I don't think I have. If I had, I would not  
12 -- I would have lost the confidence of the appointing judges  
13 in referring cases to me for --

14 Q Evaluation?

15 A -- evaluation.

16 Q Now, you have also, in response to a question by  
17 Mr. Kay, indicated that you didn't think that Mr. Watson was  
18 faking his answers to you; is that correct?

19 A Yes.

20 Q Now, conversely, may I ask you whether, as a  
21 result of all the experience you have had as a psychiatrist  
22 and the number of people that you have talked to and examined,  
23 whether you have developed, in your own opinion, some ability  
24 to assess credibility?

25 A I think so.

26 Q And did you do that with respect to Mr. Watson?  
27 This was one of the things you were concerned about with Mr.  
28 Watson, whether or not he was telling you the truth?

1       A     Yes, I think that this is more so in this case  
2 because of the nature of it and the significance of it,  
3 communitywise, statewide, worldwide, that I felt that whatever  
4 I came up with had to represent what I felt and should be  
5 based upon sound facts.

6       Q     And I take it you felt that Mr. Watson was telling  
7 you the truth; is that correct?

8       A     Yes.

9       Q     And can you tell us what it was about his testimony  
10 or his examination that led you to believe he was telling the  
11 truth?

12       MR. KAY: Well, your Honor, I am going to object, because  
13 I only asked the doctor whether he thought he was telling the  
14 truth to simple arithmetical problems. I think this greatly  
15 exceeds the scope of cross.

16       THE COURT: Well, I think where you open the subject --

17       MR. KAY: On arithmetic problems?

18       THE COURT: I will allow it.

19       THE WITNESS: Well, I think that -- I felt that Mr.  
20 Watson was telling me the truth, because he gave me informa-  
21 tion about different reactions that he had as to certain drugs,  
22 that I was quite certain he didn't know occurred.

23       For instance, he told me that when he used bella-  
24 donna he saw visions and these visions were of Lilliputians,  
25 little space people.

26       He also told me that when he took belladonna that  
27 his body turned red; and these are the effects of belladonna.  
28 That one of the very interesting things is that when you do

1 hallucinate from belladonna you hallucinate tiny objects; and  
2 I had no reason to believe that he was aware of this from any  
3 medical source. Then another thing that made me believe him  
4 was that when I saw him he didn't -- he was -- he had somewhat  
5 of a compulsion to tell about these particular crimes in all  
6 the detail, to admit his part, and also I felt at that time  
7 that he was ready to die. He was depressed and he wasn't  
8 doing it in a self-serving way, that it didn't make any differ-  
9 ence to him.

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1 Q BY MR. BUBRICK: Was this significant to you?

2 A This was significant to me because a person, if  
3 he is going to be self-serving, is going to make statements  
4 that would tend to minimize his relationship to a particular  
5 crime and try to put it in such a way that you would make  
6 allowances for it, or to say yes, while he was there, he  
7 wasn't one of the main ones, but he did not do that with me.

8 He gave me all of the gory details.

9 Q It was detailed, was it not?

10 A Yes.

11 Q As a matter of fact, the transcription or that is  
12 the recordation of your transcript covers some 64 pages, does  
13 it not?

14 A Yes.

15 Q And I take it you have reached a conclusion about  
16 Mr. Watson's credibility after, and having in mind the testimony  
17 that you read of Linda Kasabian in the last trial; is that  
18 correct?

19 A Yes.

20 Q You were asked, Dr. Tweed, whether or not you  
21 thought Mr. Watson had the specific intent to kill at the time  
22 he went to both the Tate and La Bianca houses.

23 A Yes.

24 Q And you said you thought he did; is that correct?

25 A Yes.

26 Q Do you feel, however, that that intent to kill  
27 was the result of mature and meaningful reflection on his part?

28 A No. I do not think it was on the basis of mature

1 and meaningful reflection.

2 As I added to that intent to kill, that I felt  
3 that while he had this intent to kill, it was based on his  
4 being programmed and brainwashed and made to feel that any  
5 type of behavior of that nature was part of life and a  
6 reflection of love and all sorts of things like that.

7 Q Now, you were also asked, Dr. Tweed, whether or  
8 not you thought that the fact -- assuming to be true the  
9 statement that he told the girls to wrap things in clothes and  
10 throw them away if they were stopped, and things of that  
11 nature -- do you recall Mr. Kay put that to you -- may I ask  
12 you whether that would reflect deliberation if he were merely  
13 following Mr. Manson's previous orders?

14 A No.

15 Q Then he would merely be complying with what Manson  
16 told him to do; is that correct?

17 A Yes.

18 Q Was there some discussion between you and Mr.  
19 Watson in the course of your examination about what Mr. Manson  
20 told him to do?

21 A I believe there was, if you would point out the  
22 page to me.

23 Q I think it is page 17, somewhere around line 22.

24 A Yes.

25 Q Do you find the reference to that?

26 A Yes, I do.

27 Q What did he tell you about that?

28 A "He told me step by step things to do." That "he"  
referring to Manson.

1 "He said go -- no, where to go -- no, where to  
2 go. He said that it was where Terry Melcher used to live and  
3 he said to go up to the house and to cut the wires on the  
4 pole and to go over the fence and to kill everyone that was  
5 in the house."

6 Q How about on page 18, do you find any other  
7 references to that, somewhere around line 4, between line 4 and  
8 9?

9 A "I remember after him telling me the things to do  
10 I asked him again, he said, 'Okay. Don't worry about anything.  
11 Just you make sure, or you all make sure that everybody in  
12 the house is dead,' and that the girls know what to write on  
13 the walls. He said, 'You just make sure that everybody is  
14 dead,' so, uh, I got in the car with the girls and I can't  
15 remember the ride over to the house, but I can remember after  
16 I was getting there."

17 Q Now, you also said in response to a question by  
18 Mr. Kay that there was no scientific way to tell whether or  
19 not a doctor's diagnosis as a result of a psychiatric  
20 evaluation was valid or invalid or truth or a lie.

21 Do you recall that?

22 A I did, but I also added on time would tell.

23 Q Let me ask you if you are familiar with a medical  
24 instrument known as the electroencephalograph?

25 A Yes.

26 Q And what, if anything, does that do?

27 A Well, that could determine the presence of brain  
28 damage.



1 Q Would that type of medical instrument tend to  
2 corroborate your findings as a result of an oral interview?

3 A Yes.

4 Q And in this particular case do you know the  
5 results of the EEG that was run on Mr. Watson at UCLA?

6 A Yes. I believe I had a copy of that which showed  
7 that there was some brain damage.

8 Q Was that consistent with the findings that you  
9 made as a result of your examination and interview?

10 A It was consistent with my clinical evaluation that  
11 there was organic brain damage, yes.

12 Q I think you also said in response to a question by  
13 Mr. Kay that what the defendant said and did at the time of  
14 a crime would be important; is that correct?

15 A Yes.

16 Q However, that would also vary with the source of  
17 information; is that correct?

18 A Yes.

19 Q In other words, if you had some feelings about the  
20 veracity of the source of information, that might render the  
21 facts that were presented to you less valuable?

22 A Yes.

23 Q You were also asked, and I take it, I assumed it  
24 was in the abstract, as to whether or not the drug in and of  
25 itself -- that is the LSD -- in and of itself would affect a  
26 well adjusted person.

27 Did you understand that to be the purport of Mr.  
28 Kay's question?



1 A As I recall I think it was to that effect.

2 Q I don't know what a well adjusted person is, but  
3 assuming you have some idea of what that might be, Doctor,  
4 would that person eventually be affected by LSD if he took  
5 it long enough and in large enough doses?

6 A Yes. It is my opinion that he would.

7 Q Can you conceive of anybody who would not be  
8 affected by LSD in time with the street type dosage of drugs  
9 available?

10 A I have a belief that everybody who takes it, if  
11 he took it sufficiently long enough would show changes and I  
12 have that belief based on my clinical observations and seeing  
13 men come over to Department 95 for examination.

14 I point out the different ones and say to him,  
15 without even asking him a question, "You have been taking LSD,  
16 haven't you?"

17 And nine times out of ten he usually says "yes"  
18 and wants to know how I knew.

19 Q May I ask you how you do know?

20 A It is just something in the way he handles himself.  
21 There is a certain way -- I can't verbalize it.

22 Q Did you have that feeling about Watson when you  
23 first saw him?

24 A A feeling that he had used a lot of drugs.

25 Q Incidentally, Doctor, we have been talking about  
26 LSD and its effects on people.

27 Can you tell us whether it is possible to accurately  
28 evaluate the effect of numerous drugs being consumed at or

1 about the sametime on an individual?

2 A No, it is impossible. We might see variations  
3 of them where one drug potentiates the other, where -- that  
4 is, makes one stronger in its action so we get a very  
5 clouded and mixed picture.

6 Q Would that be true of the drugs that Watson said  
7 he was using during this period of time that we are concerned  
8 with?

9 A It certainly would.

10 Q That is LSD, belladonna, speed.

11 A STP and all sorts of drugs -- redwood seeds.

12 Q Rosewood you mean?

13 A He didn't know whether it was redwood or rosewood.

14 Q Have you heard of, however, rosewood seeds as  
15 having hallucinogenic effects?

16 A To tell you the truth this was the first time I  
17 heard of rosewood seeds so I couldn't tell you really. I  
18 tried to look it up but I couldn't find anything on it.

19 Q I think you also said that there was no clinical  
20 evidence of amnesia as a result of LSD; is that correct?

21 A I said that it was my experience with individuals  
22 who use LSD and say that is the main drug, that they don't  
23 have amnesia for the events that occurred, that they are able  
24 to tell you in great detail all of the things that happened,  
25 even though they may not have<sup>had</sup> any control over it, but that  
26 seems to be a characteristic of the drug.

27 Q Hasn't it also been your experience, however,  
28 Doctor, to find people talking about their experience under

1 the effect of LSD when they sort of move in and out of a  
2 conscious or semi-conscious state?

3 A Yes.

4 Q How would you verbalize or describe that if you  
5 can for us?

6 A Well, a sort of, you get the feeling that they  
7 are moving out of their body, physically. It is almost as  
8 if someone is sitting looking at himself is the way some have  
9 described it to me.

10 Q I'm sorry. I misled you with my question. My  
11 question was directed toward the thought process.

12 Have you heard of experiences where people say  
13 that they tend to black out during a certain phase of an  
14 experience and then back to a conscious state as they are  
15 going about the commission of some event or crime?

16 A Not that I recall offhand.

17 THE COURT: I believe the expression is flowing in and  
18 out.

19 THE WITNESS: Flowing in and out.

20 Q BY MR. BUEKICK: Flowing in and out. Do you know  
21 if belladonna has that characteristic or that ability?

22 A Well, you see belladonna and all those things in  
23 combination together, we don't know whether the combination  
24 would cause that, you see. That is why I try to stick what  
25 pure -- if a person was solely using LSD, then usually he  
26 remembers everything that he does.

27 Now, when you have this picture distorted by the  
28 addition of other drugs such as belladonna and other

1 hallucinogens and even merely smoking marijuana, which seems  
2 to at times can bring out these effects, you see, so that I  
3 don't know.

4 Q Doesn't marijuana have the effect of accentuating  
5 the effects of LSD?

6 A It does, and if a person has, let us say, a person  
7 has not used LSD for a week or even a month or so, if he  
8 smokes marijuana, it may precipitate a trip, a LSD trip.

9 Q A flashback as it is called?

10 A A flashback, yes.

11 Q In other words, where the person is experiencing  
12 an LSD reaction although he is not under the influence of a  
13 drug?

14 A No. You don't have to be under the influence of  
15 the drug to experience the effects.

16 Q Do you have to be under the continuous effect of  
17 a drug, that is, do you have to be on a trip, as it were, in  
18 order to have the effects of LSD more pronounced?

19 A No. You can have stopped using it and be going in  
20 and out of a trip.

21 Q Would Watson's conduct as you found it to be during  
22 the course of your examination have been consistent with one  
23 who was on an LSD trip?

24 A I feel it was.

25 Q And even if he had had no LSD on the particular  
26 days that these crimes were committed, would his conduct  
27 still have been consistent with one who has been laboring  
28 under the effects of LSD?

13

1 A Yes, it could have been.

2 Q Is the effect of the drug LSD as pronounced on  
3 the individual who uses it by himself, perhaps, in the  
4 sanctity of his own room, as opposed to one who uses it in  
5 a communal setting with a peer group also using drugs and  
6 under the influence of a leader who has some ulterior motives?

7 A The effect certainly would be greater in the  
8 presence of someone who has a leadership ability, because he  
9 can make suggestions to the individual at that particular time.

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1 Q Now, I asked you about folie a deux earlier  
2 today, Dr. Tweed.

3 As a result of your examination of Mr. Watson do  
4 you have any opinion as to whether or not a relationship  
5 between Manson and Watson was a folie a deux?

6 A I have an opinion, but it is not based upon having  
7 examined Mr. Watson and I don't think --

8 Q You mean Mr. Manson?

9 A Mr. Manson, pardon me -- I think that before you  
10 can really make a definite opinion or come to a definite  
11 conclusion, one should examine the two people involved; but  
12 I could say this, that on the basis of my awareness of the  
13 whole case and the reading about the behavior of the  
14 individual in public -- that is, Mr. Manson's behavior --  
15 his verbal productions in the courtrooms, and whatnot, that  
16 it would be -- it would lead me very strongly to believe that  
17 this was the case.

18 Q That there was a folie a deux between Manson --

19 A That's correct; there was a folie a deux.

20 Q And as a result of your examination of Mr. Watson  
21 would you have found him to be the kind of a personality  
22 who would respond to somebody like Manson?

23 A Oh, yes; he was looking for a father.

24 Q And from his descriptions of the interrelationship  
25 of himself and Mr. Manson do you think he found that in Mr.  
26 Manson?

27 A Yes.

28 Q And Manson then became the father figure?

1 A Yes.

2 Q And became --

3 A A very strong father figure.

4 Q Did he refer to Mr. Manson as anything other  
5 than a father during your examination of him?

6 A He may have, but he described him as someone who  
7 seemed to know all of his thoughts; and you get the feeling of  
8 a little child who knows his father knows everything he is  
9 going to do and when he does something wrong.

10 Q Did he also refer to Manson as a god?

11 A Yes.

12 Q Or God-like?

13 A Yes.

14 Q And do you remember him telling you that, you know,  
15 "Your God will not order or direct that he do anything wrong,"  
16 or something to that effect?

17 A That was probably one of the things he did say.

18 Q Doctor, do you have an opinion as to whether or  
19 not Mr. Watson was psychotic at the time of the commission  
20 of these events?

21 A I would say that he was. I do have an opinion.

22 Q What was that?

23 A I would say they would fit into the diagnosis of  
24 being psychotic at that particular time.

25 Q How would you define a psychopath?

26 A Well --

27 Q I'm sorry, a psychotic individual, I'm sorry.

28 A A psychotic individual is an individual who has a



1 break with reality.

2 I think that could sum it, really; that he shows,  
3 from my examinations, it would appear that particular time  
4 that these were occurring; <sup>he</sup> certainly had breaks with reality.

5 Q And can you tell us what caused those breaks?

6 A The combination of many factors, such as the  
7 ingestion of drugs for a long period of time, having been sort  
8 of brainwashed and conditioned into believing that the  
9 standards that society sets or had set are wrong; the personal  
10 taking on of these screwy standards, so to state, that were  
11 given to him by a very strong father image.

12 MR. BUBRICK: I think I have nothing further, your Honor.

13  
14 RE-CROSS-EXAMINATION

15 BY MR. KAY:

16 Q Dr. Tweed, Mr. Watson described to you an  
17 experience that he had with belladonna out in Van Nuys; isn't  
18 that true?

19 A Yes, he did.

20 Q And he told you that after he took this belladonna  
21 that he was riding on a motorcycle and the effects were such  
22 that he fell off his motorcycle?

23 A Yes.

24 Q And he ended up being incarcerated in jail on  
25 that occasion; isn't that true?

26 A Yes.

27 Q In Van Nuys?

28 A Yes.



1 Q And that was because of his taking belladonna?

2 A Because of the accident and because of his taking  
3 belladonna.

4 Q Now, Doctor, Department 95 cases are civil  
5 commitment cases, aren't they?

6 A No.

7 Q What are they?

8 A Criminal commitments.

9 Q They are criminal commitments?

10 A Yes. Well, they all come from the criminal court.

11 You are right, they are civil commitments but  
12 they are all from the criminal court. Everyone I see has  
13 been found guilty of something in a criminal court, criminal  
14 superior court or municipal court.

15 Q Well, this is a civil proceedings, isn't it,  
16 Doctor?

17 A The proceeding in 95 is, but the individual has  
18 been convicted of a crime.

19 Q But you don't have anything to do with his being  
20 convicted of the crime; in other words, you just see him during  
21 the civil commitment, isn't that true?

22 A Prior to that, to determine whether or not he  
23 should go to the Center; and if he doesn't go to the Center,  
24 he goes back to the criminal court for whatever the criminal  
25 court wants to do with him.

13A

1 Q Now, Doctor, isn't it true that in the first trial  
2 in regards -- well, in answer to a question by Mr. Bugliosi  
3 on cross-examination, that you testified that, taking all  
4 criminal cases together, all types of criminal cases together,  
5 that you testified for the defense in the high 90 percent  
6 of the times that you testified?

7 Do you remember that; would that be a correct  
8 statement?

9 A It wouldn't be a correct statement. I would have  
10 to see the whole thing of that of what I said, because that  
11 seems like it is taken out of context.

12 Q Well, what percentage of times would you say you  
13 testified for the defense, taking all criminal cases?

14 A Of all criminal cases?

15 Q Non-Department 95.

16 A I don't know; that is what I tried to get over  
17 before. If I were to take those in the courts that I see most  
18 of the time I am on the District Attorney's line.

19 Q Well, give us an idea, if you can. I mean, an  
20 approximation, criminal cases.

21 A I really don't know. I don't keep any records of  
22 that.

23 Q Wouldn't you say that the percentage would be  
24 pretty high that you testified for the defense?

25 A I wouldn't say it was pretty high, no, because  
26 most of the time I am ever in court it is for the District  
27 Attorney.

28 Q You mean Department 95?

1           A       I am not going to separate that; I take everything,  
2 everytime I go into court, it is for the District Attorney most  
3 of the time.

4           Q       I'm asking you to separate civil commitment  
5 Department 95 cases, if you can, separate that out and I'm  
6 talking about all the other criminal cases other than Department  
7 95.

8           A       It is really difficult to say. If I have a  
9 private case, my conclusions are such that it will be of  
10 benefit to the attorney's client, then I testify. I haven't  
11 testified in any private cases for months now, so that it is  
12 not something I do every week or everyday, so I don't really  
13 know. I don't keep statistics.

14          Q       By "private cases," do you mean noncourt appointed  
15 cases?

16          A       That's right.

17          Q       But in court appointment cases, what percentage of  
18 the time do you testify for the defense?

19          A       Well, as I said before, the only way I could  
20 describe it is -- let's say I have 50 murder cases, 187,  
21 capital cases --

22          Q       50?

23          A       I'm just using that as a number over a period of  
24 time -- 50, not in one -- you know, over a period of time,  
25 over a period of years. If I have 50 of those, I'd say,  
26 appointed by the court I might only have to go to court on  
27 three of four of those, at most.

28               Well, you take three or four out of 50 and that

1 means that 47 of them -- well, let's say 45 of them have  
2 either been, because all the doctors agreed and the District  
3 Attorney agrees with the attorneys, and some disposition is  
4 made on the basis of the reports -- I don't know what happens  
5 there because I am never told; but those two or three or four  
6 that I might have to testify on maybe three-fourths of them  
7 or three out of four, let's say, would be for the defense.

8 But, if you take that out of a total of 50, I mean,  
9 this is why you are giving a distorted picture and I can't  
10 fit my statistics into that.

11 Q Doctor, can you think of one case other than the  
12 Jernigan case, a capital case, where you were called by the  
13 prosecution as a witness?

14 A I don't keep them in mind; I don't keep them in  
15 mind.

16 Q Doctor, the last question -- what page does Mr.  
17 Watson refer to Mr. Manson as a God?

18 Maybe Mr. Bubrick has it.

#14

1 MR. BUBRICK: On page 7 of your other report, Doctor.  
2 It is on page 7 of your typed report, Dr. Tweed, the last  
3 sentence in the third paragraph.

4 Q BY MR. KAY: Doctor, this report is a condensation  
5 of the other report.

6 I am asking you for the statement that you taped  
7 from Mr. Watson, where he told you -- it is not in your  
8 conclusions in the report.

9 A I haven't found any.

10 Q Are you sure that he told you that?

11 A I said -- may I quote what I have in the report?

12 Q You mean in your summary?

13 A Yes.

14 "He looked on Manson as a powerful  
15 God-like figure who gave him guidance and began  
16 to assume a very important place."

17 That is my evaluation.

18 Q But you don't know whether he, Mr. Watson, told  
19 you that he looked on Manson as a --

20 A He may have because we talked after the tapes ran  
21 out.

22 Q But you are not sure?

23 A I am not. I wouldn't say.

24 MR. KAY: No further questions.

25  
26 REDIRECT EXAMINATION

27 BY MR. BUBRICK:

28 Q Dr. Tweed, do you come to court with a built-in

1 bias for the defense, or against the prosecution when you  
2 testify on the witness stand?

3 A No.

4 Q Do you have that in mind when you start writing  
5 your report? In other words, do you reach a conclusion and  
6 then say, "I am going to make the facts fit the conclusion  
7 that I want to reach"?

8 A No. I wouldn't last if I did.

9 Q Do you remember the case that you were in where  
10 I subpoenaed you about 10 years ago?

11 A Yes.

12 Q I was a defense lawyer then, too, wasn't I?

13 A Yes. It was your case and you were very unhappy.

14 Q You weren't very complimentary to the defendant,  
15 were you?

16 A No. He is in death row now.

17 Q And I knew you were court appointed before you  
18 appeared in court, didn't I? That was a court appointment too,  
19 wasn't it?

20 A Yes.

21 Q And you came to court and no matter who called you,  
22 you called your shots as you saw them, didn't you?

23 MR. BUGLIOSI: These are leading questions, your Honor.  
24 This is his witness.

25 THE COURT: Well, I think you are going a little far  
26 afield now anyway. Anything further?

27 MR. BUBRICK: I have nothing further.

28 MR. KAY: No.

1 MR. BUGLIOSI: No.

2 THE COURT: Thank you, Doctor; you may be excused.

3 Ladies and gentlemen, we will recess at this  
4 time until 1:30 and once again heed the admonition usually  
5 given.

6 (The noon recess was taken until 1:30 p.m. of  
7 the same day.)  
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#15

1 LOS ANGELES, CALIFORNIA, FRIDAY, SEPTEMBER 17, 1971; 1:35 P.M.

2  
3  
4 THE COURT: People against Watson.

5 All jurors, all counsel and the defendant are  
6 present.

7 Mr. Bubrick or Mr. Keith,

8 MR. KEITH: Thank you.

9 Dr. Markman,

10 THE CLERK: Raise your right hand, please.

11 You do solemnly swear that the testimony you may  
12 give in the cause now pending before this court shall be the  
13 truth, the whole truth and nothing but the truth, so help you  
14 God?

15 THE WITNESS: I do.

16  
17 RONALD MARKMAN,  
18 called as a witness on behalf of the defendant, testified as  
19 follows:

20 THE CLERK: Thank you.

21 Take the stand and be seated; and would you state  
22 and spell your name, please.

23 THE WITNESS: Ronald Markman, M-a-r-k-m-a-n.

24 THE CLERK: Thank you.

25  
26 DIRECT EXAMINATION

27 BY MR. KEITH:

28 Q Doctor, are you a medical doctor licensed to



1 practice in the state of California?

2 A I am.

3 Q And do you specialize in psychiatry?

4 A I do.

5 Q Where did you attend college?

6 A UCLA,

7 Q When did you obtain your degree?

8 A I obtained a bachelor's degree in 1959 and a  
9 medical doctor's degree in 1960.

10 Q Both from --

11 A UCLA, yes.

12 Q And where did you undergo your internship?

13 A I interned, took a rotating internship at Mount  
14 Sinai Hospital in New York; and following two years of  
15 military duty, then went to the Neuropsychiatric Institute at  
16 UCLA for a three-year residency in psychiatry.

17 Q When did you complete your residency in psychiatry  
18 at UCLA?

19 A 1966.

20 Q And since 1966 have you been in private practice  
21 as a psychiatrist?

22 A Part of the time; part of my day is spent in  
23 private practice. I have been on medical school faculties  
24 at that time both at UCLA and USC.

25 Q Are you presently on the faculty of any medical  
26 school?

27 A I am.

28 Q Where?

1 A I am assistant clinical professor at USC.

2 Q In psychiatry?

3 A Yes.

4 Q And have you had any other faculty positions  
5 besides your present one?

6 A I was assistant clinical professor at UCLA  
7 initially; and then was assistant professor at USC for three  
8 years and assistant director of postgraduate education in  
9 the division of psychiatry at the medical school at USC.

10 Q Your offices are presently located in Westwood?

11 A That's correct.

12 Q And do you perform psychiatric work in Department  
13 95 at the present time?

14 A Yes, and have been for approximately four years.

15 I have also been on the approved panel for the  
16 Superior Court of the County of Los Angeles; also the juvenile  
17 panel, and have testified in civil cases, also.

18 Q With respect to your work in Department 95, do  
19 you examine patients there who are suspected of having mental  
20 disorders or mental diseases?

21 A Yes.

22 Q And do you report to the court in Department 95  
23 concerning your findings?

24 A Yes.

25 Q And how many patients would you estimate you  
26 have examined with respect to Department 95 proceedings during  
27 your tenure there?

28 A They include many kinds of evaluations. They

1 would include incompetency to stand trial evaluations,  
2 insanity for criminal responsibility evaluations, mental  
3 disorder evaluations, drug addiction, for both opiate and  
4 dangerous drugs; mentally disordered sex offenders; and I  
5 would say in the four years probably in the neighborhood of  
6 7,000.

16

#16

1 Q Doctor, are you a member of any professional  
2 societies?

3 A Yes. I am a member of Alpha Omega Alpha, a  
4 medical honorary society, American Psychiatric Association,  
5 Southern California Psychiatric Society, and the American  
6 Academy of Psychiatry and Law.

7 Q Have you published any works or articles in the  
8 field of psychiatry?

9 A Yes. I have two publications to now and I am  
10 in the process of writing a few more. Specifically on  
11 juvenile delinquency, an article that was published in 1966,  
12 and one published in '67, I believe, an unusual syndrome  
13 called the Klein-Levin syndrome.

14 Q Doctor, are you familiar, as a result of your  
15 training and practice, with the effect of dangerous drugs  
16 on the human mind and body?

17 A Yes.

18 Q And has that familiarity arisen from various  
19 sources, personal observations, as well as reading literature  
20 on the subject as well as perhaps some research projects?

21 A No specific research projects, counsel, but  
22 clinical observations on well over a thousand individuals as  
23 well as literature.

24 Q And have a large number of these thousand patients  
25 you have examined abused the drug called LSD?

26 A Yes.

27 Q How about the amphetamines, have you seen patients  
28 clinically who have overindulged in that drug?

1 A Yes.

2 Q Do you have any familiarity with the drug called  
3 belladonna?

4 A Yes.

5 Q And from what source is that familiarity derived?

6 A Actually, it is rare for a doctor to encounter a  
7 belladonna overdose or acute intoxication. I have experience  
8 with it therapeutically within the practice of medicine, but  
9 I also have made the diagnosis of overdose on two individuals  
10 at the Los Angeles County Hospital.

11 Q Have you also seen people who have adjusted a  
12 potpourri of drugs such as LSD, speed, belladonna, cocaine,  
13 marijuana, other hallucinogenic drugs?

14 A Yes.

15 Q Doctor, with respect to the case at hand, did  
16 you have occasion to examine Mr. Watson, the defendant?

17 A Yes.

18 Q When and where did you make those examinations?

19 A Both at the new county jail. The first examination  
20 encompassed roughly three or three and a quarter hours on  
21 August 13, 1971 and I again saw him on September 2, 1971 in  
22 the same facility.

23 Q In addition, Doctor, were you furnished medical  
24 reports submitted by other psychiatrists who examined Mr.  
25 Watson?

26 A Yes.

27 Q Did you read those reports?

28 A I did.

1 Q And did you also recently read the testimony of  
2 Linda Kasabian given in this trial?

3 A I did.

4 Q Did you also have occasion in the past to examine  
5 by court appointment Leslie Van Houton?

6 A Yes.

7 Q She was a defendant in the so-called Manson trial;  
8 is that correct?

9 A Yes.

10 Q Does this by and large represent the sources of  
11 information that you have received about Mr. Watson and about  
12 Manson and his family or have there been other sources also?

13 A No, sir, aside from information obtained in the  
14 news media. This would be all of the formal information I  
15 have received.

16 Q And as a result of your examination of Mr. Watson  
17 and as a result of considering all the other data you have  
18 received or heard about this matter, have you formed an  
19 opinion as to whether or not Mr. Watson was suffering from  
20 diminished mental capacity at the time of the so-called Tate-  
21 La Bianca homicides, which took place on the early morning  
22 hours of August 9th and 10th, 1969?

23 A Yes, I have, counsel.

24 Q And have you also with respect to the subject of  
25 diminished capacity formed an opinion as to whether or not  
26 on the nights of these homicides Mr. Watson had the capacity  
27 to maturely and meaningfully premeditate, deliberate and  
28 reflect upon the gravity of his contemplated acts? That is

1 the killing of these human beings?

2 A Yes.

3 Q And what is that opinion?

4 A My opinion is that the acts in and of themselves  
5 were a basis to demonstrate that he lacked the meaningful and  
6 mature ability to reflect on his contemplated acts.

7 Q The next question is: Could you tell us what the  
8 bases of your opinion are that Mr. Watson at the time of these  
9 homicides was unable to have the capacity to maturely and  
10 meaningfully reflect upon the gravity of his contemplated acts?

11 A No. 1, counsel, the acts in themselves I feel  
12 were sufficiently bizarre that they preclude meaningful and  
13 mature reflection.

14 No. 2, the lack of emotion associated with the  
15 act, as testified to by Linda Kasabian, or as within the  
16 history given to me by Mr. Watson in which his actions were  
17 necessarily divorced from emotion related to those actions.

18 No. 3; the manner in which he methodically went  
19 about involving himself on both nights in the behavior in  
20 the company of the other people. All demonstrate to me an  
21 inability to fulfill that requirement as handed down by the  
22 courts.

#17

1 Q Did you also consider in forming your opinion that  
2 Mr. Watson did not have sufficient mental capacity to  
3 premeditate, deliberate, et cetera, the influence of Mr.  
4 Manson over Mr. Watson's thoughts and deeds?

5 A I took that into consideration, yes.

6 Q And did you also consider the drug use that Mr.  
7 Watson told you about?

8 A Yes.

9 Q Did you also consider the social setting, you  
10 might say, in which Mr. Watson lived during this period of  
11 time; that is, with Mr. Manson and his family in an isolated  
12 subculture at the Spahn Ranch?

13 A Yes.

14 Q Did you also consider Mr. Watson's, what you might  
15 say, underlying personality structure as a factor?

16 A Yes.

17 Q Incidentally, was it, in your opinion, as a  
18 result of your examination and other information, that Mr.  
19 Watson was at the time of the homicides a passive-dependent  
20 type of person?

21 A Well, based on my examination at the time I saw  
22 him, he demonstrated a personality consistent with that of a  
23 passive-dependent individual; and personality structure is  
24 ingrained in the individual over long periods of time and  
25 doesn't change quickly, so I would extrapolate that this  
26 condition was the same two, three, four, six, seven years  
27 ago.

28 Q Did you also take into consideration -- strike that.



1                   Incidentally, Doctor, did Mr. Watson tell you  
2 about his prolonged and heavy use of LSD during your interview  
3 with him?

4           A       Yes, he did.

5           Q       And did he tell you about his use of speed or  
6 methedrine?

7           A       Yes.

8           Q       And did he tell you that on some occasion he had  
9 taken belladonna by chewing the root of the plant?

10          A       Yes.

11          Q       Did he tell you he had also used other so-called  
12 hallucinogenic drugs over prolonged periods of time, such as  
13 marijuana, hashish, cannabinal, psilocybin, mescaline, peyote?

14          A       Yes.

15          Q       In your opinion, Doctor, can the heavy and  
16 prolonged ingestion of so-called hallucinogenic drugs produce  
17 character or personality changes; in other words, are they  
18 mind-altering type drugs that can have that effect?

19          A       Yes.

20          Q       Incidentally, in addition to the facts and  
21 circumstances surrounding the homicides, themselves, and Mr.  
22 Watson's involvement with drugs and Manson, in forming your  
23 opinion did you also consider the neurological findings of  
24 Dr. Walter --

25          A       Yes.

26          Q       -- at UCLA?

27          A       There were other neurological, also; the one from  
28 Atascadero, which I also considered.

1 Q I understand that.

2 Did you also consider in forming your opinion the  
3 results of the psychological testing by Dr. Palmer of UCLA?

4 A Counsel, I'm not sure I have that report with me.

5 Q Very well, that's all right.

6 You didn't as far as you can recall; you didn't  
7 consider Dr. Palmer's psychological report?

8 A No.

9 Q Fine.

10 Did you consider in reaching your opinion not only  
11 the influence of Mr. Manson but the way Mr. Manson used drugs  
12 to heighten his influence over the members of his family?

13 A I considered that history, yes.

14 Q In other words, Mr. Manson made use of drugs  
15 together with his own personality to gain control over the  
16 members of his family; did you consider that fact?

17 A The fact that he may have attempted to do that,  
18 yes.

19 Q Did you form an opinion, Doctor, as to whether or  
20 not Mr. Manson, in fact, gained considerable control over the  
21 mind and the actions of Mr. Watson?

22 A I think there was a degree of control; to what  
23 extent, I can't say, counsel.

24 Q When you say to what extent you can't say, what  
25 do you mean by that, because you weren't there?

26 A Correct.

27 Q It would have been helpful, I take it, to you if  
28 you had actually been there at the Spahn Ranch at the time

1 these things were going on; is that a fair statement?

2 A Well, it is helpful to any physician to be able  
3 to examine an individual, for whatever reason, at the time  
4 that he is requested to evaluate him.

5 Q And you examined Mr. Watson almost two years after  
6 the events, themselves, that we are interested in; is that  
7 right?

8 A Just three or four days beyond two years, yes.

9 Q But is there any question in your mind at the  
10 present time that as a result of your examination and all the  
11 information that you have received that Mr. Watson was not on  
12 these nights able to maturely and meaningfully reflect upon  
13 the gravity of his contemplated acts?

14 A No.

15 Q And this opinion of yours founded solely upon what  
16 Mr. Watson told you, or have you also considered the testimony  
17 of Linda Kasabian?

18 A I have considered both versions of the story;  
19 there are lots of contradictions.

20 Q You understand there are some contradictions  
21 between -- and does it make any difference to you in forming  
22 the opinion that you have told us about, which version of the  
23 affair is the correct one, if either of them are?

24 A No.

25 MR. KEITH: You may examine.  
26  
27  
28

## CROSS-EXAMINATION

1  
2 BY MR. KAY:

3 Q Doctor Markman, you are not a court appointed  
4 psychiatrist in this case, are you?

5 A I'm not, no.

6 Q As a matter of fact, Mr. Keith got in contact  
7 with you and asked you as a favor to him if you would examine  
8 Mr. Watson; is that correct?

9 MR. KEITH: May the court please, I am going to object  
10 to that question, "as a favor to me." That's --

11 THE COURT: Objection sustained.

12 Q BY MR. KAY: All right, what did Mr. Keith tell  
13 you when he contacted you?

14 THE COURT: Sustained.

15 You examined Mr. Watson at the request of Mr.  
16 Keith; is that correct?

17 THE WITNESS: That's correct, your Honor.

18 Q BY MR. KAY: And Mr. Keith is paying you to  
19 testify here, is that true, or are you working for free -- or  
20 do you know?

21 MR. KEITH: I'd be willing to stipulate we have made  
22 no financial arrangements.

23 THE COURT: Is that correct, Doctor?

24 THE WITNESS: We haven't discussed it at this point, no,  
25 your Honor.

26 Q BY MR. KAY: Well, do you intend to get paid?

27 A I intend to submit a bill, yes, counsel.

28 Q You didn't prepare a report in this case; isn't

1 that true?

2 A That's correct.

3 Q Is there some reason why you didn't prepare a  
4 report?

5 A I wasn't asked to, counsel.

6 Q In other words, you weren't asked by Mr. Keith  
7 to prepare a report?

8 A That's correct.

18

#18

1 Q Doctor, in examining Mr. Watson, did you formulate  
2 any opinion about whether or not on the nights of the Tate-  
3 La Bianca murders Mr. Watson had the mental capacity to harbor  
4 malice aforethought?

5 A Yes.

6 Q What is your opinion?

7 A My opinion is that he did have the capacity to  
8 harbor malice.

9 Q And as you understand malice, that is the intent  
10 to kill?

11 A Express malice, yes.

12 Q In other words, that doesn't mean that he has to  
13 have an express hatred about the victims he kills, but he just  
14 has to have the intent to kill?

15 A That is correct.

16 Q And you felt that on both nights of murder that  
17 Mr. Watson did have the express intent to kill the seven  
18 victims?

19 A It would appear so, yes.

20 Q That is your opinion?

21 A Yes.

22 Q Did you form any opinion as to whether or not at  
23 the time of the murders that Mr. Watson was psychotic?

24 A I did not form an opinion.

25 Q And is there some reason why you didn't form an  
26 opinion?

27 A I am unable to do so.

28 Q You feel that it would just be guesswork on your

1 part?

2 A Yes, in the absence of further information,  
3 counsel.

4 Q Now, you state that you obtained some records or  
5 some other psychiatric reports from Mr. Keith, some of which  
6 were from the NPI, the Neuropsychiatric Institute at UCLA?

7 A Yes.

8 Q Did you receive these reports before or after you  
9 examined Mr. Watson?

10 A I believe I received the bulk of them before,  
11 counsel, based on the dates of the letters, the heading  
12 letters.

13 Q And I take it that some of these doctors like,  
14 say, Dr. Suarez and -- well, I take it you have worked with  
15 Dr. Suarez.

16 A Yes.

17 Q And Dr. Walter?

18 A Yes.

19 Q And Dr. -- Mr. Palmer?

20 A He is a doctor, Ph.D.

21 Q He is not a medical doctor?

22 A That is correct.

23 Q And I take it that these reports had some influence  
24 on you; is that correct?

25 A No.

26 Q They didn't have any influence on you?

27 A Only insofar as they were data that I used. That  
28 they in fact influenced my judgment, no.

1 Q How much would you say you relied on them, if you  
2 can answer that?

3 A The only thing I relied on significantly would  
4 have been the neurological examination, specifically the  
5 electroencephalogram that was done.

6 Q By Dr. Walters?

7 A By Dr. Walters.

8 The other examinations, other than I relied on  
9 no conclusionary statements by those examiners.

10 Q Did you state that you saw some of the records from  
11 Atascadero?

12 A Yes.

13 Q Did Mr. Keith give you a record of the EEG  
14 examination given Mr. Watson at Atascadero?

15 A Yes.

16 Q And did you take that into consideration?

17 A I did.

18 Q And you stated earlier that you took the  
19 neurological examination of Mr. Watson at Atascadero into  
20 consideration; is that correct?

21 A I took the earlier -- earlier I stated that I  
22 took the whole report into consideration and the neurological  
23 was part of that report, yes.

24 Q Did you take into consideration the conclusion  
25 of the doctor giving Mr. Watson the neurological examination  
26 at Atascadero was that he was a young adult with minor  
27 physical defects. Did you take that into consideration?

28 A I read it, yes.



1 Q What other reports did you take into consideration  
2 from Atascadero besides the EEG and the neurological?

3 A I have a report dated February 3, 1971, that  
4 includes the whole hospital case summary, counsel.

5 Q Now, did you take into consideration the report  
6 by Dr. Alfred Owre, a psychiatrist at Atascadero?

7 A Yes.

8 Q And did you take into consideration the findings  
9 of the staff at Atascadero?

10 A I reviewed them, yes.

11 Q Did you take into consideration the staff  
12 findings were that the patient --

13 MR. KEITH: Just a minute. I am going to object to this.

14 May we approach the bench?

15 THE COURT: Yes.

16 (The following proceedings were had at the bench.)

17 MR. KEITH: I would object to Mr. --

18 MR. BUGLIOSI: We are going onto another subject,

19 MR. KAY: We are not going into it anyway.

20 MR. KEITH: You are going to withdraw your question?

21 MR. KAY: Yes.

22 MR. KEITH: All right. That settles that.

23 (The following proceedings were had in open court.)

24 Q BY MR. KAY: Doctor, when did you examine Leslie  
25 Van Houton?

26 MR. BUBRICK: May I interpose an objection on the ground  
27 it would be immaterial?

28 MR. KAY: He testified on direct examination. I just

1 THE COURT: He can give us the date.

2 THE WITNESS: I had it in my possession just a minute  
3 ago, counsel. It must be here. Here it is, counsel. On  
4 January 23, 1970.

5 Q BY MR. KAY: Now, on direct examination you --

6 A Correction. January 26, 1970.

7 Q On direct examination you stated that you treated  
8 two individuals with overdoses of belladonna; is that correct?

9 A That is correct.

10 Q And would you state to the court and jury the  
11 reactions of these people? What were their physical reactions?

12 A They were both unconscious.

13 Q How long a period did they stay unconscious?

14 A One stayed unconscious for roughly 24 to 26 hours.  
15 The other unconscious for over 12 hours.

16 Q What would you expect the physical characteristics  
17 of a person to be if that person was under the influence of  
18 belladonna, speed, and LSD?

19 A That could involve a myriad of presentations. Each  
20 individually would respond differently depending on the  
21 degree of tolerance he had to those drugs, the amount of  
22 the relationship between the drugs and his predisposing  
23 personality that antedated the use of the drugs.

24 Q What is tolerance? What do you mean by that?

25 A Tolerance is the condition in which an individual  
26 who takes a specific drug requires increased doses of that  
27 drug to achieve a similar effect over a period of time.

28 Q So, in other words, if a person, user of LSD, say,

1 takes LSD, in order to get the same effect that he got the  
2 first couple of times he took it, he would have to -- he would  
3 build up a tolerance, so he would have to take an increased  
4 amount to get the same effect as he got the first couple of  
5 times.

6 A With the proviso that it be taken regularly.

7 You could get the same effect of, say, 250  
8 micrograms of LSD today, not take it again for four months,  
9 and then get the same effect four months down the road.

10 Q Right.

11 So, in other words, a so-called chronic user could  
12 build up a tolerance to, say, LSD and speed?

13 A Chronic daily user, yes.

14 Q Or, say, a person that used it three or four  
15 times a week?

16 A That would be on the borderline. Some would, some  
17 wouldn't.

18 Q You mean you run into people that take LSD everyday?

19 A Yes.

#19

1 Q Is that what you would call a chronic user?

2 A No, I think if you took LSD twice a week for three  
3 years, I would term that a chronic use, also, counsel.

4 Q I take it that you consider Mr. Watson a chronic  
5 user of LSD and speed, don't you?

6 A At this point, I do not, no; he hasn't had any  
7 LSD in at least a year.

8 Q Say, at the time that he was with the Manson family.

9 A By history, it would appear, yes, that he was  
10 using LSD chronically.

11 Q Now, you state that the murders, the act of the  
12 murders, in and of themselves give you a basis for finding  
13 that Mr. Watson had diminished capacity; is that correct?

14 Is that what you said?

15 A Basis for the inability to meaningfully and  
16 maturely reflect, counsel.

17 Q Let me ask you this, Doctor, didn't Mr. Watson tell  
18 you that Mr. Manson told him, for instance, on the night of  
19 the Tate murders, to go up to the Tate house and kill the  
20 people as gruesome as possible?

21 A He didn't identify it as the Tate house. As I  
22 recall, he identified it as, in Mr. Watson's statement, "To  
23 Terry Melcher's house; he wanted me to kill everybody at the  
24 place and make it look gruesome."

25 Q And didn't he do that?

26 A Yes.

27 Q Are you aware that the telephone wires, the  
28 communication wires leading into the Tate residence were cut --

1 A Yes.

2 Q -- by Mr. Watson?

3 A Yes.

4 Q And you say that shows diminished capacity?

5 MR. KEITH: Object to the question; he didn't say that  
6 that particular act showed diminished capacity.

7 THE COURT: Is that your question, Mr. Kay?

8 Q BY MR. KAY: Well, didn't you state in your  
9 reports that Manson -- I will go on to something -- may I have  
10 just a moment? I haven't had a chance to read the doctor's  
11 note.

12 THE COURT: Go ahead.

13 MR. KAY: Pardon me, Doctor; they are not very long.

14 THE WITNESS: Good luck.

15 MR. KAY: My father has bad handwriting, also.

16 THE COURT: Your handwriting is typical of a doctor's?

17 THE WITNESS: Probably, your Honor.

18 Q BY MR. KAY: Did Mr. Watson -- I believe it is  
19 on what would be the second page; you don't have the pages  
20 numbered -- but, the second page, did Mr. Watson tell you who  
21 drove to the Tate house, the house on the first night?

22 A Yes.

23 Q Who did he say?

24 A Linda or Sadie.

25 Q Linda or Sadie?

26 A Yes.

27 Q Doctor, don't you agree that the fact that almost --  
28 well, actually over two years have passed between the time of

1 the murders and the time of your examination.

2 Don't you agree that this makes it a little hard  
3 to form an opinion about Mr. Watson's mental state of mind at  
4 the time of these murders?

5 A To the degree that I would not render or could  
6 not render a specific psychiatric diagnosis, yes.

7 Q You are lucky you don't wear glasses -- did Mr.  
8 Watson tell -- I believe this would be on the third page --  
9 well, it is not broken down into paragraphs, but it would be  
10 about in the middle of the page -- that he stabbed Mr. La Bianca?

11 Did he state that?

12 A Yes.

13 Q And he used the name "Mr. La Bianca"?

14 A I'm not sure, counsel; I don't know for sure. It  
15 is not in quotations, so it doesn't necessarily mean that I  
16 took it as a direct quote.

17 Q But it is there?

18 A Yes.

19 Q And did he say that afterwards he washed his hands  
20 and changed his clothes -- on the next line?

21 A Yes. Well, the line after it; there is an  
22 intervening line.

23 MR. BUGLIOSI: May we have a few minutes, your Honor,  
24 because we have just been given these notes about a half hour  
25 ago.

26 THE COURT: Why not punish the doctor by making him read  
27 them, himself?

28 MR. BUGLIOSI: Actually, his penmanship is far more  
legible than most doctors, I think; no particular problem

1 there, but we just got the notes about a half --

2 THE COURT: You want to take some time to read them;  
3 is that what you want to do?

4 MR. KAY: I'm almost finished.

5 Q Did he ever tell you, Doctor, that on the night  
6 of the Tate murders that he took cocaine?

7 A No, counsel.

8 Q And what were the dates, again, that you examined  
9 Mr. Watson?

10 You said one time in September --

11 A August 13, 1971 and September 2, 1971.

12 Q Was there any reason for the break in the  
13 examination?

14 A There was no break. I completed the examination  
15 and wanted to get an indication as to whether or not there  
16 might be a change in the three-week hiatus, whether there was  
17 a stable condition that I saw on the 13th or not.

18 Q Was there a stable condition?

19 A Based on the examination, there were no changes  
20 between my two examinations in his condition.

21 Q Did you ever get together with either Mr. -- well,  
22 with Mr. Keith to have a conference with him about your  
23 testimony?

24 A I have talked to him, yes.

25 Q Doctor, how many capital cases -- and by that I  
26 mean a case where the defendant is faced with a possibility of  
27 a death sentence -- how many capital cases have you testified  
28 in court?

1           A       I believe in the neighborhood of 10, counsel; I  
2       can't say for sure. I recall three specifically.

3           Q       Now, out of those 10 cases, Doctor, how many times  
4       have you testified for the prosecution?

5           MR. KEITH: Object to the question as immaterial.

6           THE COURT: Overruled.

7           Q       BY MR. KAY: Once?

8           A       It's hard to say, counsel, because in most of  
9       the instances it was at court appointment.

10          Q       I mean, how many cases were you called to the stand  
11       by the prosecution?

12          A       By the prosecution? I would only be guessing:  
13       One or two times, maybe.

14       20 fls.



#20

1 Q Once that you recall?

2 A Once, I believe, that I recall.

3 Q So, in other words, by your recollection about  
4 90 percent of the time you were called to the stand by the  
5 defense in a capital case?

6 A When I was called, probably, that is a good figure,  
7 yes.

8 Q Doctor, when you state that on the two nights of  
9 murder that Mr. Watson could harbor malice aforethought, in  
10 other words, that he could formulate the intent to kill, did  
11 you come to an opinion or conclusion as to at what point did  
12 he formulate intent to kill?

13 In other words, did he formulate the intent to  
14 kill both nights when he left Spahn Ranch?

15 A Oh, I don't know that, counsel.

16 Q So you didn't form an opinion as to what time he  
17 formulated the intent to kill, just that he did?

18 A Yes.

19 MR. KAY: I have no further questions.

20

21

REDIRECT EXAMINATION

22

BY MR. KEITH:

23

24 Q When you are court appointed on matters, is it  
25 often the case that you are asked to give confidential reports  
26 to the defense counsel?

26

27 A Yes.

27

28 Q And you don't have any bias or prejudice in favor  
of defense counsel, do you, just because you are oftentimes

1 asked to report to them confidentially your findings and  
2 opinion, to a particular defendant?

3 A No. As a matter of fact, counsel, I can recall  
4 two cases where I was not used by virtue of the fact that the  
5 report was not in the defense counsel's requirements as a  
6 defense and I was not called in those cases.

7 Q And you have no hesitation about testifying in  
8 behalf of the prosecution, do you, if your findings are such  
9 that the prosecution believes you will be a helpful witness  
10 to them?

11 A That is correct.

12 MR. KEITH: I don't have anything further.

13  
14 RECROSS-EXAMINATION

15 BY MR. KAY:

16 Q Doctor, you never contacted either Mr. Bugliosi  
17 or myself, did you, about what your testimony would be in  
18 this case?

19 MR. KEITH: I will object to the question. Why should  
20 he? It is irrelevant. Why should he contact them?

21 THE COURT: You didn't, is that right, Doctor?

22 THE WITNESS: I talked to Mr. Bugliosi before the  
23 hearing today, or before court, this afternoon, but not before  
24 that, no.

25 Q BY MR. KAY: That was about 1:20 or 1:15?

26 A Yes.

27 MR. KAY: No further questions.

28 THE COURT: Whenever he spoke to you you answered him;

1 is that correct?

2 THE WITNESS: Yes.

3 MR. BUGLIOSI: Except the first time, right, Doctor?

4 MR. KAY: No further questions.

5 THE COURT: Thank you, Doctor. You may be excused.

6 MR. BUGLIOSI: I think we had better approach the  
7 bench, your Honor.

8 (Unreported discussion at the bench.)

9 THE COURT: I might tell you ladies and gentlemen that  
10 the defense is about concluded, lest you become a little  
11 anxious about the time element. We will assure you that in  
12 about 10 or 15 minutes longer they will be through. However  
13 the witness cannot be here today and Monday we will not hold  
14 court.

15 So at this time we will recess until Tuesday, the  
16 21st, at 9:30 a.m.

17 Now, we are having another weekend coming up.  
18 Let me again caution you do not form or express any opinion  
19 in this case. Do not discuss it among yourselves or with  
20 anyone else. Keep your minds open and please again bear in  
21 mind what I told you about the news media. Tuesday at 9:30.  
22 Thank you.

23 (A recess was taken until Tuesday, September 21,  
24 1971 at 9:30 a.m.)  
25  
26  
27  
28