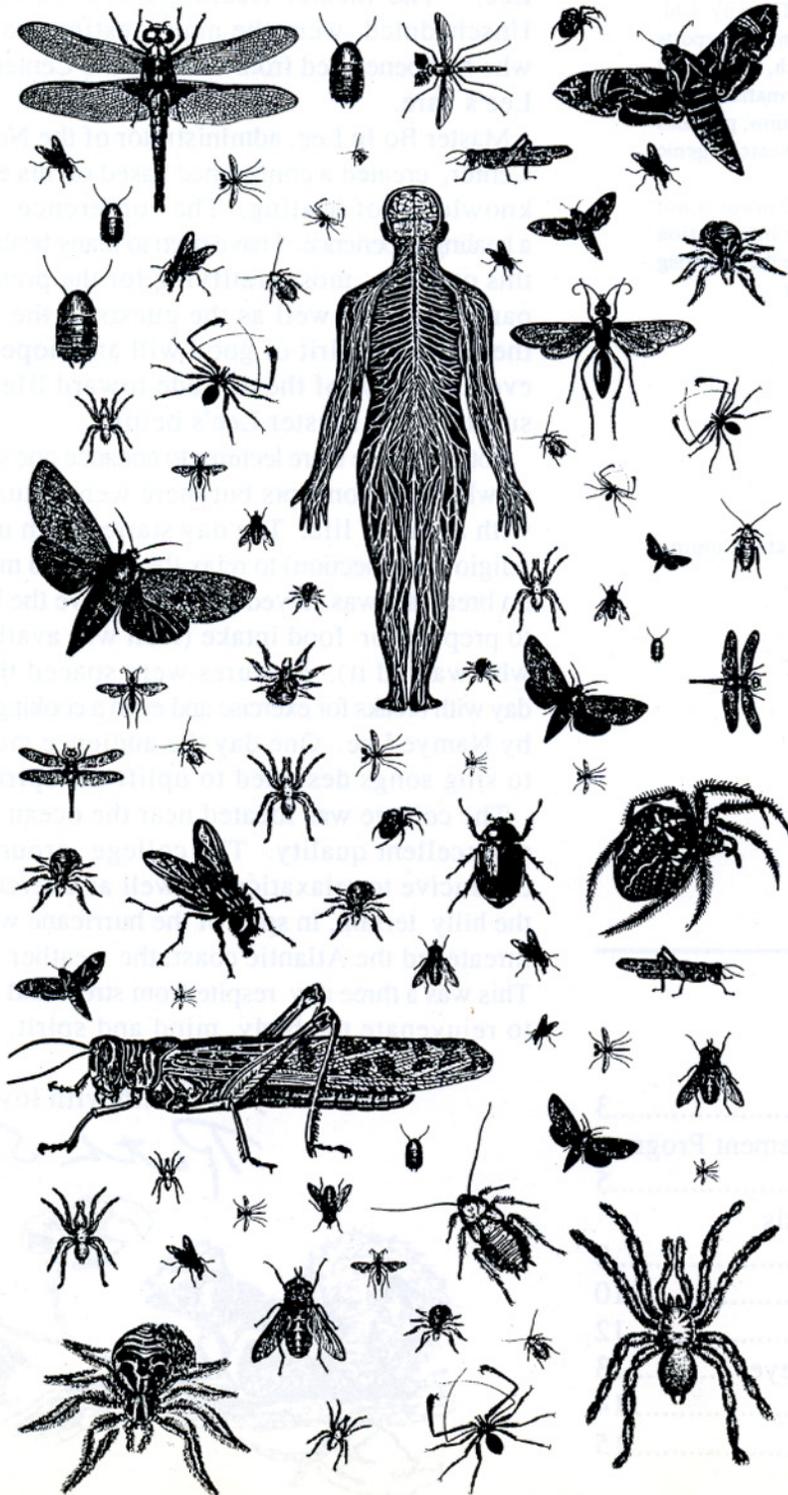


# CANCER FORUM

PUBLICATION OF THE FOUNDATION FOR ADVANCEMENT IN CANCER THERAPY, LTD.

**THERE ARE OVER 500 SPECIES  
THAT HAVE DEVELOPED  
RESISTANCE TO PESTICIDES.  
AND ONE THAT HASN'T.**



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*Join us. Call 1-800-EAT SAFE. Together we can do what Washington won't.*

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## Foundation for Advancement in Cancer Therapy

Foundation for Advancement in Cancer Therapy, Ltd. is a non-profit, tax-deductible organization. It supports and encourages biological cancer research, nutritional science investigations; disseminates information about non-toxic treatment for cancer to cancer victims; provides financial assistance; and fights to eliminate carcinogenic substances from the environment.

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Dear Reader,

I was invited to be one of the speakers at the East Meets West International Healing Conference sponsored by the New Life Health Center at Endicott College in Massachusetts in August. The other speakers were Leslie Blackhall, M. D., John Foster, M.D., Ervin Lewis, M.D., David Perlmutter, M. D., Master Bo In Lee and Seung Lee. The theme: Healing Body, Mind and Spirit. Unscheduled were the many testimonials by patients who had benefitted from a stay at the Center under Master Lee's care.

Master Bo In Lee, administrator of the New Life Health Center, created a conference based on his comprehensive knowledge of healing. The conference itself became a healing experience. I have been to many health symposiums; this one was most gratifying for the presenters, as we participated as well as the guests in the activities and the spirit. A spirit of good will and hope pervaded the event because of the attitude toward life which is the substance of Master Lee's being.

Not only were there lectures to enhance one's understanding of wholistic concepts but there were actual experiences with a way of life. The day started with meditation (no religious connection) to relax the body and mind. Officially no breakfast was served in order to give the body a chance to prepare for food intake (fruit was available for those who wanted it). Lectures were spaced throughout the day with breaks for exercise and even a cooking demonstration by Namyee Lee. One day the audience moved outdoors to sing songs designed to uplift the spirit of healing.

The college was located near the ocean so the air was of excellent quality. The college grounds were very conducive to relaxation, as well as exercise because of the hilly terrain. In spite of the hurricane warnings which threatened the Atlantic coast, the weather was beautiful. This was a three day respite from stress and an opportunity to rejuvenate the body, mind and spirit.

To your health with love,

*Ruth Sackman*



Cancer is a disease most dreaded by many people, generally because so little is known about it. No one admits to knowing the cause of cancer, and the American Cancer Society tells us that if we send more money, the cure will soon be found. President Nixon's well intended war on cancer, now many years after its inception, has hardly won a battle. Yet the news reports are filled with new cases of cancer, such as the cluster of leukemia in school children in Rutherford, New Jersey, or in asbestos workers, etc. Reporters take us into cancer treatment centers and inspire us with huge powerful looking machines and new techniques and drugs that are always proclaimed as the new hope. But what is the record?

In 1963 the Journal of the American Medical Association re-

ported that surgical treatment of breast cancer at John's Hopkins Hospital resulted in a five year survival rate for radical mastectomy of 52% and a ten-year survival rate of 33%. They further reported that there was a surprising uniformity of long-term end results despite widely differing therapeutic techniques. And they claimed that there was only a "slight improvement" in the survival rate after treatment. A later study showed that in patients with breast cancer (moderate degree) a ten year survival rate of 40% could be expected for **untreated** persons. This is, in fact, superior to the ten-year, 33% survival rate reported **after surgery** at John's Hopkins.

Men with cancer of the prostate fare just as well without surgery. A study reported in 1972 showed that of 148 elderly men with prostate cancer and undergoing no treatment, there were no cancer deaths and only 6.8% of the patients **showed any advancing of the cancer**. This rate was regarded as equal to the complication rate for another group that was treated with surgery and estrogen. **In other words, there was no benefit from treatment, especially surgery,**

in reducing death rates in either breast cancer in women, or prostate cancer in men. Unfortunately, modern medicine has failed to grasp a full understanding of what cancer really is, despite the fact that research has given us some very important clues.

You have probably heard that cancer is not contagious. You can be near cancer, you can touch a tumor, you can live with people who have cancer and you will never "catch" it. Cancer cells have been injected into people, tumors have been transplanted and healthy persons promptly rejected the cancer. The body savagely attacks cancer and destroys it. Even persons who have

cancer can defend against it, but the catch is that their defense is

## **WE CAN PREVENT CANCER**

### **Feeding the Body's Immune System**

by Mark C. Marvin, R.D.

limited. Depending on the number of cancer cells injected, the cancer would become established in from 11% to 86% of patients with terminal cancer. I repeat, healthy volunteers had a very effective defense against cancer; their bodies attacked the cancer cells with white blood cells, and with antibodies. For this reason the researchers concluded that in cancer patients, there is a defective defense mechanism. A person develops cancer only when the body cannot protect itself against it.

Many people develop more than one cancer at one time; some even have three, four, or five independent cancers. One study showed that after treatment for leukemia in children, some children develop Hodgkin's Disease (cancer of the lymph nodes) possibly because the treatments, radiotherapy and chemotherapy, can cause cancer.

Cancer is a disease of impaired immunity to a type of cell that is usually very easily killed by your body, but defense against other organisms fails to. Very few persons die from cancer. In over 50% of cancer deaths, the cause of death is an overwhelming secondary problem.

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This secondary problem is often pneumonia caused by gram negative bacilli or by a fungus, organisms that are with us at all times, but only overwhelm us when our defenses fail.

When organs are transplanted, immune ability is deliberately sabotaged to prevent the body from attacking the outside organ. If the body attacks a new organ, it will be rejected. Well, in persons receiving this immuno-suppressive therapy there is a 10,000 increased chance of developing cancer, clearly showing how closely defense against cancer is linked to other defenses, such as defense against new tissue, bacteria, and fungus. People do not die from cancer, but usually succumb to secondary problems, and often to blood loss if major blood vessels are cut, and sometimes to general exhaustion.

The thymus is a small gland located in your chest just behind the breast bone. It was thought to be the gland of childhood because it became smaller into adulthood. This "insignificant" gland is being studied more closely as it appears to be the key to your body's defense against infection and especially cancer. In the thymus, the white blood cells ( your body's Marine Corps) undergo unknown modification which changes them into cancer and bacteria killing cells. Before these white blood cells reach the thymus they become efficient destroyers of outside cells.

Persons who have diseased thymus are known to have a greatly increased chance of cancer. Hodgkin's Disease is postulated as a disease "due to thymic dysfunction" because of the poor function of the thymus found in patients with Hodgkin's Disease and possible benefit is cautiously suggested from the implantation of thymic tissue.

An animal study showed that the thymus and other lymph tissue became exhausted during the course of cancer, and human studies have even pinpointed the tissues of the thymus that fail during cancer.

This has been an overly brief account of the role of your defense against cancer, but now I pose the question: What can we do to protect ourselves and our thymus controlled defense against cancer?

First, keep in mind that the thymus is a lymph

tissue, like the lymph glands in your neck and your tonsils and as a lymphoid tissue it is very susceptible to stress and is likely to shrink and regrow during emotional stress, infection, bodily injury, surgery and nutritional deficiency.

Any type of stress causes the adrenal glands to produce large amounts of cortisone and the more powerful hydro-cortisone. These hormones allow your body to convert protein into glucose so that you might better deal with the stress. Among the first proteins to be converted to glucose are those of the lymph and especially the thymus glands, but protein from all over your body is converted to glucose as long as the stress continues. One vitamin, especially pantothenic acid, protects the thymus from shrinking away.

Deficiencies of pyridoxine (B6) and of zinc can cause the thymus to malfunction with a resultant loss of immune defense ability to fight cancer. However, don't limit your nutritional adequacy to just these three nutrients because vitamins are necessary for proper defense and their role in maintaining the health of the thymus may not be clear yet. A diet adequate in all vitamins, minerals and amino acids (protein), primarily **from natural sources**, cannot be understressed for a healthy person, let alone a person with cancer.

Pantothenic acid and Vitamin B<sub>6</sub> are found abundantly in foods that generally supply the B complex. Especially valuable sources include: wheat germ, rice polishings, brewer's yeast, legumes, whole grains generally and organ meats. It must be remembered that the B complex of vitamins can be synthesized by intestinal bacteria so that any food supplying vegetable fiber or milk sugar (lactose) can contribute to pantothenic acid and Vitamin B6 intake.

Zinc is common to many foods, especially so to oysters, but also to whole grains, legumes and nuts. Zinc in animal products is readily available, but that from vegetable sources can be chemically combined with phytates and may be insoluble in the digestive tract. This problem is avoidable if whole grains, rich in zinc, are yeast fermented for at least two hours before cooking. The action of the yeast breaks down the phytate and makes the minerals, zinc and others, available.☼

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# NEW BREED NUTRITIONAL IMPROVEMENT PROGRAM

By Alan H. Nittler, M.D.

*Detoxification—methods used to relieve the body of accumulated and stored toxins from elements such as: pesticides, fungicides and other contaminants in our food supply—is usually an essential part of an alternative healing program. Alan Nittler, M.D., now deceased, used the following techniques in his practice. Although I strongly recommend detoxification should be supervised by a competent guide, at least for the first time, I have decided to print this article just to acquaint you with some of the detoxification systems—Ruth Sackman, Editor.*

## **Introduction:**

If you are a neophyte to nutritional concepts, you are probably beginning to wonder which way is up. Even to one somewhat indoctrinated into nutritional concepts, the specifics may be a bit strange or confusing. Let me try to explain: The goal of my Nutritional Improvement Program is to give your body every advantage to function under optimal nutritional conditions. In order to accomplish this, certain ground rules must be followed. Basically, they are to cleanse the body, to feed it the correct foods, to supply the necessary vitamins, minerals, proteins, lipids, carbohydrates, to provide optimal enzymes and to be as sure as possible that the body is capable of utilizing these items put into the mouth. This is only one of the several integral parts of the reason for the Nutrition Program whose motto is: To locate, identify and correct nutritional deficiencies.

## **What to Do to Cleanse the Body:**

The three day apple juice cleansing program is probably the simplest and easiest to accomplish. All you do is consume four quarts of unfiltered apple juice per day for the three days if you weigh about 150 lb. Add a quart each day if you weigh 50 lbs. more and subtract it if you weigh 50 lbs. less. Be sure to drink the full quota each day. It may prove to be a chore for you, but it is necessary.

It is better to overdrink the quota than to underdrink. On the evening of the third day, take a mixture of four ounces each of lemon juice and olive oil, mix with an egg beater and drink immediately. That is all there is to it. If you are extra thirsty during the day, you may have some pure distilled water.

An alternative method, if you choose not to use apple juice, is to substitute grape juice or watermelon. If possible, get organic juice as sold in health food stores. The grape juice should be diluted 1:3 with distilled water.

A third choice would be to utilize the lemon juice fast. Here you freshly squeeze eight ounces of lemon juice and dilute to 1 1/2 quarts with pure water. This is your major intake for the day. Space intake over the day by taking two ounces each time. Additionally, on the first day, take 2 tablespoonfuls of beet juice, four on the second and eight on the third day. That is the total program.

During the three day fast, regardless of which method is used, you are not to take any vitamin, mineral or other type tablet or medication or supplement unless specifically told to do so. Drugs prescribed by your doctor are another story since he is the one and only one to judge as to whether they are to be taken or not. You may drink fluid in the form of pure water if desired, but nothing else. The point is to give the body as much chance as possible to eliminate toxins, thus the less effort needed to handle immediate intake problems, the more energy there is to cleanse the body.

## **What to Expect from Body Cleansing:**

You can expect to have good feelings. You will begin to think and function better in all regards. However, you certainly can expect to have frequent, loose and aromatic stools. They may be black in color if your liver has been sluggish. You may even find some stones in the stool if you

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examine the contents thoroughly. These used to be gallstones!

Another possibility exists. If your body cleanses very rapidly and your excretory organs (liver, bowels, kidneys, skin and lungs) cannot handle the overload, the poisons that you are liberating from the tissues can actually poison yourself. You are poisoning yourself with your own poisons. This will make you feel poorly or downright sick. The symptoms are commonly respiratory, but they could be the same old complaints that you have had for years. Coming down with a severe chest cold is a common occurrence. You will suffer, but it is a good thing if you can stand it. It means more thorough cleansing. However, if you cannot, do not be discouraged, but just add some fruit into your dietary to slow the cleansing processes. It thus becomes more bearable for you but you have lost some of the value of the program and can try again in four weeks. Do not be discouraged since you have gained somewhat and can look forward to a less difficult second attempt.

#### How to Come Off the Fast:

NEVER start eating all you desire immediately after coming off the fast. This will put you right back where you were before the fast almost immediately. What you should do is to start eating fruit along with your juices. Do not eat citrus fruits from this time onward. Gradually add in more fruit, then more raw vegetables as salads. Other foods can then be included. The process of de-fasting should take about a week or longer if you desire.

#### New Breed Enrichment Dietary:

The primary aim of the dietary is to provide the body with maximum nutrients and minimal calories. This allows maximum benefit and little chance of obesity. Foods with maximum nutritive value and minimal caloric content include the raw, fresh, unprocessed foods grown organically.

Basically, your dietary should include whole foods, commonly called natural and organic. The more varieties consumed, the more likely you have not allowed deficiencies to creep in. One should make selection from 1) fruits and vegetables, 2) proteins (meat, fish, fowl, eggs), 3)

grains and 4) dairy products (cheese, yogurt, and cream). These products should be eaten as raw as possible and freshly gathered. Exception to this rule are foods that are likely to be infested with parasites. Animal foods are particularly susceptible to infestation and contamination.

Anthropological studies indicate that man is both a carnivore and an herbivore, called an omnivore. New Breed Enrichment Diet suggests that animal protein is needed for health. If animal food is not wholesome, it is because it is contaminated and not because of the contents itself. Be sure to choose quality animal protein for your own use. Adequacy of stomach hydrochloric acid tends to guard the body from infestations.

Lipids are extremely important to the body. Lipids, commonly called fats and oils, are found in vital areas of all cells of the body. Normal cellular metabolism or biochemical activities cannot take place in the absence of good fats and oils. Good fats and oils do not come from hydrogenated oils or homogenized products. Clear oils, even as found in health food stores, are not good lipids. Good lipids come from avocados (fresh raw), nuts and seeds (also fresh and raw), cream and fertile eggs. Raw eggs (organic) are a very high quality food. (*See opposite page for more on eggs.*) Good lipids cause high blood cholesterol, uric acid and triglycerides to decrease. They also improve liver function.

Thus, we see that a good dietary consists of protein, lipid and moderate complex carbohydrate. Complex carbohydrates are the polysaccharides that the body must work for in extracting energy and does not include sugar or easily available sweets. Choose foods from each of the major categories which are whole foods and then consume a variety of them each meal. This makes a whole dietary consisting of whole foods for feeding a whole body.

#### Enzymes:

Enzymes, in a sense, are not nutrients since they do not become digested or metabolized. They are, however, very important since they do cause digestion and metabolism to take place. They are normally found in raw foods. These raw, natural type compounds from both animal and

plant sources are taken into the system to bolster the enzyme integrity of the body. They have both digestive and metabolic functions. There seems to be no overdose possible with enzyme intake.

As supplements, special proteolytic enzymes ensure digestive capability as well and more importantly, absorption into the system. They are, therefore, taken at meal time and also at special between meal times. When needed, these enzymes are of utmost importance to nutritionally unbalanced persons.

**Rest and Exercise:**

During the three day fast, it is most desirable to obtain as much rest as practical. You are certainly not expected to do more than your usual life pattern, but even the usual should be reduced. Give your body maximum cooperation in its cleansing procedures. Therefore, during the first few days of the Nutritional Improvement Program allow yourself as much time for physical and emotional rest as possible.

Likewise, exercise should be less strenuous.

**Conclusion:**

The Nutritional Improvement Program can be effective in order to attain nutritional homeostasis. It is unrealistic to expect your body to become cleansed in just three days. Do it routinely for maximum benefits.

After attaining nutritional homeostasis, the Nutritional Improvement Program can be repeated quarterly or semi-annually for maintenance. ❀

*Here is the vitamin and mineral content of 100 grams of eggs—about two medium-sized ones.*

VITAMIN A.....	1140 International Units
VITAMIN D.....	50 units
VITAMIN E.....	3 milligrams
<b>VITAMIN B</b>	
Thiamin.....	120-150 micrograms
Riboflavin.....	340 micrograms
Niacin.....	1 milligram
Pyridoxine.....	22 micrograms
Pantothenic acid.....	800-4800 micrograms
Biotin.....	9 micrograms
CALCIUM.....	68 milligrams
PHOSPHORUS.....	224 milligrams
IRON.....	2.52 milligrams
COPPER.....	23 milligrams
MAGNESIUM.....	03 milligrams
CHLORINE.....	106 milligrams

**The Egg**

Oh who that ever lived and loved  
 Can look upon an egg unmoved?  
 The egg it is the source of all.  
 'Tis everyone's ancestral hall.  
 The bravest chief that ever fought,  
 The lowest thief that e'er was caught,  
 The harlot's lip, the maiden's leg,  
 They each and all came from an egg.

The rocks that once by ocean's surge  
 Beheld the first of eggs emerge—  
 Obscure, defenseless, small and cold—  
 They little knew what eggs could hold.  
 The gifts the reverent Magi gave,  
 Pandora's box, Aladdin's cave,  
 Wars, loves, and kingdoms, heaven  
 and hell  
 All lay within that tiny shell.

Oh, join me gentlemen, I beg,  
 In honoring our friend, the egg.  
 —Clarence Day

**Eggomania**

Consider the egg. It's a miracle,  
 A thing so diverse for its size  
 That we hardly can help growing lyrical  
 When given the Pullet Surprise.

The scope of this peerless comestible  
 Must drive other foods to despair  
 Since it's not only fully digestible  
 But great for shampooing the hair.

It's boilable, poachable, nogg-able;  
 It scrambles, it makes a sauce thicken.  
 It's also the only reliable  
 Device for producing a chicken.  
 —Felicia Lamport

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# Skin Therapy and Osteoporosis

## The Multiple Roles of a Remarkable Hormone

A woman's bones are strongest in her early 30's. Afterward, there is a gradual decline in bone mass until menopause when bone loss accelerates for 3 to 5 years, and then continues at about 1 to 1.5% per year. Because of the accelerated bone loss during menopause, most doctors have assumed that the rapid decline in estrogen that occurs during menopause is the cause of this bone loss. In the 1960's, when estrogen was found to reduce the side effects of menopause, including hot flushes and the loss of bone mass, doctors began giving their patients large doses of estrogen at menopause and thereafter.

However, upon more thorough examination, studies in the United States indicate that estrogen replacement therapy was found to produce a wide variety of side effects, including, most notably, a significantly increased risk of endometrial cancer in women with an intact uterus. Other known side effects of estrogen therapy are:

- 1) increased salt and water retention, resulting in increased risk of hypertension.
- 2) increased blood clotting, resulting in increased risk of heart attack and stroke.
- 3) increased fat synthesis, resulting in unwanted weight gain.
- 4) increased risk of uterine fibroids and breast fibrocysts.
- 5) increased risk of liver dysfunction and gall bladder attacks.
- 6) increased risk of pituitary cancers and possibly breast cancer.

Moreover, it was found that after 3 to 5 years of estrogen treatment, the ability of estrogen to prevent the loss of bone mass associated with menopausal aging declines rapidly, resulting in rapidly accelerated bone loss leading to osteoporosis.

### Adding Progesterone to Estrogen

When scientists observed the lethal side of estrogen replacement therapy, they reasoned that giving progesterone (the other sex hormone lost during menopause) in addition to estrogen, might counteract the side effects of estrogen.

It was found that the combination of estrogen and

(synthetic) progestins eliminated the risk of endometrial cancer without diminishing the benefits of estrogen therapy. In the mid 1970's, doctors meeting at the Mayo Clinic concluded that estrogen should never be given to any woman with an intact uterus without also giving her progestin to protect against endometrial cancer. This 20 year old consensus still eludes some doctors.

### Dangers of Synthetic Progestins

Because synthetic progestins decrease the side effects of estrogen and because the sale of synthetic hormones has produced huge profits for the pharmaceutical industry, it has been assumed since the 1970's that only estrogen (either natural or synthetic) can help reduce bone loss in aging women, that the only purpose of giving progestins, is to reduce estrogen's side effects, and that synthetic progestins are just as effective and no more risky than natural progesterone. Some doctors have held to these assumptions in spite of persuasive scientific evidence that:

- 1) Synthetic progestins produce numerous adverse side effects.
- 2) Natural progesterone does not produce these side effects.
- 3) Natural progesterone (and, to some degree, progestins) are far more effective in preventing and treating osteoporosis than estrogen!

Synthetic progestins produce adverse effects on blood lipids, and can elevate blood pressure, in contrast to favorable effects of natural progesterone, which improves cholesterol/triglyceride profiles.

### How Estrogen Temporarily Slows Bone Loss

Bones are living tissues that continually renew themselves throughout life. Bone is primarily composed of a collagen matrix, strengthened by calcium and magnesium.

Bone forming cells are comprised of osteoclasts and osteoblasts. Osteoclasts constantly travel through bone tissue seeking older bone that has hardened (become mineralized) and needs to be replaced. Osteoclasts resorb (dissolve away) older bone tissue, leaving tiny unfilled spaces behind. Osteoblasts then move into these spaces and produce new bone tissue.

This process of dissolving older bone tissue and generating new bone tissue is the mechanism by which our bones are repaired, regenerated, and maintained in strength.

Osteoporosis occurs when osteoclasts dissolve more bone tissue than osteoblasts are able to replace.

### **How Progesterone Reverses Bone Loss**

Progesterone, on the other hand, stimulates the production of osteoblasts, which are required to generate new bone tissue. Natural progesterone has been shown to stimulate osteoblast mediated new bone formation, which is required to prevent osteoporosis. Some synthetic progestins also stimulate new bone formation, but to a lesser degree than progesterone.

In a lengthy review on the effects of progesterone on bone formation (Endocrine Reviews 1990), J.C. Prior of the university of British Columbia in Canada concluded that:

*“Experimental epidemiological and clinical data indicate that progesterone is active in bone metabolism. Progesterone appears to act directly on bone. Progesterone seems to promote bone formation and/or increase bone turnover.”*

### **Clinical Benefits of Transdermal Progesterone**

Studies that have been conducted have shown that natural progesterone is better and safer than synthetic progestins. It has also been shown that transdermal progesterone can readily penetrate the skin to stimulate therapeutic bone regeneration.

The foremost exponent of natural transdermal progesterone therapy for osteoporosis is California physician John R. Lee, M.D., who uses a skin cream containing progesterone derived from an extract of wild yam, which penetrates the skin safely and effectively. Dr. Lee has published the results of his extensive clinical experience with progesterone skin cream in Lancet 1990 and others including the book *Natural Progesterone: The Multiple Roles of a Remarkable Hormone*. \*

In a study of 100 postmenopausal women, aged 38 to 83, many of whom had suffered one or more bone fractures and had lost height (common signs of osteoporosis), Dr. Lee reported that “97 of them showed 5% to 40% new bone formation within 6 to 48 months after using a wild yam progesterone cream. Some women attained as much as 105% of the average bone density of a 35 year old. It was common to

see a 10% increase in bone density during the first 6 to 12 months of treatment and an annual increase of 3% to 5% until stabilization at the bone strength level of healthy 35 year olds.” Dr. Lee added that “the occurrence of osteoporotic bone fractures dropped to zero.”

—Dave Roderick

*This article is reprinted from Clinical Nutrition News*  
\* Dr. Lee's book is available from FACT. See Book List on page 15.

*Editor's note: Science News printed an article, which we reprinted in Cancer Forum (Vol. 13, Nos. 1/2 and No. 7/8) about how pesticides used in agriculture mimic estrogen. When these chemical residues remain on and in the food and are then ingested by the consumer, they create a hormonal imbalance of too much estrogen and a deficiency of progesterone. At the 1994 FACT Cancer/Nutrition Convention, John Lee, M.D., presented his research with natural progesterone used to normalize this hormonal imbalance.*

*Dr. Lee found that those of his patients who were diagnosed with breast cancer or gynecological cancers had a higher than normal estrogen level. From a report he had heard about the deficiency of progesterone, he decided to give his patients supplementary natural progesterone. After a 14-year evaluation of his work, he found that none of those patients had a recurrence of cancer. The progesterone used was Progest, a cream that contained Mexican wild yam. It was applied to the skin and thus absorbed into the person's system.*

*As is the custom at FACT, I investigated the progesterone cream and called Dave Roderick, the author of the above article and CEO of Enzyme Process Company, to ask him if he could supply the progesterone product, as we know Enzyme Process Company has a standard of producing as natural a product as possible.*

*The result was the development of the skin cream, Prozone, which is now available at health food stores and L & H Vitamin Company. For anyone who cannot get the Prozone at their local store, L & H Vitamin Company ships anywhere in the world. The number to call is 1-800-221-1152.*

### **Color them bad**

Growers use pesticides on oranges for more than just to repel offending bugs. Apparently, 56% of the citrus growers responding to a recent survey said that more than half the pesticides used on oranges are for cosmetic purposes only, according to the newsletter *Environmental Nutrition*.

They figure that shoppers don't like oranges flecked with green and some chemical pesticides add color quite nicely.

*From the Daily News*

*Editor's Note: Re: above Editor's note, this is a typical example of casual use of pesticides without regard for the consequences of upsetting hormonal balance.*

# LETTERS

Dear Mrs. Sackman,

The FACT Convention was two days jam-packed with informative talks, a chance to learn what's on the market that might be beneficial, lunch! and an opportunity to get to see you and the folks from FACT, all of whom are so ready to be of help to those of us lucky enough to know about you. All of this for a mere \$25.00! Talk about getting good value for the money.....

Enclosed is a small check to express my gratitude.  
Love, L.S.

To Whom It May Concern:

I am a family member who has been victimized by the effects of cancer. About a year and a half ago, I lost my mother to a rare form of breast cancer, that no doctor seemed to know anything about. In all of her efforts to combat this disease from drugs and nuclear medicine to a last hope of holistic therapy, there was nothing that would help.

I, myself, have been greatly affected in my thoughts and hope for others facing this deadly disease. I am looking toward the future in hope of making some difference in this battle. I am re-educating myself and changing my career path to fight the use of toxins in both medicine and the environment. I feel they only cause more harm. I believe there are still natural resources, possibly still untapped, that may help change and prevent the course of disease.

I would very much like to hear about the types of research your foundation conducts, the alternative therapies you promote and some of your findings. I am especially interested in the area of nutrition and the elimination of carcinogens from the environment.

I sincerely appreciate any information you can forward to me.

Sincerely, J.M.F.

Dear Ruth Sackman,

I am 63. I have stomach cancer. I believe it was set off by chemical irritation (instead of excessive meat eating, etc.)

I am not able to go to Germany or Mexico (no insurance), but I believe there may be a breakthrough that you would know about that I could use.

Last months I took Essiac (from Dr. Glum in L.A.). While it seems a good tonic and took away pain for a week (in first week) it didn't seem to be curing me as the pain returned.

The last two weeks, I have had a renewal of hope, after I took (with prudent diet) ground linseed, 50,000 A and 400 E and 1000 C. Now I have no pain, but my liver seems to be kicking up.

I saw your name in *Options* and I pray that perhaps

you know and could tell me of some breakthroughs or herbals or?

I do appreciate any information you could furnish. Thank you so much for the good work I know you do.  
D.M.

Ruth,

Karen and I wanted to share with you the joy of the birth of our twins!

Thanks for all of your help over the years. You and the FACT organization really make a difference.

Hope all is well with you.

Take care, D.W.

Dear Ruth,

Enclosed is my donation for \$750 to your organization. As always, I continually think of how you had supported me and cured me of my illness of Lyme Disease. Ever since that first interaction with you I have greatly modified my lifestyle primarily in the way that I eat. You have made a positive major impact on my life.

I hope this holiday season finds you well. Thanks again for all of your help!

Sincerely, D.W.

Dear Mrs. Sackman:

I had originally contacted FACT a few years back when my mother had breast cancer. I was sent some very good information and the newsletters have been very good also. My mother had died back in Feb. 1990, at that time I had sent to FACT a contribution in the amount of \$50.00 in memoriam.

I believe since that time I have not sent any contributions. I understand very well the work you are doing. I myself for the last 10 years at least have been out of mainstream medical things and am into alternative medicine, that is why I had contacted you back then. Because I live the way I do everyday of my life, and I do not have cancer, a lot of my income goes towards supporting myself in this lifestyle. You know it is much more expensive than living in the traditional way. And also, aside from that, I have been doing humane work for stray animals which I do on my own, and I use my own funds for this. I cannot afford to give contributions to different organizations at this time.

I am sorry that I did not respond sooner, but I did not get a chance to do so, as I know you had recently sent me a letter, saying it was a final request for a contribution.

Again, sorry I cannot.

Sincerely, A.F.

*We appreciate the work that A.F. is doing and would not want to impose any additional burdens on her. Thanks to the generosity of other FACT contributors we are able to continue her membership.*

Dear Ruth Sackman,

In 1976 when I first had breast cancer, I insisted on

a lumpectomy and refused all further orthodox treatment. Continuing to follow my inner guidance, I was led to your New York City Convention. I called several prominent healers in Britain and the US, but was unaware of all the other avenues to travel.

A lumpectomy on my other breast in 1985 also proved malignant. I opted to work with my healer friend and I was fortunate to fill a cancellation with Dr. Hans Nieper in Germany. Both times I examined my nutritional habits and attitudes. I learned the value of forgiveness and I am fine now.

I spoke with you a year ago regarding my book, *Journey Back*, exploring Alternative Treatments for Breast Cancer, My Journey to Wellness. In the appendix I wanted to include information about alternative therapies, groups to contact and books you recommend. A resource list like this is very valuable.

My manuscript is reader friendly and has been professionally edited. I have mailed my proposal to publishers and recently to agencies. Response has generally been positive, but sometimes reluctant, sighting a limited market or cut backs in publishing. As you know, the subject of breast cancer permeates the media. I know there are thousands of women who would be interested in alternative or complimentary choices. Individuals I speak with are excited about the possibility of *Journey Back* being available in the book stores.

I would appreciate it if you will recommend publishers or agents you know of who might consider looking at my proposal. Thank you.

Sincerely, L.Y.M.

Dear Ruth Sackman,

*Cancer Forum*, Fall 1994, Vol, 13, No. 3/4, Page 6 ("Common Sense About Calcium"). The word prunes appears twice. Column 2 and 3rd paragraph beneath the shaded rectangle.

Is it true that prunes contain oxalic acid? If it be true that prunes tend to cause calcium loss, what is prunes doing in column 2?

no name

*Who was it who said, "A little bit of knowledge can be a dangerous thing"? Indeed, prunes do contain oxalic acid—as do beets, spinach, swiss chard, etc.—and excess oxalic acid can cause calcium loss. But whole, natural foods contain a complex synergy of many elements that the body needs to thrive. There are no "good" or "bad" components or "good" or "bad" foods. But there are excesses and deficiencies. The key is balance.*

*Nature in her infinite wisdom has provided oxalic acid in some foods because it has value to the body. Rather than avoid a host of wonderful sources of nourishment because of one "taboo" constituent, we should see them in the context of a balanced diet containing a wide variety of wholesome, unprocessed foods. Prunes should not be eaten in excess, but neither should any other prod-*

*uct of nature's bounty.*

Dear Ruth,

Thank you so very much for the enlightening literature. Robert read it with enthusiasm.

We are all working hard on his recovery. I have you and Betty to thank for all your guidance and kindness.

Sincerely, E.E.S.

Dear Ruth,

This personal note is purposed to thank you for your help plus the *Cancer Forum* issue Vol. 13, No. 5/6. Please do send me the publication on a regular basis.

I had reached you by phone several weeks ago questioning the urine test from the Phillipines. Received the results yesterday simply saying "positive." Already contacted Betty Fowler, but will hold up for a while on the Kelly program.

Will dine with my local chiropractor who is a brilliant nutritionist—running some important tests and doing some cleansing.

It is wonderful work your organization is doing and I shall be a regular contributor to your effort.

Respectfully, I.F.

Dear Foundation for Advancement:

It gives me great pleasure to acknowledge your recent gift to the University of California, Berkeley.

The College of Letters and Science is at the heart of the academic enterprise of the Berkeley campus. Your support of our program is critical to our faculty and students, especially in these times of budgetary constraint. Indeed, your philanthropy enables us to foster cutting-edge teaching and research programs.

Thank you again for your support of the College of Letters and Science.

Sincerely,

Bonnie C. Wade

Dean, College of Letters and Science

Mrs. Sackman,

I would like to thank you for telling me about Dr. Ribner. His advice and suggestions seem to answer my problem. I will see him again soon for follow-up. Your helpfulness and understanding are very much appreciated.

With all good wishes, C.G.

Dear Ruth,

Thanks for your advice concerning the Norman Walker Detox Program. I bought his book and am seriously considering it.

In any event, keep up your great work! Also, I am sure this contribution will be put to good use.

Sincerely, R.O.

Dear Ruth,

The weekend was a truly wonderful experience for all of us. We thank you with our warmest regards for the opportunity we had to meet so many who seek and can truly benefit from our help.

We hope this meeting is a start of a mutual learning experience for us as we work together to reach out to many needing support and guidance.

Thank you again for everything. I know you have quite a busy schedule, but when time permits please let us know when you can visit and we will make the necessary arrangements. We look forward to having you here in Boston and an opportunity to share with you what we do here.

Regards, Bo-In Lee, Lic. Ac.  
Director

P.S. Coming up is our annual autumn celebration where friends gather for delicious natural food, music and lots of laughter. It's quite an event and we would like you to join us.

Dear Ruth,

Here I am spending two weeks with Master Lee.

I am very grateful to you for putting him on your platform. He is a dedicated and caring man completely devoted to healing.

I get individual attention every day; he checks my pressure and I did blood tests in the lab here. I do acupuncture, moxabustion (herb mugwort) and yoga. I also drink my herbal medicine 3 times a day—a preparation I watched the master make of 26 herbs for my condition. He has an enormous electrical heat pot from Korea that cooks herbs for 3 hours, then machine packages them for us and I drink the tea 3 times a day. These herbs will rebuild my immune system, attack the cancer cells and remove toxins.

I also do cupping (bancas) and today will get shiatsu massage from son. His family including grandma who does most of cooking is very nice.

It is peaceful here in Jamaica Plains—Amtrak 5 hours from New York—then bus to center. No problem: have cancer, will travel anywhere! I was feeling tired as cancer cells spread into spleen and was hesitating about doing Prednisone and Leukeran again.

I think positive I will heal and believe that all cancers are created from imbalances in the body.

Thanks again and I would recommend this healing center to all. He is a truly remarkable and dedicated man.

With kind regards, I.M.

P.S. The center is very clean, all water bottled, 2 meals a day. The food is delicious—buffet style, brown rice every day, steamed vegetables every day: kale, broccoli, daikon, carrots, squash of all kinds, not much raw; main dish: soba noodles, black bean sauce, soup with seaweed, also fish and turkey.

Today I saw master and wife cook many marrow bones

in a big pot with ginseng, astragalus herb. He said marrow is good for healing body. No fruit is served, no desserts, but meals are filling.

\* \* \* \* \*

Dear Doctor:

Are you being really fair?  
Is it (TLC) Total Living Care?  
When you offer to your patients,  
To heal their special disease,  
But don't put their minds at ease,  
By awakening them to each cause,  
That affects their healing odds.

If you really want to reach them  
By rights you need to teach them,  
To understand what undermined their health  
Robbed their joy and well being, in stealth.

They need awareness and more solutions  
To their toxic states and body pollutions:  
Help them to understand diet and exercise,  
The evils of negative emotions, to exorcise.

Then assist them in developing attitudes  
True to self "BE"-attitudes—health's beatitudes;  
Give guidelines to manage their lifestyle excesses.  
All this is good medicine, great healing successes.  
—Leo Roy, M.D.

## RECIPE

### Yogurt Dressing (one generous serving)

3-4 Tbsp. whole plain yogurt  
1 Tbsp. apple concentrate or raw honey  
or maple syrup  
1/4 tsp. mustard powder  
1/2 tsp. dill weed  
few dashes Jensen's Quik Sip (natural salt  
substitute) (opt.)

Stir well. Add a little water if you like it thinner.  
Most like it thick!!

# BOOK REVIEW by Consuelo Reyes

*Exploding the Gene Myth—How Genetic Information is Produced and Manipulated by Scientists, Physicians, Employers, Insurance Companies, Educators, and Law Enforcers* by Ruth Hubbard and Elijah Wald (Beacon Press, Boston, 1993, 206 pp.)

Rarely a week goes by that a headline does not extol some striking new discovery on the genetic frontier: a gene that may make us more vulnerable to cancer or schizophrenia, the gene that may predispose us to obesity, deafness or aggressiveness, genes as the ultimate identification tool in DNA fingerprinting, etc. Do these "breakthroughs" signal the coming of magic pills for all society's ills that many have been longing for? Or will we learn decades down the line, as with so many other "great scientific advances," that these darlings have, at best, failed to fulfill their billing, or, at worst, caused irrevocable harm to thousands?

Welcome to genemania! But for those not enthused about waiting years to see the forest through the euphoria, the word is out now in a new book, *Exploding the Gene Myth—How Genetic Information is Produced and Manipulated by Scientists, Physicians, Employers, Insurance Companies, Educators, and Law Enforcers* by Ruth Hubbard and Elijah Wald—and the word is "caution!"

Ms. Hubbard, professor emeritus of biology at Harvard University, author of *The Politics of Women's Biology* and other books, with Mr. Wald, musician and freelance writer, explains in step-by-step lay language the great absurdity and danger of putting so much hope and energy into the gene basket. The myth explodes, Hubbard says, because it is based on the ridiculous reductionist view of us as a collection of tiny disparate parts over which we have little control rather than as whole human beings. Much as a mechanical failure might be traced to a lone blown fuse or faulty sparkplug, reductionists seek to identify single traits or conditions with specific genes and thereby set about fixing those that appear to need fixing.

But while the public has been led to see a gene as a singular interchangeable entity, the term is really only a shorthand for a section of a chain—a unit of a DNA molecule composed of hundreds if not thousands of sequences of amino acids synthesized by the interaction of enzymes, minerals, body salts, etc. in symphony with all the intricate metabolic processes that contribute to the miraculous human factory. Were it possible to reduce a condition or trait to one "flawed" gene rather than an intricate interplay of all these forces, what would you fix? A mutation or malfunction could occur anywhere along this vast chain of events. To "fix" a single gene would involve tampering with many processes—not only a monumental if impossible task, but a highly risky venture that could have untold repercussions

on bodily function and future generations.

So how can it be that mainstream science is jumping over itself with claims for its dream human genome project—the mapping of all human genes such that each will one day be accountable for a specific human trait or condition?

As the subtitle suggests, Hubbard believes today's genetic madness is being whipped up by overzealous groups who see their success inextricably bound to this hi-tech arena. Thus, the myth is fed by scientists who, having largely become cogs in a highly competitive capitalistic wheel, voice extravagant claims for their projects in order to compete for limited research funds. The huge pharmaceutical and biotech industries, prime sources for these funds, stir the fantasy by proclaiming the broadest possible applications for potential products. In this charged kitchen, is it any wonder that others—employers, insurers, educators, law enforcement, etc.—get drawn to the frenzy to seek their piece of the genetic pie?

Hubbard's message in all this is that never has the call for an informed, activist citizenry been more urgent. Unbewitched by scientific expertise and self-interest, the lay public is better equipped than any other sector of the population to stand back and ask the huge questions, e.g.: Who decides the norms of desirable and undesirable traits? (The disability of one may be the gift of another.) If genes can be pinned down to specific diseases, must we all submit to an assembly line of new and expensive tests? What do we do with the knowledge that we possess a mutation that *may* develop into some problem down the line? Will living with a "bad" gene create stigma and heightened stress—factors which alone can lead to illness?

Will employers be able to reject "healthy ill" workers on the basis of so-called genetic defects? What about screening workers for vulnerability to toxins in the workplace so that those without the "defect" can endure more exposure to deadly substances and, thus, reduce the need for controls? Will insurers regard faulty genes as "pre-existing conditions" and grounds for non-coverage or higher rates? Will tampering with the genetic pool create new diseases and new health problems?

Most important, the author emphasizes that the focus on genes is taking away vital resources from research into areas of far greater impact on our well-being—nutrition, stress, environment—factors over which we have more control. Would health be better enhanced by spending on tests for a gene that *may* predispose one to lung cancer or by developing programs to help people stop smoking?

Scientists are perhaps the last gods of our age—politicians, royals, even clerics having taken their earthly tumble. It's time to lift the halo from matters of scientific direction and substance. *Exploding the Gene Myth* is a strident call for personal responsibility vs. reliance on medical miracles that separate us from our bodies and nature. ❀

# Tapes

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- (17) Nutrition for the Cancer Patient
- (18) Better Nutrition for Better Health
- (63) Cancer Program at Tallmogarden
- (66) How a Health Program Improves Host Resistance
- (141) What We Do at Tallmogarden to Strengthen Host Resistance

## **Edward Berk, Herbalist**

- (55) Rebuilding the Immune System

## **Peter H. Duesberg, Ph.D.**

- (133) The Role of Drugs in AIDS

## **Edwin Flatto, M.D.**

- (151) Exercise—A Vital Tool for Restoring & Maintaining Health

## **Jorge Estrella, M.D.**

- (76) Cellular Therapy to Improve Host Resistance
- (79) Improving Host Resistance With Cellular Therapy
- (91) Cellular Therapy for the Improvement of Host Resistance
- (118) Life of the Cell - Its Action and Function
- (154) Cell Therapy
- (156) Improving Host Resistance—The Body's Natural Defense

## **Jane Goldberg, Ph.D., Psychoanalyst**

- (24) How Stress Alters Normal Body Function
- (62) Psychological Contributions to Cancer Contraction logical Immune System
- (92) Using Your Emotions for Better or Worse
- (114) Who Lives and Why
- (143) Emotions - Friend or Foe?

## **Martin Goldman, M.D.**

- (113) Integrative Approach for Strengthening Host Resistance

- (123) Oriental Medicine for Bio-Repair

## **Phillip Incao, M.D.**

- (126) Role of Fever in Immune Response
- (131) Inflammation - the Natural Enemy of Cancer
- (148) How Weakening the Immune System Causes Cancer
- (157) Inflammation and Prevention of Disease

## **Bernard Jensen, D.C., Ph.D., Nutritionist**

- (2) Moving the Whole Body to Health
- (50) Rejuvenating the Body
- (77) Helping the Host Resistance Naturally
- (82) Living the No-Cancer Life
- (137) The Fountain of Youth in You
- (140) The Fibers of Life that Bring Us Health
- (149) Healing From Within Out

## **John R. Lee, M.D.**

- (64) Connection Between Fluoride Toxicity & Cancer
- (83) New Information Regarding the Fluoridation/Cancer Link
- (117) Fluoridation /Cancer Link

## **Shary Oden**

- (171) Workshop: Healing Power of Love, Laughter and Music

## **Ribner, Richard, M.D.**

- (145) Healing the Mind/Healing the Body

## **Leo Roy, M.D., N.D.**

- (28) Individualized Nutrition for the Cancer Patient
- (42) Enzymes: Life's Miracle Workers
- (68) Immunity & Host Resistance
- (94) Individualized Metabolic Programs to Improve Host Resistance
- (115) Civilized Suicide
- (128) Biochemical Individuality and Biological Repair,
- (138) Pro Life - Yours!
- (152) A Trip Through Your Inner World

## **Ruth Sackman, President of FACT**

- (29) Cancer Causes & Prevention
- (30) The Complexities of Cancer
- (60) Deciphering the Proliferation of Cancer Therapies
- (88) Making Sense Out of the Confusion Surrounding Cancer Information

- (95) Biologically Safe Programs for Rebuilding Host Resistance

- (100) How Misinformation is Hazardous to Your Health,

- (129) Concept of Biological Healing

- (135) Causes of Cancer and Balancing Body Chemistry

- (136) What Are Your Choices?

- (144) Comparing Conventional & Alternative Therapies; Healing the Host

- (160) Alternative Cancer Concepts

## **William F. Welles, D.C.**

- (134) Colon Health to Improve Host Resistance

- (150) The Colon—Key to Immune Integrity

## **John Yiamouyiannis, Ph.D.**

- (12) The Fluoridation Cancer Link

- (46) Fluoride & Cancer

## **Recovered Cancer Patients, Personal Case Histories**

- (6) Michael Whitehill (Thymoma)

- (80) Betty Fowler (Skin Cancer)

- (16) Pat Judson (Colon Cancer)

- (41) Richard Mott (Lung Cancer)

- (43) Kay Windes (Breast Cancer)

- (58) Walter Carter (Pancreatic Cancer)

- (98) June McKie (Lymphosarcoma)

- (99) Bernard Nevens (Colon Cancer)

- (108) Kay Windes (Breast Cancer)

- (112) Louise Greenfield (Breast Cancer)

- (119) Bernard Nevins (Colon Cancer)

- (125) Louise Greenfield (Breast Cancer)

- (132) Pat Judson (Colon Cancer)

- (139) Lou Dina (Lymphoma) & Hy Radin (Spinal Cancer)

- (146) Tom Buby (Lymphoma)

- (147) Doris Sokosh (Breast Cancer) and Lou Dina (Lymphoma)

- (155) Neta Conant (Breast Cancer) and Kay Windes (Breast Cancer)

- (158) Moshe Myerowitz (Liver Cancer)

- (159) Doris Sokosh (Breast Cancer)

## **Panels of Recovered Cancer Patients**

- (44) Doris Sokosh (Breast Cancer), Daniel Friedkin (Testicular Cancer), Ruth Williams (Melanoma)

- (67) Jeannie Glickman (Ovarian Cancer), Betty Fowler (Skin Cancer), Daniel Friedkin (Testicular Cancer)

- (45) Pat Judson (Colon Cancer), Doris Sokosh (Breast Cancer)

- (72) Hy Radin (Spinal Cancer), Doris Sokosh (Breast Cancer)

## **1994 Annual Cancer/Nutrition Convention**

- (161) Doris Sokosh and Michal Ginach: Recovered Cancer Patients

- (162) Philip Incao, M.D.: Prevention of Cancer Starts in Childhood

- (163) John Lee, M.D.: Progesterone—A Natural Cancer Fighter

- (164) Jorge Estrella, M.D.: Immune System, Cancer and Cell Therapy

- (165) Greg Hagerty: Recovered Cancer Patient

- (166) Ruth Sackman: Metabolic Approach in Controlling and Preventing Cancer

- (167) Charlotte Gerson: The Gerson Therapy

- (168) Martin Goldman, M.D.: Oriental Medicine—An Adjunct for Host Defense

- (169) Duncan McCollester, M.D.: Autologous Immune Therapy for a Variety of Cancers—Developmental Studies

- (170) Lou Dina: Recovered Cancer Patient

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