

CANCER FORUM

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



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.

The material contained in Cancer Forum is not copyrighted. Our role is to disseminate information as widely as possible; therefore, we encourage the reprinting of articles, but would appreciate credit.

Board of Trustees

Ruth Sackman, President
Pat Judson, Vice President
Martin M. Fall, Treasurer
Corrine Loreto, Secretary
Rhoda Koepfel, Counselor
Nicholas Dafflos, Ch. of FACT Safe Water Committee
Consuelo Reyes, Trustee
In Memoriam
Leon Sackman. Co-founder

National Headquarters

F.A.C.T., LTD.
Box 1242, Old Chelsea Station
New York, N.Y. 10113
Tel.: 212-741-2790
Ruth Sackman, President

Editor: Ruth Sackman
Production: Consuelo Reyes
Proofreader: Irving Wexler

In this issue:

What Symptoms to Expect When You Improve Your Diet by Stanley S. Bass, D.C.....	3
Film Review.....	7
Notes from a "Quick Fix" Culture by Consuelo Reyes.....	8
Letters.....	11
Recipes.....	12
Book Review.....	13
Tape List.....	14
Book List.....	15

Book Review by Ruth Sackman:

A Cure for All Cancers by Hulda Clark, Ph.D., N.D.(ProMotion Publishing, San Diego, CA, 1993, 511 pp., \$19.95).

To review a book with which one vehemently disagrees is a real chore. I postponed reading *A Cure for All Cancers* by Hulda Clark because it was so loaded with misconceptions that I argued with each page. I would prefer to have the author available instead of silently complaining as I turned each page.

Firstly, any book which claims to know the cure for all cancers sets off little red flags a-waving in my mind immediately. Cancer is a complex disease with many nuances related to the situation of each individual patient. The simplistic idea that there is one way to handle all this is absurd and insulting to the reader. Moreover, the one hundred case histories touted on the cover might appear to leave the impression that these are recovered patients. However, after reading the first ten histories, I had to randomly select some of the others as it was such a waste of time and had become quite evident that most of the subjects were admittedly non-survivors. Many of the patients had been diagnosed with cancer by Clark's own diagnostic equipment and by the same equipment pronounced cured without any clinical confirmation of cancer or cure!

All this reminded me of a woman I had met at a cancer convention in California who claimed to be a gastric cancer recoveree. I was certainly interested in hearing all the details of her case. When I asked what her doctor thought about her recovery, she said that she never saw a doctor but had discovered that she had cancer on her own and was now cured.

Another extremely arguable conclusion by Hulda Clark is that all cancers have the same cause (parasites). Causes can be as numerous as the variety of cancers or even more so. To cure cancer, determining and correcting the cause is vital, otherwise, the breakdown in body chemistry will continue to be responsible for the production of malignant cells no matter what happens at the site of the malignancy, i.e., tumor.

To take advantage of the cancer market, just write a book, and be sure to use the word "cancer" in the title and you have a saleable commodity for a desperate population. Although publishers may not be qualified to judge the validity of the contents, they know there is an active market for cancer books. From my twenty five plus years of experience, most of these books are written by skilled writers with good credentials (Ph.D. or M. D.) but with a conspicuous lack of knowledge about cancer. Caveat Emptor (Consumer Beware)!

WHAT SYMPTOMS TO EXPECT WHEN YOU IMPROVE YOUR DIET

by Stanley S. Bass, D.C.

If I were asked, "Which is the area of greatest misunderstanding and confusion in the field of nutrition?" I would immediately be forced to reply, "It is the failure to properly understand and interpret the symptoms and changes which follow the beginning of a better nutritional program."

What is meant by a better nutritional program? It is the introduction of foods of higher quality in place of lower quality ones. For example—if a person replaces a protein-rich food such as pork with beef, the beef may be considered the superior of the two due to its lower and less saturated fat content, etc., chicken is superior to beef, and fish is superior to chicken because of its more rapid digestion and lower saturated fat content. Lima beans, lentils or chick peas which are eaten at the same meal with vegetables are superior in all the nutrients needed to rebuild health and those already mentioned. As we go higher in the scale of quality, we begin to include protein-rich food which may be eaten in the unfired (raw) state, such as cheese which is made from raw milk and unsalted. Then we ascend to the nuts and seeds which are eaten in the natural state (raw and unsalted). To summarize: the closer the food comes to the natural state in which it occurs, or the closer we come to its raw, unfired form, the higher its quality is. In this condition, all the enzymes are found intact. The amino acids are in their finest form. The minerals, vitamins, trace elements, carbohydrates and life force are present. This life force, in turn, is capable of reproducing tissue which is full of life and longer lasting in structure.

This same classification of quality which we analyzed in relation to protein-rich foods applies to the carbohydrates (the starches and sugar-rich foods), the fats, the mineral-rich foods (vegetables), etc.

The quality of a nutritional program is also improved by **omitting** toxic substances such as coffee, tea, chocolate, tobacco, salt, pepper, etc.

What is the relation of quality of foods to recovery from illness? It is this in a nutshell: the **higher**

the quality of food that we eat, the **quicker** we recover from disease—provided we are able to properly digest and assimilate the quality-level.

Now, what happens when a person follows these rules and makes a decided improvement in the quality of the food consumed? Remarkable things begin to happen to the body (as well as the mind). The amazing intelligence present in every cell of the body, the wisdom of the body in its operation, immediately becomes manifest. The rule may be stated thusly: when the quality of the food coming into the body is of higher quality than the tissues which the body is made of, the body begins to discard the lower-grade materials and tissues to make room



for the superior materials which it uses to make new and healthier tissue. This is the plan of Nature—of evolution. The body is very selective and always aims for improvement—for better health. The body always tries to produce health and always will, unless our interference is too great. Only then do we fail to recover and then degenerate further into disease. The self-curing nature of many conditions such as colds, fevers, cuts, swellings, injuries, etc., furnishes endless examples of how the body tends toward health—**always**—unless we do something to stop the process.

What are the symptoms or signs which become evident when we first begin to omit the lower-grade foods and instead introduce superior foods—those which are more alive, more natural than we are accustomed to? When the use of a toxic stimulant such as coffee, tea, chocolate or cocoa is suddenly stopped, headaches are common and a letdown occurs. This is due to the discard by the body of the toxins which are removed from the tissues and transported through the bloodstream during its many bodily rounds. Before the noxious agents reach their final destination for elimination, these irritants may register in our consciousness as pain—for example, a headache. The letdown is due to the slower action of the heart—the resting phase which follows the stimulation of more rapid heart action forced upon the body

by certain poisons called stimulants. The more rapid heart beat (or pulse) may produce a feeling of exhilaration, and the slower action may produce a depressed state of mind. Usually, within three days, the symptoms vanish and we feel stronger due to the recuperation which follows.

To a lesser extent, the same process occurs when we abandon lower quality foods and replace them with better foods. Lower quality foods have undergone more preparation. Spices, salt and other ingredients have been added, and they tend to be more stimulating than less prepared and more natural foods. Animal foods such as meat, fowl, fish, etc., are more stimulating than cheese, nuts and vegetable proteins. Consequently, the withdrawal of stimulation which follows the abandonment of lower quality food produces a slower heart action—a resting phase—which registers in the mind as relaxation or a decrease in energy. This initial letdown lasts about ten days or slightly longer and is followed by an increase of strength, a feeling of diminishing stress and greater well-being.

Now, let us return to the symptoms which occur in the process of regeneration.

The person who starts a better diet, stays on it for three days to a week and then quits, will say, "Oh! I felt better on the old diet—the new one made me feel weak." He failed because he didn't give his body a chance to adjust and complete its first phase of action—recuperation. If he had waited a while longer, he would have begun to feel better than before he started.

During this initial phase (lasting about ten days on the average to several weeks in others), the vital energies which are usually in the periphery or external part of the body such as the muscles and skin, begin to move to the vital internal organs and start reconstruction. This shunting of much of the power to the internal region produces a feeling of less energy in the muscles, which the mind interprets as some weakness. Actually, the power is increased, but most of it is being used for rebuilding the more important organs and less of it is available for muscular work. Any weakness which is felt here is not true weakness, but merely a re-deploying of forces to the more important internal parts. Here it is important

for the person to stop wasting energy, and to rest and sleep more. **This is the crucial phase**, and if the person resorts to stimulants of any kind, he will abort and defeat the regenerative intent of the body. It is important that he have patience and faith and just wait it out, and after a while he will get increasing strength which will exceed by far what he felt before he began the new program. Success in recovery or improvement of health hinges upon the correct understanding of this point—realizing that the body is using its main energies in more important internal work and **not** wasting it in external work involving muscle movements. Be wise—take it easy here and relax. Just coast in your work and social obligations until you're out of the woods.

As one continues on the improved diet and gradually raises the food quality, interesting symptoms begin to appear. The body begins a process called "retracing." The cellular intelligence reasons something like

this: "Oh! Look at all those fine materials coming in. How wonderful—now we have a chance to be rid of this old garbage and build a beautiful new house. Let's get started immediately. Let's get this excess bile out of the liver and gall-bladder and send it to the intestines for elimination. Let's get this sludge moving out of

the arteries, veins and capillaries. These smelly, gassy, brain-stupefying masses have been here too long—out with them! These arthritic deposits in the joints need cleaning up. Let's get these irritating food preservatives, aspirins, sleeping pills and drugs out of the way along with these other masses of fat which have made life so burdensome for us for so long. Let's get going and keep going till the job is done—till we have a beautiful house—and from then on we'll keep it a beautiful ideal model house.

During the first phase (called catabolism), the accent is on elimination, or breaking down tissue. The body begins to clean house—in short, to remove the garbage deposited in all the tissues—everywhere. During this period, the body "removes the ashes from the furnace preparatory to getting a better fire." Here the accentuation is on removal of the gross and immediate body obstructions. Wastes

The body is very selective and always aims for improvement—for better health. The body always tries to produce health and always will, unless our interference is too great.

are discarded more rapidly than new tissue is made from the new food. This becomes evident as weight-loss. This persists for a while and is then followed by the second phase—stabilization.

Here, the weight remains more or less stable. During this phase, the amount of waste material being discarded daily is equal to the amount of tissue which is being formed and replaced by the newer, more vital food. This occurs after the excess of obstructing material in the tissues has been removed. This stage persists for a while and is then followed by a third phase—a building-up period (called anabolism), wherein weight starts to go up, even though the diet is lower in calories than it was before. At this point, much or most of the interfering wastes have already been discarded—the tissues which have been formed since the diet was raised in quality are more durable and do not break down easily. Also, new tissues are now being formed faster. This is due to the improved assimilation made possible by the ceasing of wrong

food. The body's need for the usual amounts of food decreases, and we are able to maintain our weight and increased energies with less food. Many are able to function very efficiently on two meals a day and eventually even on one meal a day. As the body progressively increases in efficiency and decreases in tissue breakdown under exercise, so do we gradually need less and less food to maintain life. The higher the percentage of raw food one lives on, the slower the rate of tissue deterioration which one evolves into. A sick body requires a gradual, carefully worked-out entry into this stage.

Returning to the symptoms which occur on a superior nutritional program—people who have had tendencies in the past to recurring skin rashes or eruptions will frequently tend to eliminate poisons and harmful drugs through the skin with new rashes or eruptions. If they go to a doctor now who is not familiar with this aspect of elimination, he will diagnose it as an allergy. They ask, "How come; I'm eating better now than I ever did before, and instead I'm getting worse?" They don't understand that the body is "retracing." The skin is getting more alive and active. It's throwing out more poisons more rapidly now that the body is building more

power which is saved from those hard-to-digest meals which have been discontinued. These toxins being discarded are saving you from more serious disease which will result if you keep them in your body too much longer—possibly hepatitis, kidney disorders, blood disease, heart disease, arthritis, nerve degenerations or even cancer—depending upon your hereditary or structural weaknesses. Be happy you're paying your bills now in an easy-payment plan.

With some, colds which haven't appeared for a long time may occur, or even fevers. **This is nature's way of housecleaning.** Understand that these actions are constructive, even though unpleasant at the moment. **Don't—but don't try to stop these symptoms by the use of drugs, or even massive doses of vitamins which will act as drugs in huge concentrations. These symptoms are part of a curing process, and don't try to cure a cure. These are not deficiency conditions or allergic manifesta-**

With some, colds which haven't appeared for a long time may occur, or even fevers. This is nature's way of housecleaning..

tions—not if you're eating properly in quality and quantity. Here is where experienced advice is of great value. Unfortunately, there are few books present today which give full

guidance to the average reader. Try to find guidance through a doctor or teacher who has the requisite experience in this most confusing of all subjects—nutrition in relation to health and disease.

You may be eating perfectly in regard to quantity, quality, and observing all the correct rules, and still symptoms will occur. Those who have lived better lives in the past—who have eaten better foods and who have abused their bodies less with overeating—will have reactions ranging from almost none at all or very mild to symptoms which may be uncomfortable or acute. Those who have lived worse lives and poisoned themselves more will experience more severe symptoms if their liver, kidneys or other important eliminating organs have been weakened. When they have been renovated to the point of fair working order, they will no longer produce symptoms.

Headaches may occur at the beginning; fever and/or colds also may appear; the skin may break out; there may be a short interval of bowel sluggishness, occasional diarrhea, feelings of tiredness and weakness,

disinclination to exercise, nervousness, irritability, negativity or mental depression, frequent urination, etc., etc. However, the great majority of people find their reactions tolerable and are encouraged to bear with them because of the many improvements which have already occurred and are becoming more evident with each day. This acts as an inspirational force to them.

The symptoms will vary according to the materials being discarded, the condition of the organs involved in the elimination, and the amount of energy you have available. The more you rest and sleep when symptoms are present, the milder they are and the more quickly they are terminated. Be happy you are having symptoms. **Realize deeply** that your body is becoming younger and healthier every day because you are throwing off more and more wastes which would eventually have brought pain, disease and much suffering. Those who have the worst symptom-reactions and follow through to their successful termination are thus avoiding some of the worst diseases which would eventually have developed had they continued their careless eating habits.

Don't expect to go on an ascending scale of quality—that improving your diet will make you feel better and better each day until you reach perfection. The body is cyclical in nature, and health returns in a series of gradually-diminishing cycles. For example—you start a better diet and for a while you feel much better. After some time, a symptom occurs—you may feel nauseous for a day and have diarrhea with a foul-smelling stool. After a day, you feel even better than before, and all goes fine for a while. Then you suddenly develop a cold, feel chills and lose your appetite. After about two or three days (assuming you don't take drugs or do anything else about it), you suddenly recover and feel better than you did for years. Let us say this well-being continues for two months, when you suddenly develop an itch or rash. You still don't take anything special for it. This rash flares up, gets worse and continues for ten days, and suddenly subsides. Immediately after this, you find that your symptoms are gone and your energy has increased more than ever before. The rash became an outlet for the poisons in the liver. This is how recovery occurs—like the cycles in the Dow-Jones Average at the beginning of a bull market recovery. You feel better, a reaction

occurs and you don't feel as well for a short while. You recover and go higher for a while. Then another reaction occurs—milder than the last. You recover and go even higher. And so it goes—each reaction milder than the last as the body becomes purer, each becoming shorter in duration and being followed by a longer and longer period of feeling better than ever before, until you reach a level plateau of vibrant health. Here you become relatively disease-free and are filled with ever-increasing joy, life and the happiness which comes from sheer well-being. The mind opens up and expands to ever-higher horizons, and your soul will shout for joy. You begin to love the world, the universe and everything in it. This is the natural state of the mind—blissful, joyful and at peace with the universe—it can only be attained by alignment with cosmic law. The first laws we must learn to obey are the **Laws of Nature**. We must learn to eat simple; pure and natural foods, properly prepared, and our bodies in return will cast off all the evil we have taken in during our lives. Nowhere is the principle of forgiveness of sins more manifest than here—in our own bodies—when we forsake our destructive ways of eating (the defiling of the temple of the soul), Nature gives us a whole new chance for a new glorious life. All repentance must begin here in the body—through purer diet and natural foods. Then, just have faith, sit back and watch what happens. Before your own eyes, you will daily see signs that will cause you to wonder at this vast intelligence in operation that staggers the comprehension. The mysteries of the body, the operations of Nature, the vital forces working in Nature and the Cosmos are far beyond what our minds are prepared to understand at present. Every great physician or scientist who ever lived marvelled in awe and humility at the wonders of Nature. Yes—we are “fearfully and wonderfully made.” Let us give ourselves a chance to experience what it means to be really healthy and fully alive—to feel the joy of living by aligning ourselves to Nature's laws as intended for man “through the eating of natural (normal) foods. This indeed is the prime prerequisite in man's physical, mental and spiritual unfoldment. ❀

[Ed. note] Many physicians encourage their patients to use detoxification techniques to help the body relieve itself of accumulated toxins instead of struggling through elimination symptoms.

FILM REVIEW by the FACT Staff

"The Knowledge of Healing"

If you're looking for a typical Hollywood fast action thriller, "The Knowledge of Healing" is probably not your best cinematic choice. Nevertheless, this 90-minute Swiss-made documentary contains plenty of activity and excitement, albeit of a very different tempo and substance than the usual entertainment flick.

"Knowledge of Healing" is a unique exploration of traditional Tibetan medicine which is very much in concert with the principles that FACT has supported since inception. The traditional sounds of bamboo flutes and chimes set the mood—a calm, thoughtful pace—as we visit clinics in the remote hills of Tibet, Buryatia in Siberia, and China. We follow several patients seeking relief from conditions that could not be treated by conventional allopathic medicine, but which have responded extraordinarily well to the Tibetan system. The film focuses on one patient in particular, a man suffering from inoperable kidney cancer who comes to the clinic after being told by his conventional doctors that they could do nothing for him. We observe this patient over the course of his numerous visits to the Tibetan doctor as he is instructed on the nature and goals of the treatment, especially how to take the herbal medicines and how to calm his body to allow the healing. After 6 months the tumor is under control to the point that the patient returns to his surgeon to have the tumor successfully removed.

We also travel to high-tech laboratories in Switzerland, Austria and Israel where scientists are intensely studying the healing properties of the herbs, roots, and minerals used in this ancient medicine. These Western scientists and doctors express their frustration with the limitations and toxic effects of allopathic medicine, as well as their great respect for the philosophy and effectiveness of the Tibetan practice.

But the Dalai Llama steals the show! He appears with his physician, Dr. Tenzin Choedrak, in his home-in-exile in the foothills of northern India. The Dalai Lama explains how the Chinese, having invaded Tibet in 1949, took control of his small nation and by the late 50's and early 60's had nearly destroyed everything to do with traditional Tibetan medicine, including the destruction of the medical school and the burning of medical writings. Doctors were tortured and murdered. Finally in 1959 the Dalai Lama fled to India, as did the few surviving Tibetan doctors who were determined to keep their form of medicine alive. The human struggle, of course, continues today, a fact painfully noted when we see Dr. Choedrak treating a

Buddhist nun who suffered agonizing torture after participating in a rally for Tibetan independence.

In his gentle way the Dalai Lama stresses that there must be harmony between all aspects of an individual—body and spirit—in order for the treatment to truly succeed. His doctor adds:

"Our medicine assumes that the substances that are taken as nourishment and as medicine, as well as the substances of which the body is made up, are essentially of the same nature. There is mutual dependency.

The viability of the human organism depends on the quality of both environment and nourishment."

The movie takes its title from the ancient text in which Tibetan scholars codified their rigorous system of diagnosing and treating disease, a system that has existed for over 2 thousand years and which is every bit as refined as today's orthodox Western medicine. The film would be an excellent introduction for people who are new to non-conventional ways of healing, as well as a very interesting and pleasant experience for those already steeped in the concepts of host resistance and non-toxic, biologically-sound therapies.

"The Knowledge of Healing," a T & C Film AG Production (Zurich), released by IN Pictures, will have limited showings in U.S. theatres the rest of this year and will be available on video thereafter (check with your local video store). We heartily recommend it!



NOTES FROM A "QUICK FIX" CULTURE

by Consuelo Reyes

For many Americans, doctors are the last earthly gods—politicians and clergy having long since lost their glow. We want to believe that our brilliant "medicine men" will save us from our self-destructive habits and so we dutifully go to our annual check-ups and make appointments at the first sign of any symptom (especially if we have health insurance). We listen childlike to the doctor's sage pronouncements, and we feel sanctified when, finally, He reaches for His pen and scribbles some indecipherable wisdom on His R_x pad. And we vow to swallow the treasured "magic pills" according to His every command...

While we cling to this reassuring ritual, it is becoming harder and harder to remain blind to the signs that these "magic pills" are more like double-edged swords. Rarely a week goes by when we don't read about some celebrated "wonder" drug or miracle medical device—from diet pills and pain relievers to anti-psychotics and synthetic implants—suddenly discovered to have dire or deadly side effects.

The New York Times recently reported on a major study detailed in the April 1998 *Journal of the American Medical Association (JAMA)* which attributed an average of over 100,000 deaths a year in American hospitals to adverse drug effects—making drugs reactions the fourth-leading cause of death in the United States, behind heart disease, cancer and lung disease. The researchers emphasized that these deaths were not due to negligent use, but rather drugs prescribed and administered according to accepted protocols.

"We want to increase awareness that drugs have a toxic component," said Dr. Bruce Pomeranz, an author of the study and a professor of neuroscience at the University of Toronto. "It's not rare."

However, Dr. Pomeranz said that these numbers are surprising because drugs are rarely recognized as the official cause of death. Even when the drug is known to be the cause, the death certificate generally lists the effect, e.g., a stomach hemorrhage or liver failure, as the cause of death, without mentioning the drug that brought it on. Sometimes, of course, the drug is not recognized as the cause as patients and doctors believe their bad reactions are a result of the underlying disease being treated and not the medication.

In addition to the deaths, the *JAMA* study reported that patients in hospitals experience about 2.2 million non-fatal adverse drug reactions a year. While Dr. Michael A.

Friedman, lead deputy commissioner of the Food and Drug Administration (FDA), the federal agency responsible for overseeing approval of all prescription and over-the-counter drugs, declined to comment on the unexpectedly high numbers in this study, he remarked, "...we recognize that every medication has some side effects," and noted that adverse reactions were particularly common in antibiotics, heart medications, blood thinners and chemotherapy agents for cancer.

These findings are corroborated by Thomas J. Moore, a medical writer and senior fellow in health policy at George Washington University Medical Center, in his recent book *Prescription for Disaster: The Hidden Dangers in Your Medicine Cabinet* (Simon & Schuster, 271 pp., \$25.00). Moore states the figures somewhat more graphically: "...the number of Americans killed by pharmaceuticals is quadruple the number of people who are murdered and double the number who die in car crashes." He says that one million Americans per year are "severely injured" by medications and 2 million are harmed by drugs in the course of a hospital stay.

Where is the magic that we want so fervently to believe in? The reality is that drugs are largely blockers of natural bodily processes: e.g., antibiotics, anti-histamines, anti-inflammatories, calcium blockers, protease inhibitors, etc. Used routinely for inflammatory or chronic conditions, drugs may temporarily mask the uncomfortable symptoms of healing, but they also add stress to the body by increasing the toxic load—a violation of the most basic tenet of the art of medicine, "First, do no harm." In acute situations drugs can buy time for patients, even save lives—at least giving the patient an opportunity to build back enough strength to proceed with a more natural approach. But drugs contain no intrinsic healing properties. They alleviate symptoms without correcting the underlying cause of a problem. By interfering with the body's signals, it is not surprising that medications can cause adverse reactions in other parts of the body, especially when used over long periods of time. After all, the body is an integrated whole: we have just one circulation system, one nerve network, etc. What occurs in one part has consequences for the total system.

Thus, we pay a price for the "quick fix" in the form of mild to severe side effects—a fact that the medical community does not negate. The nature of these effects depends on a variety of factors, many of which are difficult to predict given the unique condition of each patient—drug

history, sensitivities, constitution, etc. The question, therefore, becomes one of degree: when is the benefit worth the price?

- A case in point: two new drugs, Glucophage and Rezulin, products of two different pharmaceutical companies, were widely hailed as the first new "wonder" treatments in 20 years for adult-onset diabetes, a disease that can often be controlled by diet and exercise but for which drugs are usually prescribed. However, after a year or so on the market, data began to emerge implicating the drugs in dozens of deaths—possible liver damage in the case of Rezulin, and, in the case of Glucophage, lactic acidosis, a buildup of acid in the blood that signals organ failure. Moreover, there appeared to be no way to predict who would be at risk to develop these severe reactions. In the United Kingdom Rezulin was removed from the market and Glucophage is being intensely scrutinized. However, the drugs remain on the U.S. market, though the FDA has strengthened labels and oversight.

The potential benefits of Glucophage and Rezulin have been claimed to be enormous. About 15 million people in the U.S. have Type II or adult onset diabetes, a leading cause of death in the U.S. These drugs became blockbuster after approval trials showed them to be more effective than previous drugs in helping the body use its insulin stores. Are the 60 or so deaths and numerous other adverse reactions *thus far* reported worth the apparent benefit to millions?

- Another case in point: *The New York Times* recently reported on problems with non-prescription drugs used in routine low-risk out-patient surgery. Specifically, a 4-year old boy died after a standard procedure to remove his adenoids and insert tiny tubes in his eardrums to drain fluid. The subsequent investigation revealed that the most probable cause of death was an adverse reaction to an over-the-counter drug, phenylephrine, sold commercially as Neo-Synephrine for nasal congestion relief. Many doctors, it seems, use phenylephrine to stop local bleeding, even though FDA has not approved such use—doctors are legally free to use a marketed drug for any purpose that they believe justified. The drug stops bleeding by causing constriction of the blood vessels, but this increases blood pressure. In the case of the 4-year old, after administering the phenylephrine, the doctor gave the boy a beta blocker drug to lower blood pressure which, for this patient, proved a fatal interaction.

An expert panel looking into this death uncovered at least 11 similar cases. Dr. Jacqueline E. Jones, director of pediatric otolaryngology at New York Hospital who headed the investigation, said that her panel came to a striking realization that at times doctors are "cavalier about the drugs they give patients in the operating room and assume that nothing bad will happen with non-prescription drugs."

- And what of the recent hoopla over Tamoxifen? This is the estrogen-inhibiting drug long-approved for treatment of breast cancer, but now claimed to dramatically increase the chances of preventing the disease in high risk women. Results of a large study of 13,388 women revealed that the drug also carries the risk of serious side effects including uterine cancer, blood clots in the lungs and major veins. Critics of the study also suggest longer trials might have revealed that the drug only delays the onset of the disease. Over 178,000 women in the U.S. will be diagnosed with breast cancer this year and 43,500 will die of the disease. How great a percentage of adverse effects should be tolerated for the apparent benefits? In this case the dark sides

"We want to increase awareness that drugs have a toxic component," said Dr. Bruce Pomeranz, an author of the study and a professor of neuroscience at the University of Toronto. "It's not rare."

of the drug are well documented and patients will likely be better informed about possible adverse consequences than in the previous two cases. Still the nagging question remains, how much risk is worth the alleged benefit?

FDA is our consumer "watchdog" agency charged with oversight of all pharmaceuticals. To attain approval, drugs must go through extensive trials, determining the nature of risk vs. benefit. If approved, doctors are asked to voluntarily report any side effects their patients may experience in the course of treatment and pharmaceutical manufacturers are expected to document any evidence of previously unnoted adverse reactions so that the drugs can be periodically reevaluated.

That's the way is supposed to work, but there are vast holes in this oversight system! FDA, ever focused on the "revolving door," seems more concerned with not upsetting industry interests than with protecting the public. Rather than demand more accountability from the pharmaceutical companies or budgetary increases from Congress, the agency too often pleads impotence due to lack of sufficient funds. They claim this leads to reliance on industry studies which are often of too-short duration or flawed. FDA laments the voluntary reporting of side effects by doctors which sounds nice in theory, but is rarely adhered to in practice. As one study in Rhode Island

found, while doctors' files show 26,000 adverse reactions to drugs, only 11 of these were reported to FDA! According to Thomas Moore, only about 1% of serious adverse reactions are ever reported. Doctors claim they are just too busy or patients don't report or don't return for follow-ups. The pharmaceutical companies, allocating the bulk of their resources to promotion once a drug is approved for the market and not wishing to increase public worries about drug dangers, are not a reliable monitor of adverse effects either. And even if reports do come in, FDA, with an oversight staff of only 54, can always cry that it simply does not have the resources to effectively follow up on the 3,200 drugs now on the U.S. market.

In those cases where FDA has acknowledged problems and issues warnings, doctors don't necessarily pay heed. When Halcion, a popular sleeping pill, was found to induce aggressive behavior and psychosis in some patients, FDA requested that the drug be prescribed for no longer than 7 to 10 days. However, a 1996 FDA report found that 85% of prescriptions were for longer periods. But FDA was powerless to do anything because once a drug is approved, doctors are free to use it as they see fit.

Besides FDA's lack of intestinal fortitude, there is plenty of fault to go around: doctors who do not inform patients about side effects or who prescribe drugs largely because patients ask for them; pharmacists who don't notice harmful drug combinations or do not provide labeling information; and patients who don't ask about drugs they are taking or take them inappropriately.

Many may take solace in the fact that serious side effects occur only in a small percentage of patients taking any particular drug. A *New York Times* editorial (4/18/98), following the story on the *JAMA* drug study, appeared to seek to calm popular hysteria by stating: "There is no epidemic of drug accidents. Two million adverse reactions represent less than 1 percent of the more than 200 million drug treatments administered to hospital patients each year."

"Epidemic" may not be the appropriate word, but when a popular drug is taken by millions, a 1-2% risk of injury can affect tens of thousands of people. For instance, Prozac, a product of Eli Lilly & Company, a truly blockbuster drug swallowed by millions of people in this country and around the world, was, according to Moore, "associated with more hospitalizations, deaths, or other serious adverse reactions reported to the FDA than any

other drug in America."

As long as the populace seeks salvation in pharmaceutical drugs, doctors will prescribe pills for every ill, and patients will experience an increasing panoply of adverse reactions. Much suffering could be avoided by strengthening FDA's latent "watchdog" instincts. Of course, that would involve the agency's risking industry ire to make a strong case for increased funds to a Congress inclined more toward cutting taxes and regulations and accommodating powerful commercial lobbies. Tightened FDA surveillance could enable drugs to be reevaluated at least every 5 years and with stepped up muscle the agency could enforce mandatory—instead of voluntary—reporting of adverse effects by doctors and companies. Thomas Moore suggests that pharmaceutical companies should be required to do long-term studies of some drugs, using

In acute situations drugs can buy time for patients, even save lives.... But drugs contain no intrinsic healing properties. They give temporary relief from symptoms without correcting the underlying cause of a problem.

money from a tax on companies that profit from the huge market for drugs. He recommends further a standard rating system for drug toxicity and better consumer education on issues such as how to interpret labels, what questions to ask to

insure informed decisions, etc. Consumers need to know, for instance, at what point a drug is in its history—the longer on the market, the greater likelihood that warnings accurately convey risks. Consumers also should be aware that when doctors prescribe drugs prophylactically, they are often acting defensively. The drug may have been totally unnecessary, but, as Joseph J. Neuschatz, M.D. wrote in a letter to the Editor of *The New York Times*: "A physician sued for bacterial complications is doomed if the answer to the question, 'Doctor, did you use antibiotics on this patient?' is no."

To those of us who favor a more natural approach to dealing with our health problems, pharmaceutical drugs are the choice of absolute last resort. The body is an incredible survival machine! Why block up the natural healing processes by loading ourselves down with synthetic toxic material? Attention to a balanced lifestyle, hopefully, reduces the occurrence of desperate situations where powerful "magic pills" may be necessary. But when such situations do occur, it's always best to go in with eyes open wide—to be skeptical of cavalier claims, to question interactions with other medications, to avoid long-term dependence, etc.

As the saying goes, if we don't know where we're going, we're likely to end up somewhere else. ☸

Letters

To the Editor:

After my diagnosis last year of breast cancer I received a book called *The Cure for all Cancers* by Hulda Clark, Ph.D., N.D.

I question much of the information and suggested treatment in it. Since it was a very difficult and frightening time for my family and myself, we were somewhat irrational and took the book quite seriously.

After reading the first few pages that said, "It doesn't matter how far your cancer is, you can still stop it in five days." I began the Cancer Curing Recipe on page 21. This is an herbal remedy for ridding oneself of parasites. "Cancer is Caused by Parasites."

On page 71 I read that we should throw away all metal ware and we should stir and serve food with wood or plastic not metal utensils and we should eat with plastic cutlery. I began using plastic forks and spoons to eat with for a few weeks.

"Don't eat toast" — benzopyrenes and tungsten are on it. I've eaten toast only 2 or 3 times since reading this information and I do worry about it.

"All metal seeps!" Throw away all metal pots. Stainless contains 18% chromium and 8% nickel.

I didn't throw away my farberware but for more than a month I used only corning ware for all my cooking.

There is a section in the book that pictures things such as jewelry, glasses (eyewear) and many other items we live with day in and out, and the harmful chemicals, metals, etc., in each thing. I stopped wearing my new eyeglasses because of the metal frames and went back to wearing my old plastic framed glasses. I haven't worn earrings since November.

On page 464 under the heading for Dishes: "There are harmful elements in all dish detergents" and states that **nothing rinses off**. Recommended for washing dishes—washing soda. I found that it felt slimy.

On page 468 under Deodorant suggestions—Vitamin C, Citric acid, lemon juice, food grade alcohol and vodka. Are any of these safe for one who has cancer?

I have tried lemon juice since it's a food but it didn't work.

On page 461 it says not to keep leftovers for more

than two days.

These are just a few things that had an effect on me from the book. There is so much more that I would like to be enlightened on, but I realize that it would take too much time.

With my gratitude for your patient guidance, I'm looking forward to my next *Cancer Forum*.

Thank you, P.C.

See book review on inside cover.

Dear Ruth,

Please accept my check—again sent with my prayers for a cure (and more importantly, a prevention) for this dread disease. We will keep on fighting our bitter enemy until we succeed, hopefully, in our generation. You and your staff are blessings that have entered our lives. There's always hope when we think of you. All Best Wishes for Good Health to you all.

Sincerely, Shirley

Dear Sir/Madam:

I saw your name in a book at a book store.

I understand you have information on alternative therapies for cancer. My Dad was operated on for a "malignant stomach lymphoma," last fall. He underwent a partial gastrectomy. Later, a biopsy showed a spread to the "bone marrow." At that time he was unable to go to chemotherapy.

Now he's back home, but after losing weight all winter, he cannot gain his weight back. He hasn't received any type of treatment as follow up.

I am requesting any information you have on any alternative options besides the conventional ones? Or know of others who have gone through this type of same illness or their method of treatment.

I have been researching the Isoflavones and genistein in soy supplements, which seem promising, also the shark and bovine cartilage.

We are wanting to prevent further metastasis in his body. Please send any information you have available regarding this matter. We need guidance, please!

Thank you, C.K.

Ed. Note: As much as we would like to respond to this request by mail, cancer therapies are too complex for a simple answer. We suggest a telephone call to the office, preferably including the patient. This letter reflects the tremendous confusion in the "alternative

cancer therapy" area. *FACT* does not support the use of soy or shark or bovine cartilage to treat cancer. No single substance is the answer to cancer, but these substances in particular which focus on tumor reduction without proper regard for the physiology of the host are no different in concept than conventional chemotherapy or radiation and can create more problems for the patient. *FACT* supports a comprehensive, non-toxic, biologically-sound metabolic program focused on restoring normal cell production and improving host resistance.

Hi,

My doctor just told me I have small cell cancer, fast growing. In 6 months I've grown 2 tumors in my right lung. He wants to start chemotherapy immediately to stop the tumors from growing. I am frightened and would really like you to send me any information you have on alternative cancer therapies, that may help me—educate me. (see ed. note above)

Thanks for your help, J.F.

Dear Ruth,

Oh, how well I remember that weekend you hosted the Convention of Cancer Therapies back in the late 60's. I had just had a mastectomy. As I passed through registration three people were conversing (you, Leon and Hy Radin). I heard Hy Radin say, "Today I celebrate my 10th anniversary of freedom from cancer." I slowed down, almost crept, but the men began to talk of golf.

I remained through the complete convention and scribbled every word I could throughout the lectures. This was **totally** new. I could not believe my ears that there was a chance a person can overcome cancer? In my gut I just knew that these people spoke the truth. Here was guidance, information and hope. What a precious gift!

I bonded with you, Leon and Hy Radin that day. I can sense and feel the moment even now.

I want to express my deepest sympathy to you. I send you love and will hug you in my prayers. I feel that a part of me is missing.

I'm late with my dues. Please, would you use the extra in any way you see fit in memory of Leon?
God Bless you, C.P.

Recipes

From *Triumph Over Cancer! My Recipes for Recovery* by Doris Sokosh. See *FACT* Book List, p. 15.

Pick-Me-Up Shake

Combine in a blender:

- 1 cup pineapple, cut in pieces
- 1 cup plain whole yogurt
- 1/2 cup apple juice
- 1 organic egg

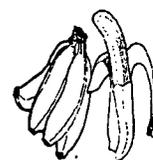


When smooth, drop a few ice cubes in one at a time and blend. This is also a nice breakfast drink.

Happy Enzyme Shake

Combine in a blender until smooth:

- 1 medium mango, peeled and sliced
- 1 medium papaya, peeled and sliced
- 1 banana
- 1/2 cup or more water
- 1 Tbsp. lemon juice



Add enough water to desired consistency. Chill. A great refreshing drink!

Calcium Punch

2-3 Servings

Combine in a blender until smooth:

- 1/2 cup sesame seeds or raw tahini (sesame butter)
- 6 figs (soaked)
- 2-3 pitted dates (soaked)
- 2 cups distilled water



Melon Milk

2 Servings

Use seeds from 1 ripe melon in season (cantaloupe, honeydew, etc.)—set aside the "meat" for another time

1/2 cup cool water

dash nutmeg—preferably freshly grated

1. Put seeds and water in a blender and liquify until smooth, milky consistency.

2. Strain liquid, using a spoon to squeeze out all the milk from the pulverized seeds.

3. Pour in glasses with a dash of nutmeg on top.

Optional: For a thicker drink, after straining reblend with a banana.

BOOK REVIEW by Corinne Loreto

Mad Cow U.S.A. — Could the Nightmare Happen Here? by Sheldon Rampton & John Stauber (Common Courage Press, Monroe Maine, 1997, 246 pgs.), \$24.95.

If anyone needs an incentive to eat organically, then this is the book to read. Oprah Winfrey, when comparing mad cow disease to AIDS, said it makes AIDS look like a common cold!

The disease is different from other diseases in that it does not produce a fever or antibodies to fight the disease. The New York Times has reported that researchers in Brazil and Germany "say they have found receptors on the surface of the brain cells that may allow agents called prions to enter the cells. Prions are thought to be renegade proteins that cause a variety of diseases known as transmissible spongiform encephalopathies (TSE), including so-called mad cow disease and Creutzfeld-Jacob Disease (CJD). The diseases kill brain cells and form holes resembling those found in a sponge."

Mad Cow U.S.A. is a well researched book, written by the same authors as *Toxic Sludge is Good For You* (reviewed in *Cancer Forum*, Vol.14, No. 7/9)—a fearless team of investigative journalists.

On March 20, 1996, news broke in England that ten young people had contracted CJD from eating infected beef. The news shook England and all of Europe. CJD has an invisible latency period of up to 40 years in humans. Mad cow disease and CJD are related transmissible spongiform encephalopathies. While the diseases are difficult to transmit (thank God), they appear to be spread through unnatural feeding such as rendered animal parts fed to herbivorous livestock.

Rendering is the practice—commonly used in the U.S. as well as the U.K.—of converting animal parts into marketable products... Thousands of dead dogs, cats, raccoons, possums, deer, foxes, snakes and the rest that local animal shelters and road-kill must dispose of are fed into "the hogger," a shredder which grinds up the tissues and filters out trash, before it is deep fried in cookers. During the 1960's and 1970's rendered fats began to be used extensively as cattle feed in both the U.S. and the U.K. Rendered proteins went to feed chickens and pigs.

Rendering plants became the central collection points for any diseases or persistent toxins that these animals carried. In 1985 three unusual deaths from CJD came to the attention of U.S. authorities. If these deaths had surfaced sooner, they might have given someone pause to reconsider the risk involved with cooking up huge batches of dead animals and then feeding them back to cows, chickens, pigs, etc.

The authors say, despite knowing the dangers of ani-

mal "cannibalism" since 1988, the U.S. Food and Drug Administration (FDA) had waited almost a decade to begin banning such practices, and its regulations contained gaping loopholes clearly designed to protect the interests of industry, not consumers.

I found reading this book quite disturbing, realizing that vested interests can greatly influence our legislators. But I felt relieved that investigative journalists of the caliber of Rampton and Stauber will do their utmost to inform and educate the consumer.

This is a worthy book which should be read by all caring consumers of meat. The effects of transmissible spongiform encephalopathy are devastating, resulting in paralysis and ultimately death. The greatest weapon we have as consumers is to boycott all meat products if the industry is feeding rendered animal products to vegetarian livestock. ❀

[Ed. note] *Though this book dwells in great detail on the gruesomeness of Mad Cow Disease and the multiple theories of its origin, the crucial point is that the health of the American people is being jeopardized by the increasing use of highly unnatural animal feeding practices—all under the eyes of our four federal so-called "watch dog" agencies—FDA, USDA, EPA, and CDC. These taxpayer-supported organs are not exercising the oversight and forthrightness necessary to protect the public. Why is it that, for instance, though rendered animal feed has existed in both the U.S. and U.K. for some time, it is only the English authorities who felt conscious-bound to alert their countrymen of the potential for harm? Our U.S. agencies, on the other hand, have been notable for their conspicuous silence on the subject or, at best, rigorous reassurance of the "no need to worry" kind.*

From rendering of contaminated carcasses for feed, routine injections of anti-biotics or growth hormones, filthy, overcrowded conditions and inhumane treatment of livestock to pesticides, irradiation, bio-engineering and toxic sludge fertilizer on our produce—the sad fact today is that the ubiquitous corporatization of our food production over the last half century has resulted in a food supply that is likely contributing to an overall weakening of our health, evidenced by the expanding epidemic of cancer (especially in younger age groups) and chronic diseases in this country.

As consumers, we must be sceptical about every official pronouncement that downplays concerns or preaches complacency. We must demand not only constant vigilance from our government agencies—who, after all, are working for us—but also unrelentingly honest and objective reporting from our news media. Democracy is a great concept. Let's make it actually work!

Convention Tapes

\$ 5.00 each. 12 tapes for \$50.00
Mail to FACT, Box 1242, Old
Chelsea Station, NY NY 10113.

Karl O. Aly, M.D.

(63) Cancer Program at Tallmogarden

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

Fowler, Betty

(124) Health Excell Program

Jorge Estrella, M.D.

(79) Improving Host Resistance With Cellular Therapy
(164) Jorge Estrella, M.D.: Immune System, Cancer and Cell Therapy

Charlotte Gerson, Director of Gerson Clinic

(167) Charlotte Gerson: The Gerson Therapy

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

Phillip Incao, M.D.

(131) Inflammation—The Enemy of Cancer
(148) How Weakening the Immune System Causes Cancer
(157) Inflammation and Prevention of Disease
(162) Philip Incao, M.D.: Prevention of Cancer Starts in Childhood

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

(2) Moving the Whole Body to Health
(77) Helping the Host Resistance Naturally
(149) Healing From Within Out

Donald D. Kelley, D.D.S.

(21) Individualized Metabolic Nutrition for the Cancer Patient

John R. Lee, M.D.

(64) Connection Between Fluoride Toxicity & Cancer
(83) New Information Regarding the Fluoridation/Cancer Link
(117) Fluoridation /Cancer Link
(163) John Lee, M.D.: Progesterone—A Natural Cancer Fighter

Duncan McCollester, M.D.

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

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
(128) Biochemical Individuality and Biological Repair,
(138) Pro Life - Yours!
(152) A Trip Through Your Inner World

Ruth Sackman, President of FACT

(5) Symptoms Associated with the Restoration of Health
(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

(166) Metabolic Approach in Controlling and Preventing Cancer

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)

(165) Greg Hagerty (Hodgkins)

(170) Lou Dina (Lymphoma)

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)

(161) Doris Sokosh (Breast Cancer) and Michal Ginach (Breast Cancer)

1995 Annual Cancer/Nutrition Convention

(172) Ruth Sackman: FACT—An Optimum Resource for Cancer Patients

(173) Stanley Bass, D.C.: Testing Nutrition Theories with Mice

(174) Jorge Estrella, M.D.: Boosting the Body's Healing Ability

(175) Ruth Sackman: Caveats on Alternative Health

(176) William H. Philpott, M.D.: Role of Magnetics in Cancer

(177) Philip Incao, M.D.: Rational Approach to Healing

(178) John R. Lee, M.D.: Xenobiotics—Endocrine Disturbance

(179) Jane Goldberg, Ph.D.: Finding the Lost Soul and Greg Hagerty (Hodgkins): Recovered Cancer Patient

Please Order Tapes by Number

BOOKS

Add \$ 2.00 for postage and handling on all book orders. Make checks payable to FACT, Ltd. and mail to FACT, Ltd., Box 1242, Old Chelsea Station, N.Y.C. 10113. Add \$3.00 for first-class postage. FOREIGN ORDERS: USE POSTAL MONEY ORDERS.

- Bass, Dr. Stanley: *In Search of the Ultimate Diet* (\$6.00)
Bieler, Dr. Henry: *Food Is Your Best Medicine* (\$5.99)
Brandt, Johanna: *Grape Cure* (\$4.95)
Cranton, Dr. Elmer: *Bypassing Bypass* (\$12.95)
Duesberg, Dr. Peter and Yiamouyiannis, Dr. John: *AIDS* (\$ 15.00)
Flatto, Dr. Edwin: *Cleanse Your Arteries and Save Your Life* (\$6.00)
Gerson, Dr. Max: *A Cancer Therapy, Results of Fifty Cases* (\$14.95)
Greenfield, Louise: *Cancer Overcome by Diet* (\$7.95)
Haight, S.J.: *Censured for Curing Cancer - American Experience of Dr. Max Gerson* (\$8.95)
Hay, Dr. William Howard: *How To Always Be Well* (\$6.95)
Heede, Dr. Karl O.: *Sure Ways to Health and Joy of Life (Waerland Dietary System)* (\$1.00)
Heritage Press: *Composition and Facts About Foods* (\$12.95)
Howell, Dr. Edward: *Enzyme Nutrition* (\$8.95)
Hunsberger, Eydie Mae: *Eydie Mae's Natural Recipes* (\$5.95)
Hunsberger, Eydie Mae: *How I Conquered Cancer Naturally* (\$7.95)
Jensen, Dr. Bernard: *Arthritis, Rheumatism and Osteoporosis, an Effective Program for Correction Through Nutrition* (\$7.00)
Jensen, Dr. Bernard: *Beyond Basic Health* (\$11.95)
Jensen, Dr. Bernard: *Blending Magic* (\$6.00)
Jensen, Dr. Bernard: *Doctor/Patient Handbook* (\$8.00)
Jensen, Dr. Bernard: *Foods That Heal* (\$14.95)
Jensen, Dr. Bernard: *The Greatest Story Ever Told* (\$7.95)
Jensen, Dr. Bernard: *The Healing Power of Chlorophyll* (\$6.50)
Jensen, Dr. Bernard: *A Hunza Trip and Wheel of Health* (\$7.95)
Jensen, Dr. Bernard: *Nature Has a Remedy* (\$12.95)
Jensen, Dr. Bernard: *A New Lifestyle for Health & Happiness* (\$7.00)
Jensen, Dr. Bernard: *Rejuvenation & Regeneration* (\$7.00)
Jensen, Dr. Bernard: *Seeds and Sprouts* (\$6.95)
Jensen, Dr. Bernard: *Tissue Cleansing Through Bowel Management* (\$8.00)
Jensen, Dr. Bernard and Dr. Donald Bodeen: *Visions of Health* (\$12.95)
Jensen, Dr. Bernard: *Vital Foods for Total Health* (\$8.00)
Jensen, Dr. Bernard: *What Is Iridology?* (\$5.95)
Kelley, Dr. William D.: *One Answer to Cancer* (\$11.95)
Kimmel, Dean: *6 Weeks to a Toxic-Free Body* (\$9.95)
Lane, Dr. Sir W. Arbuthnot: *The Prevention of the Diseases Peculiar to Civilization* (\$2.00)
Lauritsen, John: *The AIDS War* (\$20.00)
Lauritsen, John: *Poison By Prescription: The AZT Story* (\$12.00)
Lee, Dr. John: *Natural Progesterone* (\$10.00)
Levine, Barbara H.: *Your Body Believes Every Word You Say* (\$11.95)
Meyerowitz, Steve: *Fasting and Detoxification* (\$8.95)
Owen, Bob: *Roger's Recovery from AIDS* (\$10.00)
Ramos, Dr. Federico O.: *Treatment of Cancer By Means of Cell Therapy* (\$1.00)
Roy, Dr. Leo: *The Liver* (\$4.00)
Sokosh, Doris: *Triumph Over Cancer* (\$10.00)
Stickle, Robert W.: *A Rational Concept of Cancer* (\$3.50)
Stickle, Robert W.: *One Man's Fight to Control Malignancy* (\$3.50)
Tilden, Dr. John H.: *Toxemia Explained* (\$5.50)
Waerland, Are: *Health Is Your Birthright* (\$3.00)
Waldbott, Dr. George L.: *Fluoridation—The Great Dilemma* (\$5.00)
Walker, Dr. N.W.: *Becoming Younger* (\$5.95)
Walker, Dr. N.W.: *Colon Health* (\$5.95)
Walker, Dr. N.W.: *Diet and Salad Suggestions* (\$5.95)
Walker, Dr. N.W.: *Fresh Vegetables and Fruit Juices* (\$5.95)
Walker, Dr. N.W.: *Vibrant Health* (\$5.95)
Walker, Dr. N.W.: *Water Can Undermine Your Health* (\$5.95)
Wigmore, Dr. Ann: *Be Your Own Doctor* (\$3.95)
Wigmore, Dr. Ann: *Recipes for Life* (\$9.95)
Yiamouyiannis, Dr. John: *Fluoride, The Aging Factor* (\$14.95)

The books on this book list are very carefully selected. The nutrition books are based on *clinic experience*, not theory or laboratory work.

Information Packet \$5.00 (includes 1st class postage)

CANCER FORUM
10 BACK ISSUES \$5.00
20 BACK ISSUES \$10.00

FACT is a non-profit organization. All proceeds from book sales are used by the Foundation for Advancement in Cancer Therapy for your benefit.

Foundation for Advancement in Cancer Therapy, Ltd.
P.O. Box 1242 Old Chelsea Station
New York, NY 10113

ADDRESS CORRECTION REQUESTED

Non-Profit Org.
U.S. Postage
PAID
New York, N.Y.
Permit No. 5769

Please notify us if you change your address. Our non-profit mail will be returned to us at a charge of 35c and you will miss copies of *Cancer Forum* until your address is corrected. This mail is not forwarded.

Foundation for Advancement in Cancer Therapy, Ltd., Box 1242, Old Chelsea Station, New York, NY 10113

To help us help you and to support alternative cancer therapies, make your most generous, tax-deductible contribution to FACT. We plan to send receipts only upon request, to ensure more funds for FACT programs. If you do wish a receipt check here.

(please check amount)

- \$1,000 \$500 \$100 \$50 \$25 \$10 Other \$_____

Please make checks payable to FACT

Name _____ Telephone _____

Address _____ Apt. # _____

City _____ Zip _____

A copy of the last annual financial report filed with the New York State Board of Social Welfare may be obtained upon request by writing to: New York State Board of Social Welfare, Office Tower, Empire State Plaza, Albany, NY 12223.