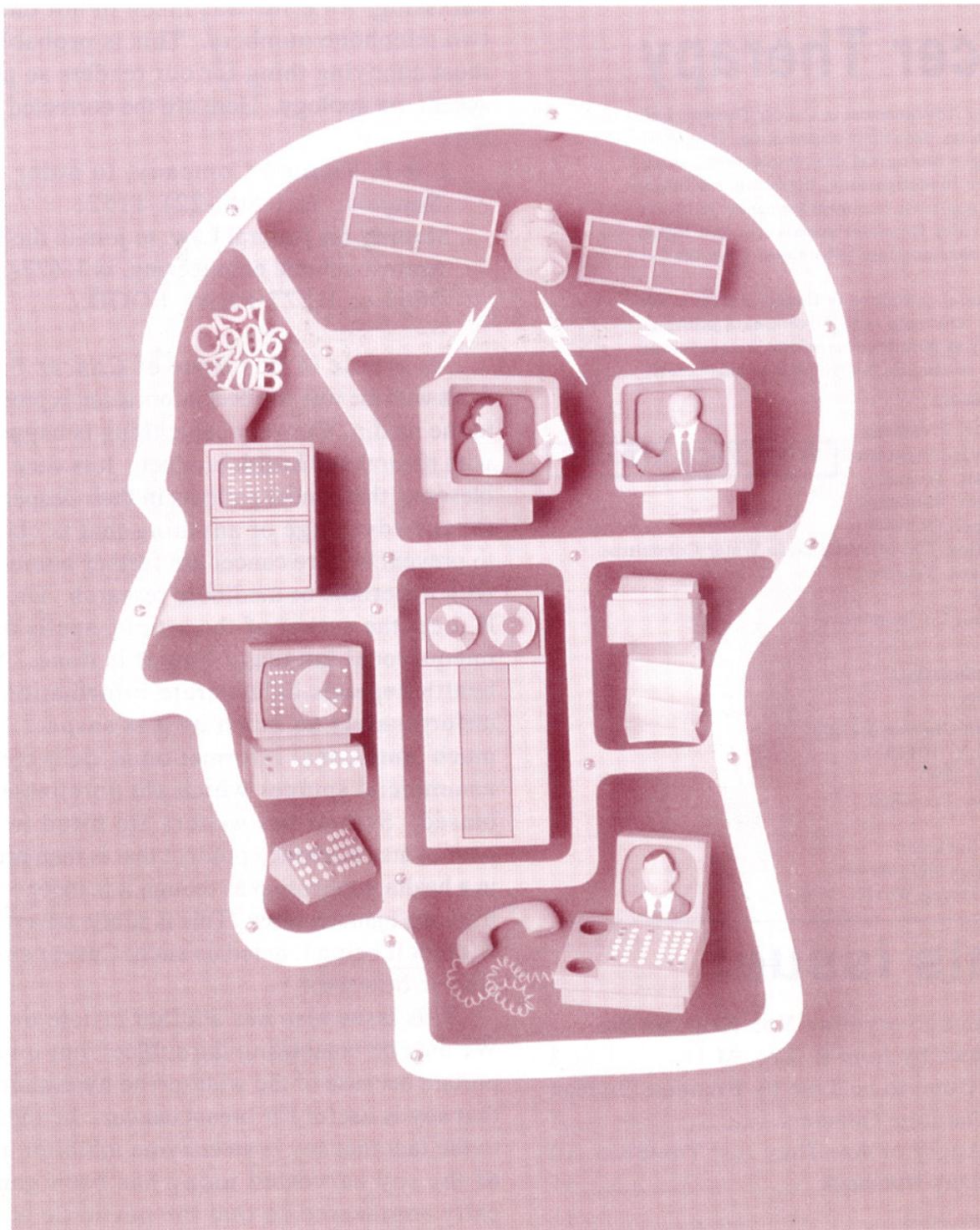


CANCER FORUM

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



Cover by Ellen Rixford

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

Corrections! I hope you can be tolerant and forgive our mistakes. These are truly embarrassing. An error was made in not one, but two telephone numbers. This is probably the most annoying thing for our readers so please accept my apology. Here are the corrected numbers:

L & H Vitamin Company, to order Somnos, is:1-800-221-1152.

Mothers for Natural Law, to join in the battle against genetic engineering, is 1-877-7325-3663 or 1-877-REAL FOOD.

An article in this issue of *Cancer Forum* deals with the way medical information is promoted in the media. The very same thing is happening with natural and health products. It is very troublesome that cancer patients in their desperation to take advantage of anything that is claimed to prevent or cure cancer are further bombarded with hyperbole or mediocre research. Dr. John R. Lee, the author of the article, spells out in unequivocal language how it is done. Your health depends on accurate information and unfortunately so much of it is suspect. Too much nutritional information is delivered by commercial sources which are unreliable and biased. Sometimes writers are hired to prepare an article about a product that is then printed in a health publication as though it is independent from the manufacturer. This is subtle advertising without it being labeled as such. Caveat emptor (buyer beware)!

This issue also has another article on soy. We may be belaboring the subject, but it is important because of the widespread hype claiming that soy is useful for breast cancer. In addition to the fact that soy is an enzyme inhibitor, most of the soy harvested today has been genetically engineered so that the pesticide is now a part of the bean. Egad! What next?

Ruth Sackman
Ruth Sackman

Don't Believe Everything You Hear on the TV News—

The slippery slope of semantic subterfuge

by John R. Lee, M.D.

The following is a minimally edited excerpt from The John R. Lee, M.D., Medical Letter, June 1999 issue. Dr. John R. Lee is a long time friend of FACT who has been a featured speaker at many of our Annual Cancer/Nutrition Conventions. A graduate of Harvard University and University of Minnesota Medical School and author of the groundbreaking books Natural Progesterone and What Your Doctor May Not Tell You About Menopause, Dr. Lee is an outspoken, independant voice in his field, as the following article illustrates.

Any news story has multiple interpretations. Different people interpret things differently. In politics this is called "spin-doctoring." The same happens in medical news. Drugs promoted as "wonder drugs" often turn out to be quite insignificant or to have harmful side effects that outweigh their benefits. We have become used to these occurrences—remember Seldane and fenphen?

What we do not expect is that a TV news report will be an outright lie. But this is exactly what happened recently. **This may seem shocking, but medical and health news is full of misleading information designed to convince you to buy one product over another.** The conventional medical approach to hormone replacement therapy is based on spin-doctored reports on studies that promise women benefits that just don't exist, or that gloss over serious side effects.

Let's take a closer look at this phenomenon. I

want you to be aware of how conventional medical gospel is created, not with scientific research or evidence-based medicine, but with well-funded and masterfully orchestrated spin-doctoring. Millions of dollars a year are spent in precisely the type of media manipulation that this story represents.

In April, TV news programs around the U.S. aired a clip reporting that a *Journal of the American Medical Association (JAMA)* study found that estrogen supplementation improved memory in menopausal women. In fact, the study found that estrogen supplementation increased brain activation patterns, but the authors clearly reported that "**Estrogen did not affect actual performance of the memory tasks.**" (emphasis added) Thus, the study merely confirmed what has been long known, namely that estrogen increases brain cell membrane



excitability. But it did not show, contrary to the TV news report, that estrogen supplementation improved memory in menopausal women.

Strangely, the study was funded by two grants from the National Institute of Child Health and Human Development. Wyeth-Ayerst chipped in with Premarin supplies and paid the cost of equilin (horse estrogen) assays, the results from which were never mentioned in the article. There's a good chance they also indirectly funded the study. I wonder if anyone at the National Institute of Child Health and Human Development cared a whit that the study involved menopausal women, and had nothing to do with children?

THE MECHANICS OF MEDICAL SPIN DOCTORING

One might wonder how such a mistake is made on the TV news? Here's how. The TV news stations receive a news release on the topic in the form of a well-produced video clip and a script all ready to go on the air for the station's daily "Health News" segment. The clip may come from a parent network, from a news service, or a public relations company, and **the TV station rarely questions the ultimate source, which is a drug company. Why should they? They are hungry for news** which they have to churn out three or four times a day, and the opportunity to air a professional-looking video clip about a study published in a major medical journal saves much time, effort and money. Nobody at the station goes back and actually reads the study itself to check on the accuracy of the information, or consults with someone who has read the study and has the skills to interpret it—these news releases are simply parroted back to you, unquestioned and unexamined. This is not journalism; it is an indirect form of advertising.

What can be done about this now? The report has already intentionally misled millions of viewers, and has become conventional medical gospel—more false evidence that estrogen helps with memory—that will be regurgitated hundreds of times in future news reports and print articles. I imagine the drug company is quite pleased with itself—great advertising at a relatively low cost. Once again, we understand how advertising and drug promotion leads physicians and thus medical practice by the nose.

NO SUCH THING AS UNBIASED REPORTING WHEN PRESS RELEASES ARE REGURGITATED

The same practices hold true in the print media. Just today I came across a story in the newspaper that Wyeth-Ayerst, the drug company that manufactured the "fen" half of the damaging diet pill

combination fen-phen, hired people to ghost write stories about the drug combo that intentionally left out or played down descriptions of the side effects, even though they were well established at the time.

Magazines and newspapers are as story-hungry as TV is, so a "free" article ghost-written for a magazine, with a byline by an M.D. and probably some nice graphics, saves the cost of paying writers, researchers and photographers, and pleases a major advertiser. This is standard operating practice in the media. **Too much of our media news and editorial content is generated by public relations companies who churn out spin doctored material.** It looks good, it sounds good and best of all, it's free.

Virtually every health segment in the print and television media has a commercial sponsor lurking somewhere in the background, most commonly

hiding behind academic research. **Spots that report on the negative effects of a drug are often sponsored by the manufacturers of competing**

drugs. Nutrition research is usually supplied by the industry that is favored by the research: vitamin companies, the dairy industry, the beef industry, the processed food industry, and so forth. Pure academic research with no strings attached does not truly exist anymore.

WHOM TO TRUST?

Because of all the strings attached to research, it's difficult even to trust scientific studies. **It's all too common to engineer protocols and juggle statistics to produce a desired outcome.** In fact, you can go on-line to Medline, the federal government's National Library of Medicine database, and find reams of studies to back up almost any position in medicine you want to take. That's why it's important that we know who sponsors studies, that they be duplicated by others, that results be backed up by sound theory and with clinical hands-on experience, and that they be properly interpreted.

When you look for medical information to

trust, try to find a source with little or nothing to gain financially by selling you a consumer product so the interpretation will be as free from bias as possible. **Financial bias is why I steadfastly refuse to endorse any brand of progesterone cream** or to make money from the sale of progesterone cream. I want readers to rest assured that I'm telling them about hormone balance because I think it will benefit them, not because I will profit from selling a hormone product.

One of my goals is to sift and sort through the flood of medical information out there and fill you in on what's for real, what's spin doctoring and when we should take a wait-and-see attitude.

AND

THERE'S
MORE

For years I've been trying to debunk the "eggs are bad for your heart" myth. Finally the Harvard

Nurses' Health Study has produced a look at 127,000 people over 14 years and compared their cardiovascular health to their egg consumption. **Those who ate an egg a day did not have any higher risk of cardiovascular disease.** This conclusion was inevitable because there was never any connection between eggs and heart disease to begin with!

The "eggs are bad for you because they're high in cholesterol" myth has been perpetuated for years by the competing cereal industry based on absolutely no scientific evidence and lots of media manipulation. **It's a perfect example of how once something appears in print and on TV enough times it becomes the gospel whether or not there is any truth to it.**

Decades later the tide is finally turning and eggs are getting the attention they deserve as one of nature's health foods. **There's just no comparison between having a sugary cereal with milk and having an egg for breakfast. One is essentially junk food, and the other is a nutritional powerhouse.** If you eat eggs from free range chickens

you'll be even further ahead because their fatty acid profiles are better.

In the July issue of The John R. Lee, M.D., Medical Letter, Dr. Lee included this follow-up:

Last month I wrote about medical spin-doctoring and about how companies use cleverly worded press releases and video clips to twist medical and scientific facts to suit their needs. Shortly after that issue came out, *Journal of the American Medical Association (JAMA)* published a **study on hormone replacement therapy (HRT) and the risk of breast cancer, which illustrates that the same**

type of shenanigans go on with published studies. The headline reporting the study in the *New York Times*, for example, read,

"A Study Downplays Estrogen Link to Breast Cancers," and went on to state that the study "...offers some reassurance, finding little evidence to link hormone replacement with the most common types of breast cancer, known as ductal or lobular cancer."

The good news is supposed to be that HRT supposedly doesn't raise the risk of the most common types of breast cancers, though it does significantly raise the risk of other less common types. However, the authors of the study never account for what type of estrogen the women took, how much they took, whether they were also taking a progestin, and what kind of progestin it was, whether they had their ovaries, if they had a hysterectomy, why and how individually sensitive they were to estrogen. The published data is inconsistent, saying that breast cancer risk is increased with short-term estrogen use in one graph, while the table that the graph was derived from says breast cancer risk is increased with long-term estrogen use. Some types of cancer are left out of the analysis, and others are inappropriately grouped so that the non-cancer,

ductal carcinoma in situ (DCIS), which is not a cancer, is lumped in with real cancers.

SPIN DOCTORING CREATES CONFUSION

I have done a detailed technical analysis of this study, which you can read in the Subscribers Only area on my website (www.johnleemd.com). Meanwhile, in the same medical journal and many others, tamoxifen—estrogen blockers such as tamoxifen and raloxifene are being touted as preventive medicine for breast cancer, and young women at risk are urged to take it to prevent breast cancer. **So, on the one hand we have studies (promoted by the drug companies that sell estrogen) claiming that estrogen does not cause breast cancer, and on the other hand women are being encouraged to take a drug that blocks estrogen in order to prevent breast cancer (promoted by the drug companies that sell estrogen blockers).** Obviously both things can't be medically correct. No wonder women are confused! (For details on hormones and cancer, see the April and May 1998 issues of this newsletter, and the

chapters on cancer in *What Your Doctor May Not Tell You About Premenopause*.)

Despite all of this, I am not completely opposed to estrogen replacement therapy (ERT). I support it when it is clearly needed (most doctors don't even measure hormone levels before prescribing it), when it is given in the proper physiologic dose (the usual prescribed dose is ten times too high), and when it is given with natural progesterone (women with a hysterectomy are told they don't need the protection of a progestin or progesterone, but they do).

To learn more about *The John R. Lee, M.D., Medical Letter*:

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THE TRUTH ABOUT ESTROGEN & THE BRAIN

It is well known that estrogen increases brain cell membrane excitability. In balance, this has a beneficial effect on the brain. A deficiency of estrogen can lead to depression, and an excess can lead to anxiety and poor sleep. Most postmenopausal women are making plenty of estrogen in their fat cells and don't need supplemental estrogen for good brain function.

It is also known that progesterone has a calming effect on the brain cell membranes. In fact, in physiologic doses it allows the brain to concentrate, or focus better. In excess it can cause lethargy or sleepiness, which is often reported when women use oral progesterone. Women using physiologic doses of progesterone notice that their brain performance for memory or for tasks that require concentration is improved; they also note better sleep and less anxiety.

The *JAMA* study merely reaffirms the fact that excess estrogen can increase brain cell excitability without increasing brain performance. In other words, being hyper, anxious and sleep deprived does not make you smarter. If you think you might be estrogen deficient, it's a good idea to get a saliva hormone test to find out for sure.

Saliva Hormone Testing (recommended in *The John R. Lee, M.D., Medical Letter*):

David Zava, Ph.D., ZRT Laboratory, (503) 469-0741, fax (503) 469-1305, e-mail dtzava@aol.com; ZRT Laboratory, 12505 NW Cornell Road, Portland, OR 97229

Great Smokies Diagnostic Laboratory, 63 Zillicoa St., Asheville, NC 28801-1074, (800) 522-4762 (for doctors), (888) 891-3061 (for consumers).

Soy—Too Good to be True by Brandon Finucan and Charlotte Gerson

In the Summer 1998 Cancer Forum (Vol. 15, No. 11/12) we published an article from the November/December issue of Gerson Healing Newsletter on the negative aspects of soy called, "Are Soy Products Dangerous?" The following is another article from the Gerson Healing Newsletter on the subject because even though there has been "considerable research on the harmful substances within soybeans, you'll be hard pressed to find articles today that claim soy is anything short of a miracle-food. As soy gains more and more popularity through industry advertising, we are moved once again to raise our voice of concern." FACT shares this deep concern.

The Soybean Industry in America

In 1924 soybean production in the U.S. was only at 1.8 million acres harvested, but by 1954, the harvested acres grew to 18.9 million. Today, the soybean is America's third largest crop (harvesting 72 million acres in 1998), supplying more than 50 percent of the world's soybean demand.

Most of these beans are made into animal feed and are manufactured into soy oil for use as vegetable oil, margarine and shortening. Of the traditional uses for soy as a food, only soy sauce enjoys widespread consumption in the American diet. Tofu, measuring 90 percent of Asia's use of the

At your local supermarket, soy can now be found disguised as everything from soy cheese, milk, burgers and hot dogs, to ice cream, yogurt, vegetable oil, baby formula and flour (to name just a few).

soybean, has gained more popularity in the U.S., but soy is still nowhere near a measurable component of the average American diet—or is it?

For more than 20 years now, the soy industry has concentrated on finding alternative uses and new markets for soybeans and soy byproducts. At your local supermarket, soy can now be found disguised as everything from soy cheese, milk, burgers and hot dogs, to ice cream, yogurt, vegetable oil, baby

formula and flour (to name just a few). These are often marketed as low-fat, dairy-free, or as a high-protein meat substitute for vegetarians. But soy isn't always mentioned on the box cover. Today, an alarming 60% of the food on America's supermarket shelves contains soy derivatives (i.e., soy flour, textured vegetable protein, partially hydrogenated soy bean oil, soy protein isolate). When you look at the ingredients list, and really look at the

This organic acid is present in the bran or hulls of all seeds and legumes, but none have the high level of phytates that soybeans do.

contents of the "Average American Diet," from snack foods and fast foods to prepackaged frozen meals, soy plays a major role.

Where Does the Soybean Go Wrong?

Here at the Gerson Institute, we feel that any claimed positive aspects of the soybean are overshadowed by their potential for harm. Soybeans in fact contain a large number of dangerous substances—including potent enzyme inhibitors. These inhibitors block uptake of trypsin and other enzymes that the body needs for protein digestion. Normal cooking does not deactivate these harmful "antinutrients," that can cause serious gastric distress, reduced protein digestion and can lead to chronic deficiencies in amino acid uptake.

Soy contains high amounts of phytic acid, also called phytates. This organic acid is present in the bran or hulls of all seeds and legumes, but none have the high level of phytates that soybeans do. These acids block the body's uptake of essential minerals like calcium, magnesium, iron and especially zinc. Adding to the high-phytate problem, soybeans are very resistant to phytate reducing techniques, such as long, slow cooking.

Beyond these, soybeans also contain hemagglutinin, a clot promoting substance that causes red blood cells to clump together. These clustered blood cells are unable to properly absorb oxygen for distribution to the body's tissues, and cannot help in maintaining good cardiac health. Hemagglutinin

and trypsin inhibitors are both “growth depressant” substances. Although the act of fermenting soybeans does deactivate both trypsin inhibitors and hemagglutinin, precipitation and cooking do not. Even though these enzyme inhibitors are reduced in levels within precipitated soy products like tofu, they are not altogether eliminated.

Soybeans also contain potent enzyme inhibitors. These inhibitors block uptake of trypsin and other enzymes that the body needs for protein digestion.

Only after a long period of fermentation (as in the creation of miso or tempeh) are the phytate and “antinutrient” levels of soybeans reduced making their nourishment available to the human digestive system. The high levels of harmful substances remaining in precipitated soy products leave their nutritional value questionable at best, and in the least, potentially harmful.

What About the Studies?

In recent years, several studies have been made regarding the soybean’s effect on human health. The results of those studies, largely underwritten by various factions of the soy industry, were of course overwhelmingly in favor of soy. The primary claims about soy’s health benefits are based purely on bad science. Although primary arguments for cancer patients to use soy focus on statistics showing low rates of breast, colon and prostate cancer among Asian people, there are obvious facts being utterly ignored.

While the studies boast that Asian women suffer far fewer cases of breast cancer than American women do, the hype neglects to point out that these Asian women eat a diet that is dramatically different than their American counterparts. The standard Asian diet consists of more natural products, far less fatty meat, greater amounts of vegetables and more fish. Their diets are also lower in chemicals and toxins, as they eat far fewer processed (canned, jarred, pickled, frozen) foods. It is likely these studies are influenced by the fact that cancer rates rise among

Asian people who move to the U.S. and adopt Americanized diets. Of course, this change of diet goes hand-in-hand with a dramatic shift in lifestyle. Ignoring the remarkable diet and lifestyle changes, to assume only that reduced levels of soy in these Americanized Asian diets is a primary factor in greater cancer rates is poor judgement, and as stated above, bad science. The changes of diet and lifestyle must be considered to reach the correct conclusion.

A widely circulated article, written by Jane E. Allen, AP Science Writer, titled “Scientists Suggest More Soy in Diet,” cites in the course of a symposium, numerous speakers discussing the probable advantages of soy under the title “Health Impact of Soy Protein.” However, the article states that the \$50,000 symposium “was underwritten by Protein Technologies International of St. Louis, a DuPont subsidiary that makes soy protein!” In the course of the same symposium, Thomas Clarkson, professor of comparative medicine at Wake Forest University, states, “Current hormone replacement therapy has been a dismal failure from a public health point of view,” not because Premarin is known to cause

The high levels of harmful substances remaining in precipitated soy products leave their nutritional value questionable at best, and in the least, potentially harmful.

uterine or other female organ cancers, but “because only 20 percent of the women who could benefit from it are taking it.”

Other popular arguments in support of soy state that fermented products, like tempeh or natto, contain high levels of vitamin B-12. However, these supportive arguments fail to mention that soy’s B-12 is an inactive B-12 analog, not utilized as a vitamin in the human body. Some researchers speculate this analog may actually serve to block the body’s B-12 absorption. It has also been found that allergic reactions to soybeans are far more common than to all other legumes. Even the American Academy of Pediatrics admits that early exposure to soy through commercial infant formulas, may be a leading cause of soy aller-

gies among older children and adults.

In his classic book, *A Cancer Therapy—Results of 50 Cases* (p.237), Dr. Gerson put “Soy and Soy Products” on the “FORBIDDEN” list of foods for Gerson Therapy patients. At the time, his greatest concerns were two items: the high oil content of soy and soy products, and the rather high rate of allergic reactions to soy. Soybeans can add as much as 9 grams of fat per serving, typically adding an average of 5 grams of fat per serving to an average American diet.

The Extraction Process

The processes which render the soybean “edible” are also the processes which render it “inedible.” In fermenting soybeans, the process entails that the beans be pureed and soaked in an alkaline solution. The pureed mixture is then heated to about 115°C (239°F.) inside a pressure cooker. This heating and soaking process destroys most, but not all, of the anti-nutrients. At the same time, it has the unwelcome effect of denaturing the proteins of the beans so they become very difficult to digest and greatly reduced in effectiveness. Unfortunately, the

The primary claims about soy's health benefits are based purely on bad science.

alkaline solution also produces a carcinogen, lysinealine, while it reduces the already low cystine content within the soybean. Cystine plays an essential role in liver detoxification, allowing our bodies to filter and eliminate toxins. Without proper amounts of cysteine, the protein complex of the soybean becomes useless, unless the diet is fortified with cystine-rich meat, egg, or dairy products—not an option for Gerson patients.

To the soybean's credit, they do contain large amounts of beneficial omega-3 fatty acids, but these are particularly susceptible to rancidity when subjected to high pressures and temperatures. Unfortunately, high pressure and temperature are required to remove soybean oil from the soybean.

Before soybeans are sent to your table, they undergo a rigorous process to strip them of their oil. Hexane or other solvents are first applied to help

separate the oil from the beans, leaving trace amounts of these toxins in the commercial product. Hexane by definition is: “any of five colorless, volatile, liquid hydrocarbons C₆H₁₄ of the paraffin series,” and cannot be the least bit beneficial in anyone's diet. After the oil is extracted, the defatted flakes are used to form the three basic soy protein products. With the exception of full-fat soy flour, all soybean products contain trace amounts of **carcinogenic solvents.**

Personal Experiences

The following letter was received in November 1998: “I have used soy milk for 12 years with no

With the exception of full-fat soy flour, all soybean products contain trace amounts of carcinogenic solvents.

problems. About 9 months ago, I started to have heart palpitations. I thought maybe that I was in menopause, but I wasn't. I added more potassium to my diet and magnesium and vitamin E. No change. I am already decaffeinated, but I also took all sugar out of my diet. I lost 25 pounds and felt great except for the palpitations. I tried hawthorn and garlic but nothing was helping. Recently I came down with acute bronchitis and could only drink water because even the soy milk made me have horrendous bouts of coughing. I realized that after a few days my heart palpitations had stopped. I didn't think anything of it because it never occurred to me that soy was the culprit.

As soon as I started drinking it again, my heart went crazy. I went off it for a week and then changed brands. Within 30 minutes of drinking only 4 ounces of soy milk my heart was all over the place. I've noticed that it takes about 24 to 36 hours for my heart to settle down. I wondered if your research turned up anything like this in regard to soy. I know it is not within the definition of an allergy, but something is definitely going on. I called the manufacturer of the soy milk, but they were of no help. I am very upset because I only drink soy milk and water. I also use the soy milk to make protein shakes (with what else ...but soy protein).”

In our November/December 1996 issue of the *Gerson Healing Newsletter* we described another case: a pregnant lady who looked very ill and was terribly deficient! She also described her son, age five, who had many allergies and infections—both were using a good deal of soy in their diet. I recommended that they discontinue the use of all soy products. At the time, I had only just run across this situation. However, a year later, I was in the same area for a lecture, and the lady invited me to dinner. She had cut out all soy products: her skin was now rosy, her face filled out, her sunken eyes normal, her black circles gone and her little boy, now six, was in greatly improved health.

Just last week, another interesting story came to our attention. A patient at the Gerson Certified Hospital in Mexico told us of her son, now 25, who has total lack of hair (Alopecia) with the exception of eyebrows and eyelashes. She added that this started when he was just three years old. Since the mother asked me about this situation, I considered the problem for a moment. Then, looking at the parents who both have normal hair, I figured that the boy's problem was most probably not genetic. So, I asked the mother if he used a lot of soy. She said, no. But then, after thinking about the question for a moment, she said that at about one year of age, the boy had many allergies, so she regularly fed him soy milk! I explained to her about the enzyme and nutrient blocking ability of soy and the likelihood of the soy milk being the cause of his condition starting at age three. Since we had just witnessed the case of a patient whose hair grew back on his bald pate after being bald for some 20 years, I cautiously suggested that a complete change of diet accompanied by intensive detoxification, may be able to overcome the problem.

For more information on soy, which is largely being produced today by genetic-engineering, the following websites were listed in the above article:

- "Jeopardizing the Future? Genetic-Engineering, Food and the Environment" by Dr. Michael Hanson and Jean Halloran (Consumer Policy Institute/Consumer's Union), <http://www.pmac.net/jeopardy.html>
- "Monsanto Genetically-Engineered Soya has Elevated Hormone Levels: Public Health Threat" (October 1997), <http://www.holisticmed.com/ge/warning.html>
- "Monsanto's Toxic Roundup" (November 1996), <http://www.holisticmed.com/ge/roundup.html> ☼

Are They Angry, or are they just ... Toxic?

Agricultural chemicals aren't just carcinogenic, they're making us aggressive.

A report in the journal *Toxicology and Industrial Health* says that continued exposure to low doses of water-borne weed killers, artificial fertilizers and pesticides, at levels in US groundwater, cause significant changes in the way we behave. The study, which took medical researchers at the University of Wisconsin in the USA five years to complete, is one of the first to explore the effects of combinations of agricultural compounds.

Scientist Warren Porter's team discovered that combinations were far more likely to cause thyroid imbalances than individual chemicals. The thyroid controls the body's metabolic rate. People who have a fast metabolism tend to be more nervous and aggressive than those with a slow metabolism. Combinations of frequently-used chemicals were found to make the thyroid hyperactive, causing increased irritability and aggression.

In another study carried out in the Yaqui Valley, Sonora, Mexico by Elizabeth A. Guillette and her colleagues, a comparison was made of the behavioral, learning and physical differences of children brought up in the valley basin, where pesticides are liberally sprayed, and those who live in the foothills, where families don't use sprays at all. They came to the same conclusion: that the pesticide-exposed children of the valley basin were noticeably more aggressive than the children from the foothills.

A recent spate of violence from America's young has left people wondering what the problem is. Is it the breakdown of communities, religion, families? Is it violent TV? Few have questioned the role that increasing doses of man-made chemicals have to play.

*(reprinted from the British journal
The Ecologist, Vol. 29, No.4, July 1999)*

Dr. Porter's study on chemical combinations was published in Toxicology and Industrial Health, Vol. 15, Nos. 1 and 2 (1999), pp. 133-150.

Reading an article in *Medical World News* triggered some serious thoughts about calcium. The article was titled, "Health Faddist's Bone Meal Mimics Cancer on X-rays." The bone meal deposit was found in the abdominal area and the appearance on the x-ray was typical of what is usually seen as ovarian cancer. This was a 24-year-old woman suffering from abdominal pain which prompted the doctor to order an x-ray. If it wasn't for the sharpness of the doctor, she would have been scheduled for the typical cancer syndrome. The article was written to urge doctors to question patients about their intake of supplements.

Because of the hype that is scaring people about osteoporosis, calcium is being supplemented without determining if there is a deficiency, what form of calcium is right or whether the body is capable of metabolizing calcium. Can you imagine the consequences if the patient was treated for cancer?

A number of years ago an item was printed in *Cancer Forum* about essential synergism. It pointed out that vitamins and minerals are not metabolized unless they are part of a complex, such as is found in nature. For example, calcium needs to be combined with magnesium, phosphorus, along with other elements which are not *necessarily known*. And it should be a natural edible-type calcium, not chalk, eggshells or seashells. These are not synergistically sound. Calcium that is not metabolized can cause all sorts of complications. It can settle in odd places in the body similar to what appeared on the x-ray presented in *Medical World News*. Sometimes it settles at the bone ends (joints) and causes arthritic symptoms. If the calcium cannot be metabolized, one can take a ton of it and not reap any benefit, but a small amount of good quality calcium will be absorbed easily and the body's need will be well-served.

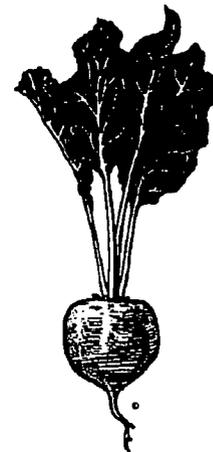
When the doctor diagnoses a patient with osteoporosis, he uses the allopathic concept of treating the symptom by prescribing calcium instead of determining why the patient is deficient. Given that calcium is about the most prolific element found in the food chain, instead of a lack of calcium in the diet, there might be an inability to metabolize calcium because of thyroid inefficiency. In that case adding supplementary calcium of any kind or quantity will be of no value. But, that is not to say that the supplementation *will do no harm*.

Many of you are familiar with the work of Dr. Max Gerson. For those of you who are not—he ran a cancer clinic in Nanuet, New York in the 1940s and 50s and wrote a book, *A Cancer Therapy—Results of Fifty Cases*. In his clinic practice, he found that calcium complicated the favorable results he looked for. He, therefore, emphatically negated the use of calcium supplements for patients on his program. That should be our guide.

Recipes

Cold Borsht

- 1 medium beet
- 1 tablespoon raw honey
(or to taste)
- 1 tsp. lemon juice (or to taste)
- 1 cup distilled water
- 1/2 cup whole plain yogurt
- 1 potato, baked, boiled or steamed (optional)
- 1/2 tablespoon yogurt and dash fresh dill (optional garnish)



1. Grate the beet fine. Put beet, honey, lemon juice, water and yogurt in a blender and puree.
 2. For extra heartiness, add chunks of potato to the soup. Refrigerate.
- Serve with a dollop of yogurt and dash of fresh dill weed on top.

Lima Bean Soup

from Bernard Jensen, Ph.D., D.C.

- 3 cups anise tea (or other herbal tea)
- 1 cup baby lima beans
- 1 tsp. paprika
- 3 cloves crushed garlic
- 1/2 cup chopped parsley (for garnish)

Cook until tender. Then blend in a liquifier (or puree through sieve) one-third of the mixture to become a thickening for the soup. Season with vegetable seasoning, garnish with chopped parsley.

Fresh Tomato Sauce

In small bowl mix 2 finely chopped medium tomatoes, 1 tablespoon olive oil, 1 teaspoon oregano, dash of sea salt (optional). Let stand 15 minutes. For a smoother sauce, this can be made in a blender.

Letters

Dear Mrs. Sackman:

I cannot thank you enough for your participation and for the marvelous presentation you gave on "Alternatives to Cancer Treatment" at our seminar. Judging from the evaluations the students completed on Friday, there was a great interest in having future workshops on the topic.

Thanking you again and looking forward to working with you again in the future, I am, V.H.

Dear Ruth,

Your package of books arrived and I was happy to receive them. There are so many people who come through our place now and we have a special section in our library with the tapes, information packet and books we have purchased from FACT over the years. We refer to them all the time and are immensely grateful for the service you provide.

Thank you for your kind offer to contribute some books to our library. We would of course be thrilled to receive whatever resources you can spare. Knowing that you, too, are a non-profit organization, makes it difficult to accept such a generous and kind offer. But yes, whatever, resources you can spare or that you especially recommend, will be graciously and gratefully received and shared!!

Thank you for all you do—for being there. All good blessings, Sister Miriam
Sister Miriam Theresa McGillis is Director of Genesis Farm, a learning center in New Jersey, which includes an organic farm.

Dear Ruth,

I was unable to write to you until now. Your husband and you have always been looked up to be a perfect couple. I have known you for over 50 years during which time both of you have contributed something to humanity. May you continue to do our work with that wonderful zeal you always have.

With deepest affection, H.B., M.D.

P.S. I am quite shaky. Who wouldn't be at my age?

Dear Mrs. Sackman,

I have enclosed my check for \$25.00 to the *Cancer Forum*.

Also, I would like to order the book *Cleanse Your Arteries and Save Your Life* by Dr. Edwin Flatto. May be the answer for my leg pain.

I always read your *Cancer Forum*. This is the only health "magazine" I trust. M.L.

Dear FACT:

Enclosed is my check for \$10.00 payable to FACT. Please place my name on your mailing list for *Cancer Forum*, upcoming cancer/nutrition conventions, books, articles, and tape recordings available through the mail and any information you can send me regarding FACT and your services.

I have spoken to you on the phone recently and find your knowledge to be extensive, your communication to be clear, concise and appropriate and your willingness to provide intelligent advice most refreshing and helpful.

Thank you very much.

Very truly yours, S.S.

Dear FACT — Ruth,

Thank you for speaking with me via telephone this morning. As you requested, here is a \$5.00 check for the Information Packet about FACT. I believe in this type of response to disease, and hope it will benefit my mother.

Please include our family when mailing or soliciting. R.C.

Dear Ruth,

Do you have an alternative to treat glaucoma. I am presently using eye drops and as I am very much against taking any kind of medication this worries me. What is it doing to my body, as no doubt it affects everything?

Would appreciate a reply. Thank you so much, G.L.

Editors note: Glaucoma is a stress-related problem. There are a number of relaxation techniques that can be employed to control stress. Biofeedback and meditation are exceptionally useful tools. A book titled, Coping With Glaucoma, by Edith Marks and Rith Montaurede, has a chapter on alternatives in which she provides extensive coverage of stress reduction and other techniques she uses.

The book is published by Avery Publishing Group, 120 Old Broadway, Garden City, N.Y., 11040. The price is \$13.95.

Dear Ruth,

Enclosed please find my contribution. Your organization has helped me and my family in so very many ways. Your knowledge, wisdom, information and opinions touch us each and every day of our lives. There is always something we are doing that has come about as a result of your teachings. We are most grateful to you.

Good health to you all. My very best wishes, S.P.

Book Review by Consuelo Reyes

The Gift of Wounding—Finding Hope and Heart in Challenging Circumstances by Audre Auw, Ph.D. (Aslan Publishing, 2490 Black Rock Turnpike #342, Fairfield, Ct, 1999, 171 pp.), \$13.95.

There are books that “demand” to be devoured as soon as possible—in a day, in a night—and, at the risk of feeling rotten in the morning, we obey. So strong is the need “to find out.” And then there are those books where the desire “to know” is equally alluring, but which elicit a more patient response—to savour, to taste and retaste over an extended period of time so as to maximize the chance to consider, to discover. These can become like old friends that we would rather not ever “finish.”

The Gift of Wounding by Audre Auw, Ph.D., is definitely the latter kind of book. I stretched it out well over 2 months, reading and re-reading no more than 1 of the short 6-7 page chapters a day, 2 or 3 chapters a week. There are plenty of clever psychology self-help books around with catchy titles and witty, facile answers to all our modern mental knots, but this is not one of them. *The Gift of Wounding* is just straight, down-to-earth talk, like a nice chat with a good friend who never claims to know the answers but listens carefully, then gently says, “Well, perhaps you could try looking at it like this...”

Dr. Auw is a psychologist, counselor and former Catholic priest who conducts seminars and workshops in Europe, Japan and Southeast Asia. With Dr. Carl Rogers, he co-founded the Center for Studies of the Person in La Jolla, California. The premise of this book (as in his previous one, *Gentle Roads to Survival*) is that life is inherently about change—unpredictable twists and turns, risks and challenges, pains and joys. It just comes with the territory. The sooner we accept this fact of existence, the more rewarding our lives can be. But most of us fear change, preferring too often the “rut” we know than the unknowable. We see ourselves as victims of circumstance beyond our control. In short, we struggle to hold our ground in a world of constant flux and fail to notice that change contains also wonderful possibilities.

Change, Dr. Auw counsels, can start with small steps, small risks: “The invitation to newness need

not be a life-altering experience or transformation. It can be something as simple as an offer to view things in a new way or to experience people and situations differently.” He gives the example of holding a pen in front of a person and asking, “What do you see?” The answer invariably is “a pen.” So the questioner nods and asks, “And what else do you see?” Eventually, the individual acknowledges a broader perspective—the hand holding the pen, the window behind with curtains blowing in the wind, the painting on the wall, etc.

Such is our penchant for getting locked into our own little world. We miss the full picture. When we focus on blaming others for our problems, we fail to see that their well-meaning but perhaps misguided efforts may be a result of poor communication. If we reach out to understand another point of view, we open the door to compassion and greater closeness. Likewise, fixation on the self could mean that a cancer diagnosis hurls us into self-pity and despair. We become paralyzed with panic and miss the chance to help the body heal and perhaps arrive at a higher state of health and well-being.

As an incurable daydreamer, I especially liked the final chapter on the importance of imagination. As Dr. Auw puts it: “What is needed is permission to allow our imagination to express itself without restriction. The kind of imaginative soaring we experienced as children, traveling in our minds to distant ports of call, and ancient civilizations. Transcending space and time is the province of the imagination and it is the magic key to the castle of our inner riches.” He encourages us to exercise our “other reality” muscles: reading a novel set in an early period of history and picturing ourselves living the daily lifestyle; watching floating clouds lets us free our mind to imagine faces and objects that take on an adventure. This, he says, is a natural “call to greatness, an impulse to experience that part of us which lifts us above the mundane and touches upon the divine.”

My only complaint with *The Gift of Wounding* is that it has just 171 pages. I would have liked to continue my “talks” with Dr. Auw a whole lot longer, but, hopefully, we’ll be hearing much more from him in the future. In the meantime, I’ll be busy watching those “floating clouds...”

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