

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.

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Dear Reader,

The following item by John Tobe appeared in *The Provoker*, a health magazine published by Tobe. I was impressed with its logic so want to share it with you:

Man knows how to travel to the moon, he knows how to travel under water, he knows how to travel on the earth at tremendous speeds and he knows how to fly in the sky. All this, man has achieved, and still he doesn't know how to live out his normal life in good health and well-being.

Please take the time to read Consuelo Reyes' article about the history of the Food and Drug Administration on page 3 and Ruth Sackman's Notebook on page 8. Something must be done to change for the better the focus of this agency as it is a vitally important entity in protecting our health and life. As Margaret Mead said, and I continue to remind you, "Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has."

Let us put forth the effort to make the change and see what we can accomplish.

To your health,

FDA — How Did It Come To Be and Where Is It Going?

by Consuelo Reyes

The Food and Drug Administration (FDA) is the oldest U.S. federal consumer “watchdog” agency, founded by act of Congress in 1906. But legislators did not come easily to the idea that a national entity was needed to protect the public from the dangers of an unfettered marketplace. Indeed, it could be more aptly said that the U.S. Congress was dragged to action, kicking and screaming — not unlike the situation that exists today. A look back at this twisted history may be instructive for the present.

In the early days of the country, there was no federal regulation of the marketplace. Pressure for national laws came about only in the mid 19th century as the Industrial Revolution ushered in great changes in food and drug production. Discoveries in chemistry led to the development of new medicinal preparations which competed with traditional botanicals as the primary pharmacopeia. Technology was altering growing methods and creating advances in food processing. Improved transportation encouraged the national market for foods and medicines that heretofore had been produced locally. Increasingly, ways were needed to resolve the clashing interests of traditional enterprises versus those of the new industries — all vying for the hearts and dollars of the public.

While the consumer may have benefitted from the convenience and lower prices of preserved and

processed foods compared to fresh perishable produce, as well as the lower cost of new medicines, the heightened competition opened the door to adulteration and fraud.

Natural, local producers appealed to Congress to enact laws that would regulate what they saw as unfair competition and threats to public health. Lobbyists for the increasingly powerful food and drug technologies fought to keep government from interfering with the basic law of supply and demand. It was the classic tug-of-war between uncontrolled freedom vs. the welfare of society as a whole.

By the end of the 19th century, each state had its own food and drug statutes, often in direct contradiction to its neighbors. The situation was, in short, a mess, compelling one jam maker to complain: “We have to manufacture differently for each state.” Farmers in agrarian states campaigned against the shady processors of adulterated fertilizers, de-

odorized rotten eggs, revived rancid butter, substitution of glucose for honey — practices which they said deceived the public and endangered health. A populist movement was on to set national standards. But Congress was unmoved. At this point, there were so many conflicting voices that the public-at-large was highly confused, but not particularly exercised.

It wasn't until one individual, Harvey W. Wiley, M.D., became the leader of the “pure food



Harvey W. Wiley, M.D.,
“pure food” crusader and first FDA Administrator

crusade” that Americans really got roused to the necessity of federal oversight. Wiley, a highly regarded chemist and physician, had been State Chemist of Indiana and professor at Purdue University. In 1883 he was appointed chief chemist of the Department of Agriculture and went to Washington, D.C. There he made the study of food and drug adulteration his bureau's principal business. At first, he was merely outraged with what he saw as basically harmless fraud. The more he delved, however, the more he began to discern genuine threats to health and felt impassioned to bring about regulatory action.

Dr. Wiley started touring the country making speeches, like a preacher, spreading the gospel of pure food and crusading for a national law. Fortunately, besides his excellent scientific credentials, he was a gifted writer, conversationalist and orator who was able to combine clarity and homespun wit with moral

passion. But this was tricky business, demanding patience and diplomacy to forge a bill that so many highly charged opposing self-interest groups could get behind. His skills made him the right man for the job, though he was certainly not without his fierce adversaries who did their best to portray him as a hysterical fanatic (not unlike what goes on today).

In the midst of this, Dr. Wiley and his research team continued their scientific studies investigating the health dangers of chemically preserved and processed foods. The findings were reported colorfully in the press as “Poison Squad” experiments and made an ever expanding audience aware of contamination and corruption that demanded regulation. Still, no bill was signed into law. Southern conservatives, for instance, challenged the constitutionality of such legislation saying, in the words of one Georgia congressman, “The Federal Gov-

ernment was not created for the purpose of cutting your toe nails or corns.”

Change occurred only after a series of events which threatened the economic well-being of the meat industry. These included calls to protect trade against exaggerated European charges that American pork had caused trichinosis, and again when, during the Spanish-American War, troops got sick and packers were accused of shipping “embalmed beef.” Then in 1906 the public was hit in their hearts, minds and stomachs with the publication of Upton Sinclair's novel, *The Jungle*. Sinclair described filthy conditions in Chicago's meat packing

plants, subsequently confirmed by government inquiry. When meat sales plummeted in half, President Theodore Roosevelt entered the fray, pushing for a meat inspection bill to protect the domestic market.

Dr. Wiley, buoyed by his increasingly vocifer-

ous coalition, entreated the President to go further for a broad food and drug bill — and Roosevelt listened. (Of course, there were no instant polls, but, one way or another, Roosevelt got the message that the public needed firm reassurance in the marketplace **and** in his leadership.) At last, in a whirlwind of compromise, the Federal Pure Food and Drugs Act became law in 1906!

The bill forbade interstate and foreign commerce in adulterated and misbranded food and drugs. Offending products could be seized and condemned; offending persons could be fined and jailed. Drugs had either to abide by standards of purity and quality clearly set forth or meet individual standards chosen by their manufacturers and stated on their labels. The law prohibited the substitution of ingredients to reduce quality, the addition of deleterious ingredients, etc. The law sought to protect the consumer from being deceived or

Today this U.S. tax-payer-supported agency is known not as the crusading consumer advocacy group of Dr. Wiley's day, but as just another branch of the Washington bureaucracy — a revolving door for industry operatives, influence policy and then return to lucrative private sector jobs.

harm, primarily according to the assumption that **the average person was wise enough to decide his own course if given accurate information provided on labels.** Advocates of pure food celebrated the law as a triumph for the people, while opposing business interests consoled themselves that the bill restored public confidence in industry without being too tough or readily enforceable.

Dr. Wiley knew that some fuzziness existed in the bill. But he was optimistic that Congress had made a good beginning and would back it up with enforcement and address some of the weaknesses. The bill gave Wiley's Bureau of Chemistry the task of spotting violations and preparing court cases, so he proceeded to build up the inspection capabilities of the agency, which evolved to become known as the Food and Drug Administration. Many important protections were established, but his tenure was fraught with controversy as competing interests questioned at every turn the letter of the law. The opposition grew proficient in the tactics of delay and misinformation. Perhaps out of frustration, Dr. Wiley resigned in 1912 and became head of *Good Housekeeping Magazine* laboratories where he established the Good Housekeeping Seal of Approval and continued to labor tirelessly on behalf of the health of the American public until his death in 1930.

Where is the FDA that Dr. Harvey Wiley so ardently fought for? Today, when the risks are far greater, that agency is nowhere to be found. Indeed, Dr. Wiley's concerns about food and drug contamination seem mild compared to the dangers wrought by the minefield of synthetic chemicals saturating our food and drug products today—celebrated by the all powerful multi-national pharmaceutical and chemical industries, while making human guinea pigs of us all.

Today this U.S. tax-payer-supported agency is known not as the crusading consumer advocacy group of Dr. Wiley's day, but as just another branch of the Washington bureaucracy — a revolving door for industry operatives to influence policy

and then return to lucrative private sector jobs. Today, though we, the tax-payers, pay the bills, more and more we see that industry calls the shots and the FDA kotows. For example:

- Most FDA approvals are based on industry-funded studies. Drugs are assumed “innocent until proven guilty,” too often after years in use and irreparable harm.

- Synthetic chemicals added to our foods are approved without consideration of cumulative or synergistic effects — again assumed safe until evidence of adverse health effects slowly emerge. And then, of course, actual removal occurs only after the exhaustion of well-honed stalling tactics calling for more studies and “expert” opinion.

- Ever attuned to the beat of the chemical industry and agri-business, the FDA pronounces genetically-altered foods basically no different than tradi-

tional edibles, despite the lack of long-term independent studies and increasing evidence of unexpected consequences. The FDA refuses to label them as such because of industry fears that “irrational” consumers might not buy them.

- Spurred on by the food and nuclear industries, the FDA gives the green light to the use of high-level radiation on more and more goods despite evidence of reduced nutrient value, creation of highly reactive chemicals, many implicated as carcinogens or carcinogenic under certain circumstances. The FDA is also considering sanitizing its already weak labelling requirements by replacing the word “irradiated” with “electronic pasteurization.”

- Etc., etc. (See Ruth Sackman's Notebook, p.8 in this issue.)

Is Dr. Wiley rolling about in his grave when he sees the direction this agency is taking? Would not the long-term interests of industry and the consumer best be served by a populace confident in our government's ability to insure a safe marketplace? Perhaps it's time we, the consumers, take up Dr. Wiley's fervor and return the FDA to its original role as guardian of the public health. ❀

FDA is also considering sanitizing it's already weak labelling requirements by replacing the word “irradiated” with “electronic pasteurization.”



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July 8, 2000

Ruth Sackman
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Dear Ruth;

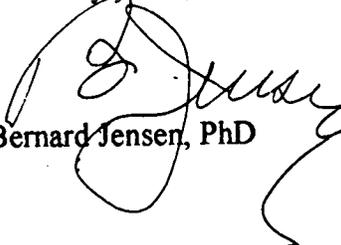
I think about you often here, and I just ran across the latest issue of the "Cancer Forum" magazine that just came out. It is nice to hear of you through this magazine. You certainly have been good to me over the period of years. I will never forget the lovely meetings and times we have had together.

I have been more or less locked into a bed situation because I am not able to use my lower extremities. Nevertheless I am thinking well and my mind seems to be going along, taking in the good things that can keep us well enough, and enjoying what life we have.

I might have an article or two that maybe you would like to have for the magazine, and if you possibly would just ask for the same, I would be glad to mail them on to you.

With all best wishes to one of my best friends, you, I remain,

Sincerely yours,



Bernard Jensen, PhD

BJ:JJ

IN MEMORIAM

The letter on the opposite page was the last one I received from Dr. Bernard Jensen. It was obvious that the car accident that occurred in Palm Springs that paralyzed him a few years back and which he was able to overcome through diligent effort was again taking its toll on his mobility.

I have lost a dear friend whom I loved and deeply admired and respected.. The world has lost a man of great compassion, a giant of the health movement who has left us a legacy of information through his books, lectures and articles which we will treasure and for which we will be forever grateful.

Many of the new breed of supporters have found it comfortable to join forces with the health movement and practice their craft because of the dedication and struggle endured by the original pioneers of the health movement — Dr. Jensen. was in the forefront of the fray. They had to fend off hostile know-nothing authorities who constantly harassed practitioners who were dedicated to a safe, advanced philosophy of healing. In spite of the trials and tribulations, he cared too much about the health of people to quit, but persisted because healing and educating were an innate part of his being.

Dr. Jensen's reputation as an expert in Iris Analysis was worldwide and without peer. The meticulous charts he created were used in clinics around the world. Germany, which always had a climate that embraced natural healing, boasts 1200 iridologists. When I visited some clinics in Germany, I found Dr. Jensen's iridology charts were standard equipment by doctors who used the technique.

Through his writings and lectures, we have been left an inheritance of his broad knowledge and experience that is immeasurable. Those who knew Dr. Jensen will be eternally appreciative of this precious legacy. Thank you, dear friend.

— Ruth Sackman

Selenium

Like almost any other nutritional element selenium can be both beneficial or harmful. Like all nutritional elements, we should get them from our food, if it is highly nutritious food and does not contain harmful elements.

The probable optimal intake of selenium is two to three hundred micrograms (not milligrams) daily. Among the foods that are high in natural selenium are seafoods of all kinds. This holds true for almost all the other trace minerals. There is probably every mineral on earth in solution in the ocean, and the animals that live there get those into their tissues.

W. D. Currier, M.D.

Antistroke Recipe: Onions and Garlic?

London: Onions and garlic, considered medicinal since ancient times, both contain a compound that inhibits platelet aggregation, U.S. bio-chemists reported at the International Congress on Thrombosis and Hemostasis here. Drs. Amar N. Makheja and Jack Y. Vanderhoek of George Washington University in Washington, D.C., found that purified extracts of the closely related vegetables stop platelets from aggregating in vitro by almost completely blocking their ability to synthesize thromboxane, which promotes clotting. Not quite as potent an anti-clotting agent as aspirin, the garlic and onion component gets into the bloodstream when the vegetables are eaten, says Dr. Vanderhoek. His group is still trying to determine the compound's structure.

ASK TUFTS' EXPERTS

QUESTION: In terms of potential health benefits, is it better to consume whole flaxseeds or flaxseed oil?

ANSWER: Flaxseeds are the better choice. Generally speaking, flaxseed oil, unlike plain flaxseed, does not contain lignans — plant estrogens that are believed to protect against breast, prostate, and other hormone-sensitive cancers. The oil also lacks soluble fiber, the kind associated with lower blood cholesterol. Moreover, flaxseed oil has poor stability, with an optimal shelf life — even in the refrigerator — of only six weeks. And it's not widely available, whereas flaxseeds can be found in an increasing number of supermarkets.

Note that in order for the health benefits of flaxseed to be obtainable, the seeds must be ground. Otherwise, they pass through the gastrointestinal tract whole, making the healthful substances inside them unavailable to the body. [Editor's note: Unlike the oil which must be refrigerated, unhulled flax seeds have a long shelf life.]

Ruth Sackman's Notebook

Are you under the illusion that a government agency is carefully monitoring your food and drugs to be sure that nothing harmful will enter the marketplace and endanger your health and life? If so, think again. The Food and Drug Administration (FDA), the agency authorized and funded by your tax dollars, is usually biased and tends to approve new drugs before true safety is determined. Their traditional alibi is lack of funds. Yet they often fund projects of minimal urgency.

I hope the information about the FDA in this article and elsewhere in this issue of *CANCER FORUM* will make you angry. I hope it will make you angry enough to visit or write or call your congressperson and insist that he/she do something about the agency's carelessness in protecting your health. Unless the agency serves the consumer as it was established to do by Dr. Harvey Wiley, it is a waste of the taxpayers' money. That is not the only negative aspect of the FDA not fulfilling its proper role — it lulls the public into a false sense of safety.

Hardly a week passes but we hear of another approved drug that turned out to be dangerous and had to be recalled. Or a research project that was approved only to be discontinued because the results were dangerous. Sometimes instead of recalling a drug with hazardous side effects, the FDA merely insists on adding a warning to the label. This system makes guinea pigs of the human population.

The FDA approves drugs known to be harmful based on a benefit/risk policy. Who has decided that policy is okay? As consumers, if we disagree and want to change that policy and change the direction of the FDA, it is imperative to let our elected representatives in Congress know of our dissatisfaction. Americans are fortunate to live in a democratic society but too few people exercise their prerogatives by contacting their representatives to seek relief of a troubling situation.

A recent government report claimed that 100,000 people die **each year** due to medical errors — more than were lost in the Vietnamese or Korean war.

Have many of them have been caused by approved drugs or the unexpected interaction of combining drugs?

Let's examine some of FDA's mistakes:

- Eli Lilly, a pharmaceutical company, received FDA approval to test an anti-hepatitis agent known by the unpronounceable name, fialuridine (FIAU). It caused the untimely death of one third of the participants and the need for liver transplants for two of them. Since hepatitis is not usually fatal, it is not difficult to assume that the people who agreed to participate in the study never thought they were in serious danger.

- Parlodel, a lactation suppressant, was approved by the FDA to dry up mother's milk after giving birth. With patience, this would have occurred naturally. The drug caused paralysis, heart attacks and strokes in otherwise healthy women. It was withdrawn only after the FDA was spurred into action by the law suits against Sandoz, the manufacturer. If the FDA was doing its job, why was Parlodel approved initially? Isn't it the job of the FDA to keep dangerous drugs **off** the market?

- What about Rezulin, a drug developed to control diabetes? Warner-Lambert was given approval to market it and so off it went to the patients. Doctors automatically assume that the FDA oversees drug safety — a yardstick the agency always claims has to be met and rightly so. A short time after Rezulin was released, it was obvious it was causing liver problems. Some patients died; others had to undergo liver transplants. Is that acceptable? Can they claim a valid reason for the error or is it inexcusable?

- In 1992 the *New York Times* reported a study of 275 women who used hair dye. They were selected because they had Hodgkins disease, multiple myeloma and leukemia. A comparison was made with 700 women free of disease. The study concluded that the risk of developing cancer in women using hair dyes was 50% to 70% greater than those who never used coloring.

At about the same time, the FDA was funding its own hair dye study. I am somewhat puzzled as to why this was important. Perhaps there is some logic here that I am missing.

In 1994 the FDA announced the results of its hair dye study and concluded "almost no connection

between hair dyes and cancer." **The key word in this announcement is "almost."** This is so typical. Very often research is funded by private organizations, without any vested interest in the product but, who are concerned about a health matter which the FDA has not addressed. The FDA then seems to feel an obligation to check the accuracy of the privately-funded study. As a matter of fact, although the FDA study showed there was a rise in cancer from hair dye, the FDA chose to minimize it.

Samuel Epstein, M.D., professor of medicine at the University of Illinois, in a letter to the *New York Times*, took the FDA to task for what he considered incompetent reporting because the study actually found a higher cancer risk in women who had used permanent hair dye, just as was concluded in the earlier study. Dr. Epstein wrote that the agency "trivialized" the cancer risk. "The striking discrepancy" he adds, "between the new findings and those of some six previous recent studies that provide strong evidence on the carcinogenicity of hair dyes is not surprising."

The agency likes to put a positive image on its work when it halts the use of a harmful drug. It tries to leave the impression that it is diligently pursuing safety in the interest of the consumer. My question is: Why was the drug given approval for use in the first place? It has been my impression and no doubt the impression of many that the FDA's role was to protect us from hazardous mistakes, especially those that cause fatalities. That translates to me that their role is to block approval of questionable drugs before they reach the human population.

Here is a small list of drugs that were pulled from the market between 1980 and 1997 and the reason why:

Selacryno	diuretic	liver toxicity
Oraflex	anti-inflammatory	liver toxicity
Suprol	anti-inflammatory	flank pain syndrome
Merital	antidepressant	anemia
Callan	diet aid	esophageal obstruction
Zomax	anti-inflammatory	anaphylaxis
L-tryptophan	sleep aid	myalgia

Enkaid	anti-arrhythmic	excessive mortality
Omniflox	antibiotic	anemia, or hepatic dysfunction
Manoplax	anti-arrhythmic	excessive mortality
Fenfluramine	obesity	heart valve problems

There are so many more examples of drugs—no point in adding all of them—that were either marketed or approved for research that involved people being exposed to hazardous conditions before they were removed from the market. The most recent warning from the FDA to manufacturers and consumers involved cold remedies that people use so indiscriminately.

The case against the FDA's behavior relative to Bovine Growth Hormone (BGH) is shameful. Not only was it approved in spite of public resistance but the agency refused to allow farmers, who disagreed with the agency, to put a label on their milk to alert the consumer that their milk was free of BGH. The FDA actually made it **illegal to inform the consumer** and hauled farmers into court who felt it was their right and obligation to notify consumers of growth-hormone-free milk.

Monsanto has been given approval to market genetically-engineered (GE) food. In spite of the concerns of consumers who are uneasy about the effect of such food on their health after long-term use, the FDA refuses to order label recognition to satisfy those who feel they should have the right to choose. Is that what they consider consumer protection? It is obvious that the agency's orientation is not really the consumer's best interest.

These practices should be unacceptable without any qualification. The benefit/risk policy should be scrutinized carefully to determine whether there is enough benefit to take the risk. We, the consumers, need to feel that we are protected from hidden risks that endanger our health and our life. That is why we need a government agency to serve the consumer just as Dr. Wiley fought for in 1906. We need protection from industry that sometimes gets carried away with its concentration on profits. A government agency doing its job competently would also be in the best interest of the pharmaceutical companies, saving them from expensive law suits. ❀

HEALING POWER OF VEGETABLES

(from *Herald of Health*)

Because vegetables are so rich in nutrients, they possess healing powers of which most people are unaware. Here are some of the most popular vegetables and their therapeutic possibilities.

ALFALFA: rich in minerals and alkali forming substances to help maintain a healthful acid/alkaline ratio in your system. Essential amino acids also aid in rebuilding body cells.

ARTICHOKE: prime mineral source with 15%

natural insulin that is hydrolyzed to levulose by acids to create a natural energy source that is beneficial to weak stomachs.

BEET: high mineral content aids blood-stream nourishment and activated lymphatic flow throughout the circulatory system.

BROCCOLI: high in vitamins and minerals to maintain water balance of your body.

CABBAGE: successfully used (through freshly squeezed raw juice) as a means of treating stomach ulcers.

CELERY: excellent vitamin source and aid in nervous disorders by helping to rid the body of carbon dioxide, a toxic waste basket

ASPARAGUS: abundant in vitamins and minerals, especially vitamin A which is needed for visual sharpness.

MUSHROOMS: good B-complex source as well as B-12, needed for blood enrichment.

MUSTARD GREENS: tangy taste high in capillary-building vitamin C.

OKRA: valuable because it has such a low carbohydrate content which is beneficial for those on reducing diets. Also rich in iron, and calcium and aids in conditions of colitis, intestinal disorders.

ONION: while not very popular because of the pungent odors, it is rich in minerals and vitamins and stimulates the gastric tract.

PEAS: all varieties of peas have much protein and minerals.

PEPPER: juice is rich in silicon to nourish your hair, skin and nails; good for those who are troubled by skin blemishes.

RADISHES: high in magnesium to soothe your nerves and stimulate a natural digestive flow. High sulphur content cleanses your bloodstream



and aids in its purification.

TOMATO: the best source available of B2 and C and vegetable amino acids to neutralize acid stomach.

ENDIVE: nature's own laxative, helps in conditions of indigestion and liver ailment with its rich vitamin A and C content.

KALE: a top-notch source of vitamin A and C needed for better vision, skin and hair health.

LETTUCE: rich in nerve strengthening minerals and aids in the conditions of excess stomach acidity and constipation and a good natural source of chlorophyll.

Recipes

Apple Pie Yogurt

1 cup whole plain yogurt
1 tablespoon maple syrup
1/4 teaspoon vanilla
1/8 teaspoon (a pinch) cinnamon
1/8 teaspoon freshly grated nutmeg
1/4 cup dried cranberries, soaked in water
4 large eating apples, sliced
1/4 cup raw walnut pieces

1. Put yogurt in a medium-sized bowl. Add maple syrup, vanilla, cinnamon, and nutmeg. Mix well.
2. Remove cranberries from soaking liquid and pat dry. Add apples and cranberries to yogurt mixture. Toss gently, but thoroughly. You want to coat the apples so they don't oxidize.
3. Garnish with walnut pieces. Serves 4 - 6



Hot Spiced Apples

4 large Granny Smith or other tart, firm apples, peeled, cored and cut into eighths
1/2 cup distilled water
1/4 teaspoon ground allspice
1/4 teaspoon ground ginger
1/4 teaspoon ground cloves
1/2 teaspoon cinnamon
1/2 teaspoon vanilla (opt.)
1/2-1 tablespoon honey or maple syrup, to taste

1. Place a large skillet over medium heat. Add 1/2 cup distilled water. Stir in apple pieces and let cook about 5 minutes, until they begin to soften.
2. Sprinkle apples with allspice, ginger, cloves, and cinnamon. Continue to cook until apples are just

tender, about 5 minutes more.

3. Add vanilla, if desired, and honey or maple syrup. Mix well and heat a minute or so to meld flavors. Serve hot with a dollop of whole plain yogurt or a little organic cream, if you like.

Mint/Carrot Salad

4 cups grated carrot
2 tablespoons lemon juice
1 teaspoons raw honey or to taste
1 teaspoons mint leaves (minced)
1/3 cup almonds, ground
1/3 cup fresh coconut, grated

Mix carrots with lemon juice and honey. Add coconut, almonds, and mint and mix thoroughly. Serves 4.

Cherry Tomatoes with Minted Pesto

1 1/2 cups fresh basil leaves
1/2 cup fresh mint leaves
2 - 3 medium garlic cloves
3 ounces raw pine nuts
1 1/2 tablespoons grated Parmigian cheese
(raw, unpasteurized

available in health food store)

1 teaspoon lemon juice
1/2 cup olive oil
18 - 20 cherry tomatoes

1. In a blender or food processor, chop basil and mint leaves with garlic. When herbs are coarsely chopped, add pine nuts, cheese, lemon juice and 1/2 cup olive oil. Blend until all ingredients are minced, but don't allow them to purée.
2. Pour into mixing bowl. Set aside.
3. Cut off tops of the cherry tomatoes and carefully remove seeds. Stuff with pesto. Arrange on a serving platter on a bed of lettuce. Save remaining pesto in refrigerator by putting in a jar with a few drops of olive oil on the top.

NEWS BRIEFS

DHEA AND ACNE

Here's a piece of information that might save readers some of the grief I've been through. DHEA is the hormone that kicks in at adolescence and is implicated in the onset of teenage acne. After months of dreadful, scarring acne, I happened on a newspaper article about acne that mentioned DHEA. I stopped taking it and my skin has finally cleared up, although it's still badly scarred. Not all people who take DHEA for its youth-promoting effects will have this reaction, but I think a warning is in order for those of us who are prone to adult acne.

—*Letter to the Editor, reprinted from Natural Health*

VITAMINS — USE AND MISUSE

Dr. Clarence A. Mills writes, "The symptoms of B1 toxicity resemble closely those of hyperthyroidism and at times become quite acute. Since thiamin has been held to be entirely nontoxic, and since it has attained such wide usage in both lay and medical hands, it seems that this overdosage toxicity should receive careful and immediate attention...Thiamin has other disturbing toxic effects. It can cause gall stones according to one report. It can cause fatty degeneration of the liver. Choline, ordinarily effective in preventing such changes, is ineffective in this case. In some test animals, Dr. Barnet Sure reports that only twice the daily requirement of thiamin for lactating mothers results in sterility."

DOCS 'IN THE KNOW'

Physicians are almost 50 percent less likely to go under the knife than any other single group, reports a study in the *British Medical Journal*. Their reluctance to surgery is based on their knowledge of the procedure itself, as well as its risks, benefits, and alternatives.

—*Natural Health*

Letters

Dear Mrs. Sackman:

Something caught my eye in the first part of "Dispatches from the War on Cancer" from page 87 of *Business Week* for May 28th. "In five or six years, patients may no longer be told they have something called lung or breast cancer, predicts Dr. Larry Norton of Memorial Sloan-Kettering Cancer Center, one of the world's leading researchers. Instead, a cancer will be defined by the cellular mechanism that causes it, and therapy will be tailored to that mechanism...What we are seeing today could be the beginning of the end of chemotherapy."

FACT has already been teaching us to avoid habits which allow our cellular mechanisms to cause cancer and to strengthen the natural processes which fight cancer. This article reminded me that there is hope that mainstream researchers may catch up with the wisdom and experience of FACT's Mrs. Sackman.

I thank Mrs. Sackman for many years of telephone advice when our family has dealt with cancer and for recently giving me the courage and information to raise my own bone density without medication.

I am enclosing a contribution to the work of FACT.

Yours truly, Patricia Winckler

Dispatches from the War on Cancer

*Cancer treatment is about to undergo a sea change, bringing new drugs that precisely target the causes of tumor growth. In five or six years, patients may no longer be told they have something called lung or breast cancer, predicts Dr. Larry Norton of Memorial Sloan-Kettering Cancer Center, one of the world's leading researchers. Instead, a cancer will be defined by the cellular mechanism that causes it, and therapy will be tailored to that mechanism — much the way an infection is treated. Drugs will home in on the agents of disease without harming healthy tissue. "What we are seeing today could be the beginning of the end of chemotherapy," Norton told *Business Week* at the annual meeting of the American Society of Clinical Oncology in San Francisco, May 12-15. Although many of the clinical trial results discussed at the meeting are still in very early phases, the excitement among the 25,000 attendees was palpable.*

—*Business Week* May 28, 2001

Dear Ruth,

Thanks you so much for the copy of *Cancer Forum*. It is a very helpful publication, offering a "touch of reality" in an area where there is so much misinformation and fear. I admire the dedication of you and your staff and support the valuable service you offer.

I want also to thank Consuelo Reyes for her insightful review of my book

[*The Gift of Wounding—Finding Hope and Heart in Challenging Circumstances* by Audre Auw, Ph.D.]. She captured so well the essence in her review and I am most grateful for the expression of her genuine appreciation of the thoughts I wanted to convey.

Again thanks to both of you, and a sincere wish and heartfelt prayer for the upcoming Yom Kippur.

Blessings,
Andre Auw

Dear Ruth,

Enclosed you will find a \$100 donation for FACT on behalf of all the invaluable work you do for people. Ruth, I would like to thank you personally for all the time and patience you've shown to me over the past 3 weeks. Your guidance and reassurance made me feel as though I could conquer anything. And I will.

Be well and take care of yourself so that you can continue to help people for many years to come! R.Z.

To FACT Ltd:

I received your *Cancer Forum* today. Someone must have given you my name. I thank God for that.

I have just written several places. The last one was the Center for Advancement in Cancer Education in Wynnwood, PA. The reason I'm writing is that I'm an inmate at an Ohio Correctional Facility. My health in the last year has failed terribly and I know why. All of our food is cooked to death except 3-4 times a week we get an apple or orange and 3-4 times a week we get a salad which consists of only head lettuce. Every other item fits the standard American diet.

I've been incarcerated 11 years. As of 10-12-00, I'm 44, and I'm starting to fall apart physically.

I know what I need to heal, but they won't allow it. I'm trying to locate as many health professionals and others as I can to testify before the State Prison Authority and/or a federal court.

As inmates we can't offer speakers fees. We only earn \$18 a month.

We don't want to sue in federal court unless we have to, but we need professionals to counter the lies the doctors here tell.

Example: I have acne rosacea, loss of hearing, loss of sight (left eye), dandruff, arthritis, bleeding gums, hemorrhoids, blood blisters on scrotum, and several other cardiovascular degeneration symptoms.

I know a live food diet, pycnogenol, kelp, and a good multivitamin will heal these things in 2-4 months. However, the prison doctors state nutrition has nothing to do with it and "We will not authorize vitamin anti-oxidants."

They won't give them; I can't buy them, and I can't leave for obvious reasons. These people need help so we can receive help.

Can you help us if we go to trial or schedule the state prison authorities to have a seminar or health meeting? I know you hear it a lot, but we do need your help.

Your friend in Jesus the Christ, R.W.

Dear Ruth,

Thank you for the FACT materials. I tried calling several times.

1) I just found out that the Thyroid Test you recommended was normal.

2) In glancing through your material, much of it I began learning over fifty years ago.

3) Ideally, I would like to get out of the city and live among nature and fresh growing vegetables, etc. It is difficult to always take the bus crosstown to stock up on organic foods.

Talk to you soon, R.W.

Dear Mrs. Sackman,

We are forever grateful for all your advice. It truly is amazing to see how, if given a chance, the body will heal itself in a way that no medication or pill can measure up. Through your guidance we have overcome eczema, children's earaches, and the list goes on. Our younger children were never started on any kind of antibiotic and therefore do not experience recurrent infections as is typical with many children today.

May Hashem give you strength to continue to inspire others as you have inspired us.

Fondly, L.G.

Dear Sir or Madame:

Enclosed please find a check in the amount of \$250.00, which is being donated to your organization on behalf of Steven-Elliot Altman, the creator and project coordinator of our upcoming anthology release, *The Touch* (formerly known as *The Deprivers*).

Any additional monies from the project will likewise be sent to you as they become available.

Sincerely, Steven Roman

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- (133) The Role of Drugs in AIDS

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

Jorge Estrella, M.D.

- (79) Improving Host Resistance With Cellular Therapy
- (164) Immune System, Cancer and Cell Therapy
- (174) Boosting the Body's Healing Ability

Charlotte Gerson, Director of Gerson Clinic

- (167) The Gerson Therapy

Jane Goldberg, Ph.D., Psychoanalyst

- (24) How Stress Alters Normal Body Function
- (62) Psychological Immune System
- (92) Using Your Emotions for Better or Worse
- (114) Who Lives and Why
- (143) Emotions - Friend or Foe?
- (185) How the Mind Affects the Body

Martin Goldman, M.D.

- (113) Integrative Approach for Strengthening Host Resistance
- (123) Oriental Medicine for Bio-Repair
- (168) Oriental Medicine—An Adjunct for Host Defense

Phillip Incao, M.D.

- (126) Role of Fever in Immune Response
- (131) Inflammation—The Natural Enemy of Cancer
- (148) How Weakening the Immune System Causes Cancer
- (162) Prevention of Cancer Starts in Childhood

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

- (2) Moving the Whole Body to Health
- (27) Tissue Cleansing Through Bowel Management
- (77) Helping Host Resistance Naturally
- (180) Nutritional Pathway to Health

Chaim Kass

- (186) Alzium Update

William 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/ CancerLink
- (117) Fluoridation /Cancer Link
- (163) Progesterone—A Natural Cancer Fighter
- (178) Xenobiotics—Endocrine Disturbance

Duncan McCollester, M.D.

- (169) Autologous Immune Therapy for a Variety of Cancers—Developmental Studies

Shary Oden

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

William H. Philpott, M.D.

- (176) Role of Magnetics in Cancer

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

- (60) Deciphering the Proliferation of Cancer Therapies

- (88) Making Sense Out of the Confusion Surrounding Cancer Information

- (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

- (172) FACT—An Optimum Resource for Cancer Patients

- (175) Caveats on Alternative Health

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)

- (41) Richard Mott (Lung)

- (43) Kay Windes (Breast)

- (58) Walter Carter (Pancreatic)

- (98) June McKie (Lymphosarcoma)

- (99) Bernard Nevens (Colon)

- (108) Kay Windes (Breast)

- (112) Louise Greenfield (Breast)

- (119) Bernard Nevins (Colon)

- (125) Louise Greenfield (Breast)

- (132) Pat Judson (Colon)

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

- (146) Tom Buby (Lymphoma)

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

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

- (158) Moshe Myerowitz (Liver)

- (159) Doris Sokosh (Breast)

- (165) Greg Hagerty (Hodgkins)

- (170) Lou Dina (Lymphoma)

- (179) Greg Hagerty (Hodgkins)

Panels of Recovered Cancer Patients

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

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

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

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

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

- (189) Doris Sokosh (Breast), Lou Dina (Lymphoma) and Daniel Friedkin (Testicular)

- (190) qGreg Hagerty (Hodgkins), Barbara McClary (Ovarian) and Michal Ginash (Breast)

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