

CANCER FORUM

PUBLICATION OF THE FOUNDATION FOR ALTERNATIVE CANCER THERAPIES, LTD.

"COULD YOU HURRY AND FIND A CURE FOR CANCER?
THAT WOULD BE SO MUCH EASIER THAN PREVENTION"



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foundation for
Alternative
Cancer Therapies Ltd.

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FACT

Foundation for Alternative Cancer Therapies

Foundation for Alternative Cancer Therapies, 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 Friends,

Since there are so many well-meaning people with limited knowledge trying to help the cancer victim, it is unwise accepting this inexperienced help without verifying it carefully.

The Foundation for Alternative Cancer Therapies is here to help cancer victims seeking information about non-toxic cancer therapies. It is your best resource for information. As an established organization we have access to doctors, treatments, clinics and the feedback from cancer patients—all in the interest of the cancer victim.

Our number is 212-741-2790. Don't hesitate using it.

Ruth Sackman

IN MEMORIAM

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Pat Judson Battles for Alternatives

Talk given by Pat Judson, President of the Metro-Detroit Chapter of the Foundation for Alternative Cancer Therapies, Ltd. before the House Policy Committee of the Detroit State Legislature on May 19, 1977. Her moving personal testimony, along with other patients from the Detroit chapter, has prompted Rep. Kelsey and other members of the House to introduce a resolution to create a special committee to investigate chemotherapy and alternative treatments. Because the complete information came too late to include in this journal, a fuller account will appear in the next issue.

My name is Pat Judson and I reside with my husband, Robert, and two daughters at 23427 Cherry Hill Road, in Dearborn. I am here today to speak on behalf of House Concurrent Resolution No. 212, calling upon Congress to propose an amendment to the Constitution protecting our right to choose medical treatment or therapy without governmental interference.

I speak as an individual, a cancer patient who seven years ago was sent home to die by a doctor who told me there was nothing more traditional medicine could do for me. I was operated on for cancer of the colon, after having doctored for several years what I was told was colitis. When the pains became more frequent I was told it was in my head and I only wanted to spend my husband's money. One of the doctors that performed my surgery told me that I had the fastest growing type known to man and cobalt or chemotherapy would not help me. Expressing surprise that I even survived the surgery, he told me I had six months to a year to live. However, I was given diethylstilbestrol for hormone balance since they had also removed my ovaries. I have wondered many times why a medical doctor would prescribe a cancer producing drug to a cancer patient.

Despite that prediction, by the grace of God, I lived past the time the doctors had given me. In January, 1972, almost two years after the original surgery, I experienced a recurrence of a blockage of the colon. I knew for a certainty that if I went back to my doctors who had done surgery on me that I would be immediately hospitalized. I looked for an understanding doctor. After he did what he could, he told me that I would have to return to my doctors for surgery; that I could not live three weeks like I was since my cancer had metastasized



Mr. & Mrs. Robert Judson

to the lymph glands. When I asked him how long he thought I could live with surgery he expressed doubt and said "possibly three months." After considerable thought, prayer and discussion with my family, I decided I could not endure another surgical ordeal. Surgery, for me, was no picnic. I chose instead to accept death, and trusted without question the judgment of the doctors who said nothing could be done to help me.

As you can see, I did not die. As I can attest, death is not the inevitable fate of the cancer victim. I learned of the work of a dentist in the state of Texas who was restoring cancer patients to health by nutritional therapy that he developed in the course of curing his own cancer. His name is Dr. William D. Kelley, and he is now located in the state of Washington.

I went to Dr. Kelley in January of 1972. I spent one day in his office for tests and diagnosis of my condition. Dr. Kelley determined from a blood sample, on which he then did a computer analysis, that I had a cancer index of 600, a critically high level. On the basis of that analysis, he devised a regimen of diet, rest, exercise, and detoxification.

He did not promise me that I would be cured of my cancer, he merely told me to follow the regimen he had prescribed for me, and come back in six months.

After five months of a very rigorous program, which required a complete change in life style for me and my family—I returned to Dr. Kelley for a check-up. I had been accustomed to a daily routine of coffee enemas, prescribed to detoxify the liver, warm showers, sitz baths, sweat baths, long walks, a diet of raw grains, nuts, fresh fruits, raw vegetables, and vitamin supplements. I was told I could have no meat, no animal protein, no cheese, milk, eggs, coffee, tea, alcoholic beverages, or soft drinks. Also I was told to leave sugar and white flour alone. My cancer index had dropped from 600 to 300. Not only did it appear that my cancer was under control, but I can truthfully say that I felt better than I had ever felt in my life, even before the onset of my illness.

I might add that at this visit to Dr. Kelley we were all checked. We had a daughter at the age of ten that was unable to read or write. We were amazed at her progress with her studies as were her teachers and we have a hard time keeping books from her, now. My husband and I experienced many agonizing hours with doctors and school personnel before our discovery about nutrition, and we wonder why doctors are so opposed to it.

Now, seven years and two months after I was told there was nothing that could be done for me, except to relieve my pain, I am in excellent health.

Such a poor rate of recovery might be expected to induce in the medical establishment a degree of humility.

I carry a heavy schedule as President of the Metro-Detroit chapter of the Foundation for Alternative Cancer Therapies, acronym FACT, an organization formed and dedicated to gather and disseminate information about alternative forms of cancer therapy, and to make that information available to people, who, like myself seven years ago, thought there was no hope for me and no place to turn.

Members of the committee, if I had accepted the advice of my doctor, if I had not been directed to Dr. Kelley, I would be another cancer statistic. Cancer is epidemic in this nation, and indeed in the Western industrialized nations. Despite the

billions of dollars that have been spent on basic cancer research, we are no closer to curing or controlling cancer than we were at the beginning. According to American Cancer Society figures, a cancer victim once diagnosed, even with the orthodox treatment of surgery, chemotherapy and cobalt, has no more than an 8% chance of surviving five years, with research showing colon cancer with a 2% chance.

Such a poor rate of recovery from this disease might be expected to induce in the medical establishment a degree of humility, of openness to alternative therapies, a willingness to admit that it does not have the answer to cancer.

Openness, humility, willingness to admit its helplessness before this dread disease, are not the attitudes we find in cancer specialists, in cancer research institutes, in the traditional medical establishment. We find, instead, that therapists like Dr. Kelley are hounded, investigated, and persecuted by Federal, state and local agencies. Dr. Kelley has been harassed by agents from the IRS, FDA, HEW, CIA, CDC, Texas medical and dental boards, controllers, U.S. Postal authorities, U.S. Chamber of Commerce, Consumer Protection Agency, along with the local and county harassment by police, regarding permits, etc. He has been denied the right to see patients and hauled off to court on numerous occasions—to help keep him broke and possibly to force him to give up. Some researchers have advanced a theory that stress may play a large part in the development of cancer. Can you imagine the stress I was subjected to knowing the harassment Dr. Kelley was going through and not knowing if he would be able to see me at my appointment time?

Dr. Kelley has had his license to practice dentistry revoked because he wrote the book, "One Answer To Cancer" which has helped save many cancer patients: Jean Diles with bone cancer, Theresa Lukas with breast cancer, Foster Winter with pancreatic cancer and many others. (I have enclosed a copy of Dr. Kelley's book for each of you just in case some day you or someone dear to you needs it.) Dr. Kelley was told by the Texas State Board of Dental Examiners that if he would stop distributing his book to cancer patients they would drop all charges. All this when Dr. Kelley insists he will not see you without a letter from a medical doctor or osteopathic physician requesting a nutritional work-up. After the state of Texas removed his licence to practice dentistry, he moved his clinic to Winthrop, Washington where he is helping thousands of cancer patients every year to

bring their disease under control, even though he is still being harrassed. I know; I've been there.

I am appalled that this can happen in a so-called free society. I am shocked at the power the medical profession and the "cancer research interests" have to block experimentation of which they do not approve. I am angry that Blue Cross will pay for cancer surgery, for chemotherapy, for cobalt (and it is not unusual for treatment for a terminal cancer patient, where there is no hope for recovery, to cost upwards of \$30,000) but Blue Cross,

Now, seven years after I was told there was nothing that could be done except to relieve my pain, I am in excellent health.

controlled by traditional medical therapists, refuses to pay for unorthodox treatments. Would they rather see us die? My first visit to Dr. Kelley cost \$75; for four subsequent visits I have paid an average of \$150 per visit. The cost of vitamin supplements along was at the beginning of my therapy, \$450 a month (not paid to Dr. Kelley). This cost has been borne by my husband entirely even though this therapy was my choice, and it has saved my life. The group insurance plan of which my husband is a member at his place of employment has been of little help to me in paying the cost of this therapy.

However, Dr. Kelley is not the only therapist who is helping cancer patients. Dr. Contreras has a clinic in Mexico, Dr. Ransberger in Jamaica, Dr. Nieper in Germany, Dr. Navarro in the Philippines, Dr. Aly in Sweden, the Hoxsey therapy in Mexico, the Koch therapy in Germany (Dr. Koch was a Detroit physician who escaped to South America under pressure because he helped cancer patients. Senator Dirksen had been one of his patients.), along with others. Many of our citizens are forced to accept therapy in a foreign country because they have a desire to live. These doctors are controlling cancer by means of detoxification of the vital organs and a regime of pure, uncooked and unprocessed food.

I believe the results obtained so far by these therapists, many of whom work in a far more tolerant climate than is allowed here by the medical establishment, warrant serious consideration and further research. I think you, as legislators, as those responsible for the laws which make it possible for orthodox medicine to dictate to unknow-

ing and frightened individuals, must rewrite those laws so that we will have restored to us the freedom to choose our therapy.

Let me in closing tell you briefly about the organization of which I am president, the Foundation for Alternative Cancer Therapies. It was founded two years ago in New York City and has chapters forming monthly. We do not promote any particular therapy; we provide information free of charge or at nominal cost. I receive no salary or expenses, and spend most of my waking hours on the telephone. The work is arduous, and sometimes thankless. But my life today is a gift from God. I will share everything I know with everyone I know for as long as I live. I direct others to alternative forms of therapy out of gratitude for the direction I received when I could not see my way.

The satisfaction I have received from guiding others to sources of help is payment enough. My only regret is that we are not contacted in most instances until someone receives the terminal verdict and then I wonder how we manage to save the ones that we do.

We have many patients on laetrile doing just great. We have a Bob Prohaska numbering among them and I have enclosed a copy of his letter to the FDA which is pretty much self-explanatory. Mr. William McHugh, of Taylor, was given only weeks to live with prostate cancer and showing no signs of it after eight months; and we are all watching closely Venus Thomas who is using laetrile and responding well after a mastectomy, two tumors on the chest wall, a tumor on the intestine, neck and brain. She lost the ability to speak and is now able to speak well and is doing her own housework, takes care of her children and her husband, says she has a dinner fit for a king when he arrives home at night. We were happy and surprised to see her in Lansing last week and climbing all the steps instead of taking the elevator.

I hope the day will come when FACT can be disbanded, and I can disconnect my telephone and lead a normal life. In this the age of the consumer, I wonder why the cancer specialist who tells a patient there is no hope, the only treatment he can offer is mutilating surgery, painful radiation which burns and scars, chemotherapy which induces hours-long bouts of nausea, loss of hair and destroys the body's own immunological defenses. I wonder why the doctor is not required to also inform that patient about alternative therapies, the way a police officer must inform an accused criminal of his rights. I wonder why the patient doesn't have the right to know that other forms of therapy

are available, that other forms of therapy have saved lives, as they saved mine.

We do have the right to other forms of cancer therapy *IF* we happen to be lucky enough and rich enough to hear of a Dr. Kelley, a Dr. Contreras, a Dr. Aly, a Dr. Ransberger, or a Dr. Nieper. For many who are uninformed, who are poor, that right does not exist.

Members of the committee, I seem to remember that President Truman said once that Congress represented about 16 million out of our population of 200 million—and that he, the president, represented the rest.

You, the legislature, are our only hope. You here in Michigan, you here in Congress, are the only ones who can guarantee to us our right of choice in medical treatment or therapy. Thank you.

A Personal Testimony

Irene King, R.N.

Members of this Assembly, I'm delighted to share with you today my story—If I appear emotional—I know you'll understand when this speech is concluded. But if it helps one person—it will be worth my anxiety.

Cancer Can Be Cured! How in the name of heaven can it be done? No one has been able to break the barriers. But it can be done—It will be done!

HOW? By us—the little people—yes—the same so-called little people who finally after thousands of lives were lost on both sides unjustly—bitter feelings internationally, we single-handedly stopped the Vietnam War!

We did it as peacefully as possible by our protests, demonstrations, outrage and pressure on our leaders. We wanted peace for ourselves and all others and we achieved it!

Once we unite for something we know is right—Americans, by our heritage, have always been capable of achieving great strides and goals—and we always will!

We, the people again in 1974 for the first time in U.S. history *forced* the Congress, Senate, State Legislators to end once and for all—the lying, cheating, hypocrisy and fraud by our Government Leaders. It was done again peacefully, but forcefully. It was done by telephone, telegrams, mailgrams, and yes even threats—not on lives—but on jobs for people who wanted to represent us. These

same beings who wanted us to swallow untruths BUT!—alas they had to listen to their constituents. We wanted something that was promised to us years ago—TRUTH and JUSTICE. We *had HAD* it and within two weeks we saw a transformation that will never be forgotten ever—by anyone!

What is it then do we ask ourselves today? How in the name of Heaven has all of this to do with cancer and it's ultimate and complete cure—the answer is simple. We've tolerated it! *We haven't had enough? or have we?*

Many of us hear or know of someone who has cancer and hope to God it doesn't happen to us or our loved ones—but there are few families today who haven't been touched by it to some degree.

Two years ago I could never have spoken to you this way. I couldn't have even addressed a kindergarten class—let alone a large assembly such as this. But something happened two years ago—I had a great life—a fantastic husband—eight lovely, healthy children—a beautiful home. I can't remember being as happy as I was at that time. So what can I say to you or anyone today—that might help you. Hopefully *ONLY* to tell you my own personal story.

On October 5, 1974 my great husband died of cancer. How? Why? He came home from work as usual at 6:00 P.M. feeling hot—"Too hot" (his words)—and his throat was aching and sore. It was St. Patrick's Day and he was upset—because Joe King always thought that that day was his day to really celebrate everything good that had happened or was about to happen and he felt badly that he had to take two aspirins, some Vicks Cough Syrup and go to bed—instead of his green beer and gathering with his friends at the Irish Pub.

While he rested I called our doctor who was *not on call* that evening and the doctor who was did not diagnose or prescribe over the phone—especially to someone he didn't know or had never seen. He told me to take my husband to the lab the next day for blood tests and a chest x-ray. March of '74 was atrocious for pneumonia, flu and all sorts of nasty viruses, and so we did all that was advised. This is *preventative medicine!* Two days later the same doctor called me. Mrs. King, I don't know how to tell you this (many of you have heard these very same words, again and again). "There is something suspicious on your husband's right lung and he must be hospitalized immediately for a Broncoscopy and a biopsy to see if surgery is indicated." He went on, of course, to say it could also

be a shadow indicating pneumonia or a lung infection—trying so hard to reassure me. However, neither my husband nor I were too worried. We didn't even tell the children it could be anything too serious. Daddy was going to the hospital for a few days for tests—x-rays, a check up and rest. Besides, how could it be serious? He was too healthy—a strapping 185 lbs., six foot fine man. He lived too intelligently—no overating—drinking or smoking. We actually joked about it. He would rest a few days and then we would go to Florida the first of April as we had planned. Needless to say, we didn't go to Florida in April or ever again.

The first week in April his right upper lobe of his lung was removed. The doctor was elated in the preliminary testing. The Broncoscopic examination showed a small quarter sized tumor which was in *his* opinion contained. It would be removed and Joe would be home in ten days to two weeks. We thanked GOD—we were so grateful—so fortunate and so much in love.

The day of surgery came. I arrived at the hospital accompanied by my sister. I ran to his room. He kissed and hugged us. He was silly from the medication that was given prior to our arrival. He'd see us in a couple of hours. He smiled and waved to everyone as he was wheeled to the operating room.

Five hours later, after pacing the floor, drinking too much coffee, chatting about nonsense with my sister, it dawned on me! Dear GOD—NO—Not us—we don't deserve it! Being a registered nurse myself and my sister one also, we knew when there is good news in surgery they can't wait to tell you—when it's bad—they prolong it as long as possible.

My sister tried to reassure me—maybe they didn't get started on time—maybe the anesthesiologist had some difficulty—but her arguments were useless. They couldn't convince me—no way.

When I saw the surgeon summon us in the lounge I knew—I'll never forget his face—those sad, sad, eyes. His voice gropping for the right words. The cancer was *NOT CONTAINED*—it had escaped into the lymphatic system which meant within six months to a year it could enter any main organ and strike, again. Maybe with cobalt and chemotherapy he could live maybe even two years—TWO YEARS—I couldn't believe it! Our little son was only three and one half. He couldn't leave us—he wouldn't. My own reaction was unreal—I was quiet—numb—shocked—How would I tell him—the children—our families? Fortunately, I found this task quite comfortable and easy. I'd do it the same way the doctor did—an-

swer questions simply—give as little information as possible—don't volunteer anything else—And it worked—it still does for a lot of people. I played a role as many of you do. In fact, it worked so well—the Academy Award should have been granted to me that year. But now back to my husband. After 50 cobalt treatments—much despair, nausea—vomiting—A 60 pound weight loss—he started the road back to recovery. He gained back all his weight and most of his strength. He ate everything and anything. But most of all he took time to love me more—much more—and the children were delighted to have Dad home *all* the time—he took long walks and rides with them, discussed important issues with the older ones—and seemed to thrive on his new life. He knew he had received a miracle. He would go back each month for a check-up and come out smiling. We did it—We did it! I'm all right—I'm well forever! Forever lasted six months exactly. He lost control of his left side—my first reaction “My God he's had a stroke.” Wrong again. Brain cancer—only a little though—the size of a pin-head. The surgeons could operate and in two weeks he'd be home and well.

This *time* I spoke loudly—I prodded and insisted that he at least have a tumor specialist called in. Her consultation with us was honest and open. In her opinion if the cancer was in two places it most probably was in four—No surgery—he'd live longer with drugs and therapy.

But the surgeons weren't discouraged. They as-

“There is something suspicious on your husband's right lung and he must be hospitalized immediately.”

sured my husband with his fantastic ability to recuperate—he'd beat it—this time as before.

I begged him not have the surgery. Go to a larger hospital and acquire more opinions. No, No, No—get it over with so he could come home and hopefully go back to work and lead a normal family life, again.—So, it was done! Six weeks of intensive care and two weeks of general care I brought home a body that I would nurse and care for. He would no longer be my friend, lover, husband, or father to our children, but a vegetable who didn't even know our names. God knows how we all survived—I don't. Six weeks later he was rushed back to the hospital with grand mal epi-

leptic seizures—then three months of a coma—and finally Death. Thank God—Thank God—End of suffering for all of us.

Will I ever be the same? I hope not! No longer will a doctor tell me what he will do—what I will do—what to say—what not to say—Oh No—I did all the right nice things and asked the minimum of questions and believe me that's just what they want. Don't make waves—I believed them—I trusted them—I responded just as they'd hoped I would. "I did nothing;" I didn't call a cancer center—I didn't ask anyone if there was any other treatments available—why should I? They don't hold back anything—They're going to tell you everything—If you believe this—run to the nearest exit!—because what I'm going to share with you now is so unreal—even as I think about it—I'm amazed—I'm able to talk—stand—think—keep house—take care of the children—cook—shop—do volunteer work—go wherever I can to help those in need—WHY?

Because my twenty year old daughter was diagnosed before my husband had been dead a year as having "malignant lymphoma"—stopping this disease is like trying to stop the wind. It can't be done except by Divine Intervention—which I would never rule out—in our case—or in any of yours. You may ask me why I haven't taken her to

My twenty year old daughter was diagnosed before my husband had been dead a year as having "malignant lymphoma."

all the clinics and large cancer centers or for non-toxic therapy—I can't—She's married and I can't control her life or her marriage, and she too believes her doctor. If he told her to stand on her head, which is completely void of any hair—she'd do it.

This blind faith—What is it? Do our doctors represent GOD to us. Do they have all the answers? If they do—how come so many people I know, either friends, family, patients I've cared for die? WHY?

I've lost count of how much surgery, laser beam, cobalt and chemotherapy treatments that have been used on my daughter. She's been on just about every drug that's ever been injected into a human or maybe animal—She's not getting better—She receives her *so-called* treatments every three weeks. Four caustic drugs are given to her intra-

venously and within an hour—she's so violently ill, nauseated and weak that her bed and the darkness and her own personal thoughts—are her only comfort. Her body is so thin and her beautiful face is so round and firm due to the large amount of cortisone she receives and yet she continues this process. She keeps going back for more and more thinking too that she will receive a miracle and be completely healed and even though she—her husband and I ask "Isn't there anything else that can be done—can't we have another opinion—go somewhere else where she won't be so sick"—the answer is always the same—"We're doing everything humanly possible." HUMAN—GOD deliver us all from such a destiny!

This talk about my personal contact with cancer is to provoke you—to sicken you—to shock you—as it has me—WE MUST—WE WILL conquer this dreaded disease! Will you join along with me and explore non-toxic therapies?

Will you write to your Congressman, District and State Representatives and yes—even the President and Vice-President, of this United States and DEMAND a cure. We're only a small body here—but if each of us wrote three letters—TELLING—not asking that your tax dollars be used to end this epidemic this year, I can assure you you'll live to see it done! After all, it only took the President a few weeks to appropriate billions of dollars for Swine Flu Vaccine. Is CANCER Less Dangerous?—In my opinion somehow—some way we all allow ourselves to be manipulated—we don't like it—but we don't take action.

PLEASE for your sake—take ACTION! It may be too late for my family but it may come just in time for yours. Chemotherapy, cobalt, radical surgery, will not eliminate cancer if the disease is not contained—It can't be—because too many—much too many die—I don't have the statistics and I doubt that anyone does—The only positive thing I can tell you is that non-toxic drugs have never killed anyone—EVER!

Many of you who have received Laetrile or other forms of non-toxic therapy are here today. SHARE your GOOD NEWS with those who have never heard of these therapies or find it hard to believe that there are alternatives to so-called standard procedures.

You owe it to all of us that you are living testimony to the miracle of life that so many of us have been waiting for. We can't afford to wait any longer. Please, for all our sakes—DO something—ANYTHING—but do it NOW.

Thank you.

The Liver and Cancer

Kasper Blond, M.D., F.I.C.S.

"I've tried several biochemical treatments and biological methods including Enderlein's method and the proteolytic method of Gaschler. In not one of these cases have I observed the disappearance of a palpable tumor. There is not the slightest doubt that their methods prolong the life of cancer patients and prevent suffering. Patients of such treatments limited to correct nutrition, live longer than those receiving routine surgery and or x-ray treatments.

"If the liver of a cancer patient is only partly functioning, biochemical treatments can prolong life, even if metastases are present. Even a damaged liver regenerates in the presence of proper nutrition. Proof of this statement comes from spontaneous cures of cancer patients with generalized cancer.

"Certain liver function tests are a more reliable indication of precancerous and cancerous condition than biopsies. These tests indicating a disordered function of the liver are not specific for cancer and are present in all chronic nutritional disorders as well. . . An increase of the fasting blood sugar over 90 mg.% is always a sign of a precancerous disorder. The number of tests indicating that cancer is a general disease is constantly increasing and no scientist today can seriously consider cancer as a local disease.

"The estimations of calcium, phosphorus, potassium and magnesium according to Keupold (1945), are valuable indicators of cancer. The normal value of cholesterol is between 120 and 140 mg. Any permanent increase in these values is suspect. The presence of the proteus bacillus in the stool is, according to Baumgartl (1954) a valuable indicator of cancer disease. In the course of biochemical treatment of cancer, absence of the proteus indicates improvement. If a patient has less than 10 mg.% of vitamin C in his blood, one is justified in suspecting cancer. Supporters of the early diagnosis of cancer do not realize that the appearance of a local tumor occurs at a very late phase in the course of the cancer disease.

"Anyone who has studied the results of correct feeding of the cancer patient must be impressed by the number of chemical blood-changes in the course of the disease. The adherents of orthodox teachings consider a special cancer diet to be absurd, but if cancer is taken to be the late effect of

wrong nutrition, dieting becomes of the greatest importance.

"The diet of a cancer patient should only contain 1 gramme protein per kilogram of body weight. No animal muscles or organ proteins should be taken, especially in advanced stages of cancer. The best source of protein is sour milk—the milk protein should be sour since the production of hydrochloric acid of cancer patients is in disorder. Thus cottage cheese and yoghurt are preferable. . . Fattened cattle, pork, duck, goose, eel, and carp are forbidden. Margarine too, insufficient amount of unsaturated fatty acids. . . it disturbs biooxidation. Zabel recommends linseed, sunflower and other plant oils.

"The problem of cancer must be considered an insoluble medical problem, because it is essentially a nutritional and social problem; in other words a problem of prevention. Such a problem cannot be solved by animal experiments, vaccines and drugs. Prevention would be possible if the millions now spent on animal experiments on drugs, operations, and x-ray treatments in the hospitals, could be used for the control of food production, preservation and distribution. Finally, statisticians, pathologists, biochemists and doctors CANNOT solve social problems.

"I believe the temporary beneficial results from x-ray treatments, from sera and vaccines, from cytostatic and proteolytic ferments are due to the destruction of foreign globulins circulating in the blood serum of cancer patients. It is possible to keep cancer patients alive for a longer period by setting free proteolytic ferments than by mutilating operations. Irradiation destroys billions of white cells, setting free proteolytic ferments which dissolve the tumor. The generally accepted period of five years after operation, considered as proof of a cancer cure, could be easily prolonged by a more intensive propaganda for earlier diagnosis and operation, since a great number of these patients are in a pre-cancerous phase and would never enter the phase of a real cancer.

"Such methods as the one developed by Papan-

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icolaou for early diagnosis have no purpose or value other than to mislead statisticians, surgeons and x-ray experts about the disastrous results of the routine methods.

“The majority of cancer patients treated with biochemical methods die suddenly, not as a result of toxins produced by cancer cells, as is generally believed and accepted, but from cardiovascular failure at the moment when the damaged liver ceases to supply adequate fuel to the heart muscle.

“In the present state of our knowledge no reliable method of curing a damaged liver or its effects is known, because we have no means of restoring the function of a severely damaged liver.”

A Case in Court

PEOPLE v. LEE WAIL (NO. 20.217) (Supreme Court of California. September 24, 1886)

The following was sent to us by one of our dedicated readers. It is important to note the dates of 1876 and 1878 and realize that nearly 100 years ago the attitude was not much different than it is today.

PHYSICIAN AND SURGERY—RENDERING MEDICAL SERVICE WITHOUT LICENSE—“Emergency”—Misdemeanor—California Acts of April 3, 1876 and April 1, 1878.

Where one without a certificate renders gratuitous medical services to a person whose case has been given up by regular practitioners, this is not such an emergency as will relieve him from liability under acts of legislature of California of April 3, 1876, and April 1, 1878, making the practice of medicine without a license, except gratuitously and in case of emergency, a misdemeanor.

Department I.

The Attorney General, for the People. Wm. L. Gill, for appellant, Lee Wah.

MYRICK, J. The defendant was accused of a misdemeanor in that he did willfully and unlawfully engage in the practice of medicine without having procured a certificate, as provided by the act of April 3, 1876, (St. 1875-76. p.792) and the act of April 1, 1878 (St. 1877-78, p.918).

The uncontradicted facts are that the defendant had a place of business in San Jose, at which he kept herbs. Two women (called as witnesses for the prosecution) went to his place of business, stated to him their ailments, and asked if he could

give them herbs to effect a cure. He said he could. He prepared herbs of his own selection, and delivered them to the women, who took the herbs to their homes, and made and drank teas. They paid him at times \$10 per week; at other times \$6 per week. The payments were made regularly, without reference to the kind or amount of herbs, and continued several weeks—in one case 10 weeks. The women testified that they did not pay him for medical services, but for the herbs only. The jury must have been of the opinion that both the herbs and services were paid for.

At the request of the defendant the court instructed the jury that if they believed the services testified for were rendered gratuitously, and were rendered in each particular instance in case of emergency, a verdict of not guilty should be rendered. The court then proceeded to define “an emergency,” within the meaning of the statute (which declares that nothing therein contained should be construed to prohibit gratuitous services in cases of emergency), as follows: “The question is, what is an emergency? Two ladies have testified before you, and stated that their condition was deplorable; that they consulted in vain other physicians; and that they regarded themselves, and were regarded by their friends and physicians, as incurable, and that they referred to this defendant as a last resort. The ladies stated upon their part it was an emergency—an exigency in which death, on the one hand, and submitting themselves to that treatment, on the other, were the only alternatives. I instruct you that the emergency contemplated by the statute is not such as this case suggests. It means a case in which the ordinary medical practitioners of the schools provided for by the statute, who are provided with the proper diplomas, and have submitted themselves to the proper examination, are not readily obtainable. This is an emergency as where the exigency is of so pressing a character that some kind of action must be taken before such parties can be found or procured. The jurors will readily understand that if a person has received an injury in a remote, isolated part of the country, in which some person not a regular practitioner should be called upon to render immediate assistance, and should render it, as in the case of a severe injury, a case of obstetrics, or the like, such instance would be an emergency which would justify a party in rendering assistance, and that humanity and decency would require he should not be liable in a criminal prosecution for so doing. So, some person might get hurt, or faint, or fall in a fit in the street, and a person might render him assist-

ance, and thus relieve him from pressing danger. We all understand that is an emergency. In that case no party should decline to render assistance, or be criminally prosecuted for so doing. If, however, a party is satisfied that another school of physicians or another individual, can render him more efficient and—more beneficial services than others—and he therefore seeks his aid, that is not such an emergency as the statute contemplates.”

The appellant urges that these instructions are contradictory. The court left with the jury the question as to whether medical services were rendered gratuitously or for pay; and, in effect, told them if services were rendered gratuitously, and in emergency, they should acquit, but that the circumstances detailed in the testimony did not constitute “emergency” within the meaning of the statute. We see no contradiction.

The evidence was sufficient to justify the verdict. The disposes of all the points made by appellant.

Judgment and order affirmed.

We concur: Ross, J.; McKinstry, J.

Poisons in Your Food:

The Anatomy of a Lunch

David Mark

What do you want for lunch today? How about tuna fish sandwich and a glass of milk—a fine, balanced meal, just right to keep you going until suppertime. Fresh bread covered with moist, tasty tuna on a bed of lettuce, a tomato garnish, and a tall glass of ice-cold milk, fresh from the cow—or the supermarket, anyway.

That tantalizing meal contains something you can't see or taste—a hefty dose of chemicals which, in sufficient amounts, can kill you. Surprised? Let's examine your lunch, starting with the milk.

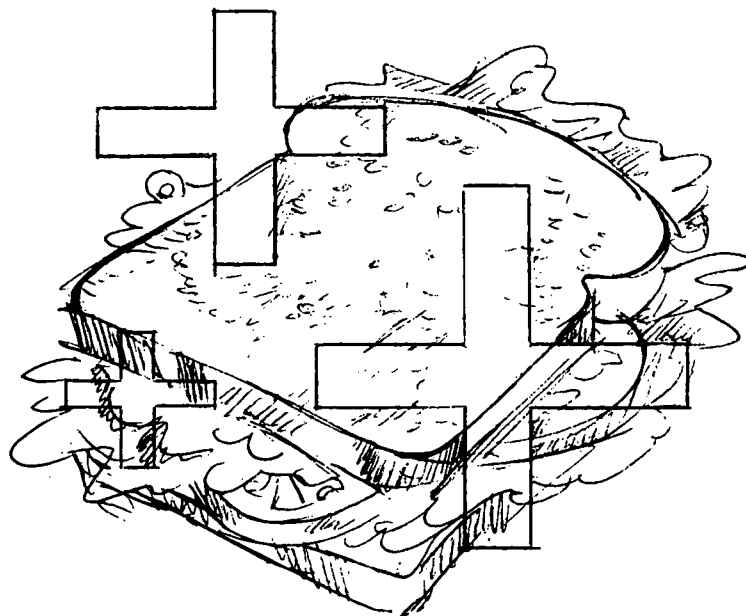
Farmers inject their cows with antibiotics such as penicillin and chloromycetin to check disease, and hormones to increase milk output. The machines used to milk the cows may have been washed with a detergent which leaves a residue that later turns up in the milk. Even the grass or hay that Bossie eats may have been sprayed with heptachlor to keep it from rotting—this chemical accumulated in her body, but was later excreted—it's in your milk. Milk contaminated with penicillin has been known to cause allergic reactions after being drunk. Chloromycetin causes chromosome damage in human bone-marrow and white blood

cells. And hormones—especially female hormones such as oestrin—can, in sufficient amounts, cause men to develop feminine characteristics. Best put the milk aside.

Let's turn to the sandwich—what could be harmful there? Bread, tuna, lettuce, a tomato slice—best take each part separately. What's in the bread?

The famous chalk-white loaf of American bread, long the foundation of our sandwich-based society, may contain nearly sixty different types of chemicals. As a mortician injects a corpse with embalming chemicals to preserve it, so is our bread loaded with chemicals to keep it from getting stale long after it should have. While it is baked, oxidizing agents such as persulfate, bromate, iodate and nitrogen trichloride hold air in the dough so that it swells up and seems bigger and heavier than it really is. The hydrogenated shortening used in the dough may contain traces of nickle. Hydrogenated oils have been linked with heart disease as one of the causes. The flour, bleached to satisfy the consumer's desire for pure white bread, has had its natural goodness converted to colorlessness and tastelessness by treatments with oxides of nitrogen, chlorine, and benzoyl peroxide. In a wasteful exchange of natural nutrients for chemical additives, gums and treated starches have been added as stabilizers and thickeners, glycerine and alcohol as synthetic flavoring, and oleomargarine, adding an unhealthy dose of preservatives and neutralizers. Perhaps you should your eat your sandwich without the bread.

What about the lettuce and tomato? They were



undoubtedly sprayed with pesticides while they were growing. Chemical fertilizers, notably nitrates, were added to the soil to promote quick crop growth—meanwhile robbing the produce of its flavor. Plant-growth regulators, if used deceptively, might have kept the vegetables from sprouting, fooling you into thinking you were buying fresh produce. Certain of these regulating chemicals, such as maleic hydrozide, have also been known to cause cancer.

And, of course, the tuna. Fish are more sensitive to pesticides than are most living organisms; further, their bodies may concentrate the poisons two-thousand times more than the water in which they live. The poisons may include DDT, endrin, dieldrin, and even the oil that leaks out of tankers. It may even contain radioactive wastes!

If a seemingly innocent meal like a sandwich and milk contains such an array of poisons, imagine the chemical concentrations to be found in poultry, or meat, or fruit. It is ironic that Americans enjoy such high nutritional standards, yet lead the world in the number of persons suffering from cancer, high blood pressure, and heart disease. A high standard of nutrition should prevent these diseases—unless something is wrong with our food.

Gloria Swanson's Cold Cucumber Soup

½ clove of garlic
1 cup chopped cucumber
½ tsp. salt
2 tbsp. chopped parsley
1 cup plain yogurt
1 cup yogurt Kiefer cheese

Blend the first five ingredients until liquified. Add yogurt and cheese. Blend again until smooth. Float 1 slice of scored cukes (organic) with skin on top and garnish with a small sprig of watercress. Cover and refrigerate 24 hours. Serves 4-6 people.

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True or False

At last more widespread attention is being given to the erroneous impressions created by the cancer establishment when it issues its cancer statistics. While the American Cancer Society and others are claiming an increase in the "cure" rate, it is in reality claiming only five-year-survival.

Judith Randall, a syndicated medical columnist, takes them to task in one of her articles by providing more factual data. She writes, "The cancer establishment has played fast and loose with the term 'cure'. When most of us hear that word we think it as meaning that the person cured has no more chance of again getting that disorder than if he had never had it in the first place. But the cancer society and others have, instead, defined it as 'five-year-disease-free-survival.' They mention as infrequently as possible that, skin cancer apart, most people who get cancer eventually die of it.

Indeed, it is not even clear that modern cancer therapies necessarily buy patients time. Breast cancers, for instance, are now generally smaller when first detected than they were a generation or so ago. The upshot is that no one really knows whether women with this dread cancer are actually living longer than they would have earlier or merely living longer after diagnosis and surgery.

There has been some progress in leukemia and Hodgkin's disease; yet, in spite of this, the cancer death rate has increased steadily for the last fifty years. In 1975 the cancer death rate rose by 5.2%. This publicly announced statistic caused such a furor that there was no public disclosure for 1976.

Our big argument is that the cancer treatment picture deserves little defense although the men and women providing treatment and doing research are mostly dedicated people; there should be no conflict between conventional practitioners and supporters of non-toxic treatments for cancer. Further, we argue that a more cooperative posture would be more fruitful and perhaps ultimately achieve more desirable results.

FACT is supporting the work of men who treat and have treated cancer as a systemic disorder. The documented results warrant sincere consideration instead of hostile attacks which are destructive and useless.

With cancer at epidemic levels and the continued rise in the cancer death rate, it is incomprehensible and unforgivable to negate any logical idea which shows promise without proper and conscientious investigation.

Cancer: A Second Opinion

Dr. Josef Issels



Josef Issels MD, an outstanding cancer clinician, studied at Freiburg, Bonn, Munich, Vienna, Dusseldorf, and Wurzburg. In 1951, he set up his famous Ringberg Klinik at Rottach-Egern where he has developed and practised his 'holistic' approach to cancer. He is best known to the British public as the doctor who treated Olympic athlete Lillian Board. He has also been the subject of a BBC television documentary.

Dr. Issels wrote this book to try to erase some of the misunderstanding concerning his treatment of cancer, and hopefully ease some of the opposition to his method of treatment. He says that in spite of ever-increasing sums of money spent on cancer research, the problem of cancer has not been solved. He views cancer not as a local disease manifested by a tumor, but as a disease of the entire body and the tumor as a late manifestation of cancer.

Over a 25-year period, Dr. Issels has treated over 8,000 cancer patients. His treatment is modified to suit the individual needs of each patient.

I was impressed with his knowledge of the history of medicine and it makes very interesting reading to learn how the doctors through the ages treated diseases. Hippocrates (460-377 B.C.) prescribed a special diet for patients, or more exactly a mode of life which meant abstinence from anything that "might be deleterious to the mode of life in relation to the soul and spirit." Dr. Issels says, "All chronic diseases, including cancer are to a certain extent due to faulty nutrition. Therefore, a proper diet should have a positive effect on chronic conditions." Our doctors are completely ignorant of the role proper nutrition plays in bringing about a cure of chronic diseases, and it is heartening to learn that a doctor of Dr. Issels' stature stresses and realizes the importance of proper nutrition to restore his patients to health.

It is Dr. Issels' belief that the surgeon, radiologist, chemotherapist and immunologist can work together to achieve better results for cancer patients. He discusses the uses of surgery, chemotherapy, radiology, and immunology in the treatment of cancer.

Surgery—it has its uses.

Chemotherapy—also useful, but advises it be

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used cautiously, and only until the patient's own immune defense system can be built up. In short, he uses chemotherapy to "buy time" for his patients since in many cases the growth of healthy cells is inhibited more than that of cancer cells. Because of this, Chemotherapy is used for limited periods only.

Radiation—gives best results on superficial tumors. Up to 98% of all malignancies of skin and lip can be cured by radiotherapy. A very large mass is unlikely to respond permanently to radiation.

Hormones—male hormones are used on female patients and vice versa. These opposite sex hormones arrest tumor growth selectively, and do not affect normal cell growth, the way other cystostatic agents do. Long-term use of hormonal treatment in high dosage causes personality problems; men become feminized while women acquire masculine characteristics.

Enzyme therapy is another form of therapy directed toward the tumor, based on the principle that foreign tissue is "digested". In a healthy body, "cancer cell-digesting" enzymes are always mobilized as soon as a cancer cell develops anywhere.

Surgery is mutilatory. Radiation cannot be manipulated with the same precision as the surgeon's scalpel; it can harm healthy tissue. Chemotherapy has still to reach the stage where it can achieve more with fewer side-effects. The promises of hormone and enzyme treatments have yet to be realized.

Dr. Issels says the localist approach has now dictated the treatment of cancer for a hundred years in terms of surgery, seventy years in terms of radiology, thirty years in terms of chemotherapy, and that "It must be clear to everybody—researchers, clinicians and patients—that something must be fundamentally wrong with therapeutic methods used for the past century, if, in spite of very intensified research, and almost limitless supplies of money, the problem of cancer has not been solved.

"A fundamental change in our basic attitude must be made. Cancer must not be treated as a local disease, but as a disease of the whole body."

His success in treating cancer is attributable to his treating the whole body, and by activating the patient's own immune defense system. Immunotherapy was used successfully many years, by a Dr. William Coley, a gifted surgeon, who noticed, after a series of experiments, the beneficial effects of certain infections on his cancer patients. He injected selected patients with mixed bacterial toxins

to induce responses that might change the course of the malignancy. Coley treated some 483 patients and in each case there was a clear clinical improvement.

Dr. Robert Good, the present director of Sloan-Kettering says, "that Man lives in a sea of microorganisms; the immune system is his license to survive." The immune system functions as a "police force", to prevent the survival and multiplication of abnormal cells. Ordinarily, the immune system would recognize and destroy them before they divided.

Reactivating immunity is never easy, but there are definite avenues to stimulate the natural resistance, and Dr. Issels goes into great detail on the different methods he uses to activate the natural immune system, along with improving the patient's general well-being with proper nutrition. If one modality does not work, Dr. Issels tries another. Sometimes a fever is induced because cancer cells are destroyed by the fever, while healthy cells are not. Dr. Issels also advocates the removal of diseased tonsils and teeth, as these are a source of dangerous toxicogenic foci.

His proper diet includes such foods as soy beans which are rich in protein; nuts, especially hazelnuts, walnuts and almonds because they have a high protein value, contain quality fats rich in vitamin F and lecithins, and are free from cholesterol. Groundnuts (we call them peanuts) are unsuitable for a cancer diet. Fruits and vegetables are also to be included. Some of the foods to be avoided are meat, and all animal fats such as bacon, lard, butter, etc.

His whole body approach to cancer has met with opposition from doctors who do not understand his treatment and this book is an attempt to state his case for a holistic treatment of cancer. Hopefully it will clear away some of the misunderstanding that exists and with it some of the opposition to his very successful treatment. much success.

The book is well-written with a minimum of medical terminology so that it is readily understandable by the layman or the professional doctor. It should be read by every doctor who treats cancer patients to make them aware of the treatments beyond surgery, radiation and chemotherapy, which have permitted Dr. Issels to prolong the lives of the cancer patients in his clinic in West Germany.

Cancer: A Second Opinion can be ordered from FACT at \$7.95 each. See the book list on page 15.

Books

Laetrile

- Burk, Dr. Dean: Vitamin B17 / Vitamin B15 / Vitamin B13 (\$1.50)
 B17 Handbook for Physicians (\$2.00)
 Culbert, Michael: Vitamin B17, Forbidden Weapon Against Cancer (\$8.95)
 Kittler, Glenn D.: Laetrile, Control for Cancer (\$1.50)
 Laetriles: Nitrosides in the Prevention and Control of Cancer (\$3.00)

Nutrition

- Bass, Dr. Stanley: Achieving Superior Nutrition Through Seven Progressive Weekly Diets (\$2.00)
 Bieler, Dr. Henry G.: Food Is Your Best Medicine (\$1.95)
 Brandt, Johanna: The Grape Cure (\$.95)
 Fere, Dr. Maud Tresillian: Does Diet Cure Cancer? (\$4.95)
 Gerson, Dr. Max: A Cancer Therapy, Results of Fifty Cases (\$7.95)
 Haight, S.J.: Has Dr. Max Gerson a True Cancer Cure? (\$1.50)
 Hay, Dr. William Howard: How To Always Be Well (\$1.65)
 Jensen, Dr. Bernard: Doctor-Patient Handbook (\$1.95)
 Health Magic Through Chlorophyll (\$3.95)
 Joy of Living and How To Attain It (\$4.95)
 Seeds and Sprouts for Life (\$1.50)
 Vital Foods for Total Health (\$4.95)
 You Can Master Disease (\$4.95)
 Kelly, Dr. William Donald: One Answer to Cancer (\$2.50)
 Kulvinskis, Viktoras: Love Your Body (\$2.50)
 Nittler, Dr. Alan H.: Health Questions and Answers (\$1.75)
 New Breed of Doctor (\$1.50)
 Waerland Dietary System:
 Waerland, Are: Health Is Your Birthright (\$3.00)
 Health Handbook (\$6.95)
 Waerland, Ebba: Cancer, Disease of Civilization (\$1.50)
 Rebuilding Health (\$1.45)
 Dr. med. K.O. Heede: Sure Ways to Health and Joy of Life (\$1.00)
 Walker, Dr. N.W.: Diet and Salad Suggestions (\$3.00)
 Raw Vegetable Juices (\$1.50)
 Warmbrand, Dr. Max: Eat Well to Keep Well (\$1.25)
 Encyclopedia of Health and Nutrition (\$1.95)
 Living Without Pain (\$.95)
 Overcoming Arthritis & Other Rheumatic Disease (\$8.95)
 Wigmore, Dr. Ann: Be Your Own Doctor (\$1.95)
 Eydie Mae—How I Conquered Cancer Naturally (\$2.95)

Miscellaneous (Listed by Title)

- Cancer, A Second Opinion, Dr. Josef Issels (\$7.95)
 Cancer, How To Prevent and Gain Remission, John H. Tobe (\$10.95)
 Compleat Herbal, Ben Charles Harris (\$1.75)
 Composition and Facts about Foods, Heritage Press (\$5.50)
 Eat the Weeds, Ben Charles Harris (\$1.50)
 Eating May Be Hazardous to Your Health, Jacqueline Verrett and Jean Carper (\$2.95)
 Food Combining Made Easy, Dr. Herbert M. Shelton (\$1.45)
 Health and Light, John N. Ott (\$1.95)
 Kitchen Medicine, Ben Charles Harris (\$.95)
 March of Truth, Arlin Brown (\$5.00)

- Our Earth, Our Cure, Raymond Dextreit (Translated by Michel Abehsera) (\$4.95)
 The Science and Practice of Iridology, Dr. Bernard Jensen (\$18.50)
 Touch for Health, Dr. John F. Thie (\$8.95)
 World Keys to Health and Long Life, Dr. Bernard Jensen (\$5.95)
 Information Packet (\$1.00)

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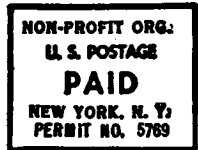
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