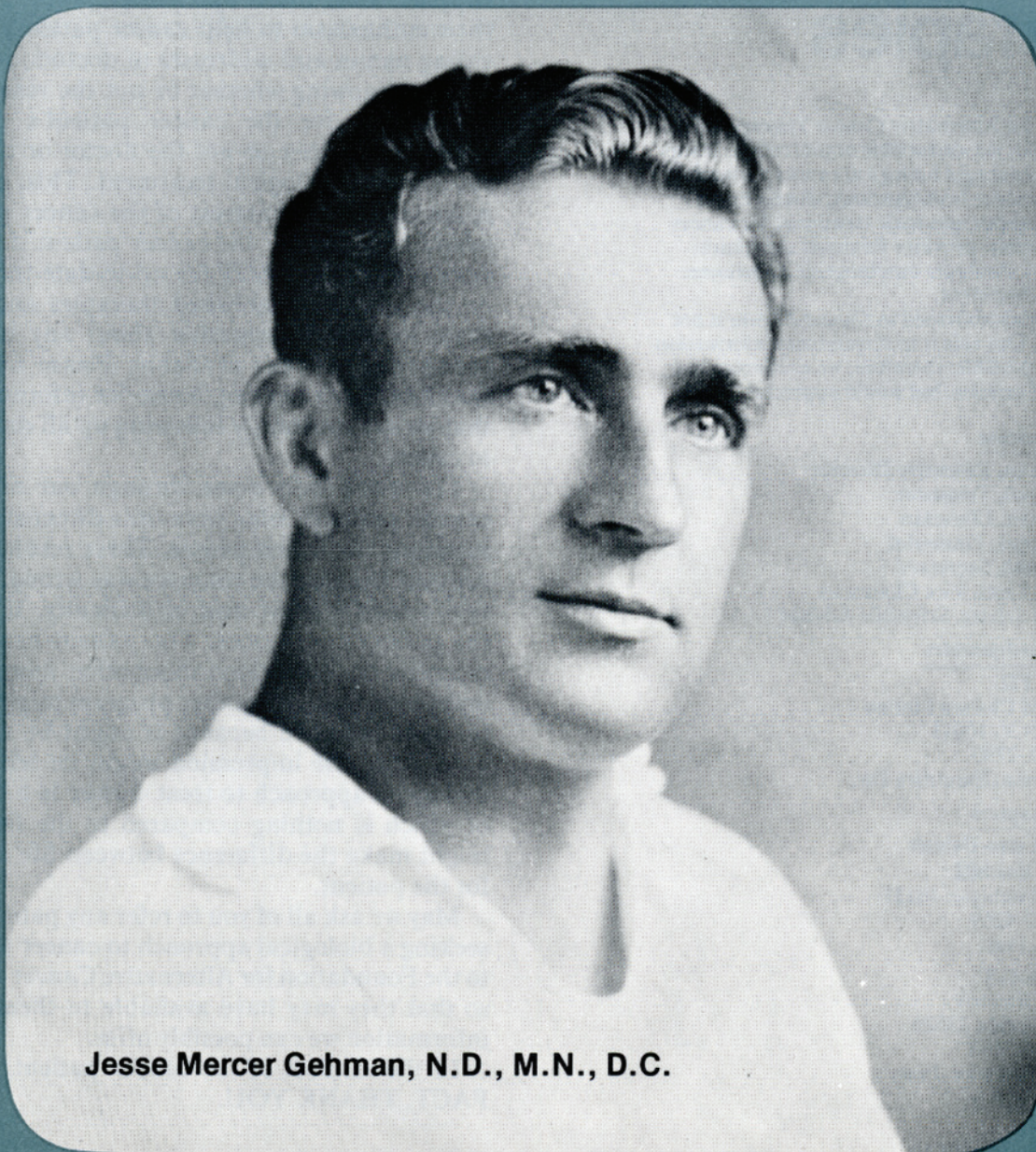


# CANCER FORUM

PUBLICATION OF THE FOUNDATION FOR ALTERNATIVE CANCER THERAPIES, LTD.



**Jesse Mercer Gehman, N.D., M.N., D.C.**



foundation for  
Alternative  
Cancer Therapies Ltd.

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# FACT

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## 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,

We, at FACT, are disturbed by the dissemination of information by individuals who are sincerely supporting our work. We must try to make that support work more efficiently. Many people, in their enthusiasm to help cancer patients, are providing names and addresses of doctors and clinics without knowing whether or not the resources are appropriate for the cancer patient's particular problem, whether or not the doctor or clinic provides a true biological treatment. This, of course, is not in the best interest of the cancer patient. It would be better for the cancer patient if he or she were referred to FACT for up-to-date information on the already established therapies and also for them to have information about any new treatments that become available. Please understand that FACT is a clearing house for information and that we are constantly following up all data related to cancer.

Too many calls come through our office from cancer patients who were mis-directed by well-meaning, dedicated people. These resulted in failure only because the resource was wrong. This system causes a great deal of difficulty. It exhausts the patient's resources. The patient becomes unresponsive to suggestions about other nontoxic therapies even though another program might prove to be more effective because it might be more suitable. And, the impression might be left that the biological approach to treat cancer is a fraud. All of which is nothing compared to the fact that it might make the difference between life and death for the patient.

May we ask all of you to refer any patient, who is seeking a biological approach to cancer treatment, to the Foundation for Alternative Cancer Therapies so that they may have available to them the best information we can possibly offer.

In the interest of the cancer patient, WE, AT FACT, THANK YOU.



Ruth Sackman

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# Cancer Causes and Cures

An interview with  
Jesse Mercer Gehman, N.D., M.N., D.C.  
by Ruth Sackman

*I had the privilege of knowing Dr. Jesse Mercer Gehman and had long conversations with him about health matters. He was extremely knowledgeable and dedicated, serving during his younger years as president of the American Naturopathic Association; Secretary and Executive Director of the Interstate Narcotic Association; campaigning against smoking long before official recognition of the carcinogenicity of cigarettes. He was the prime organizer of the First Vegetarian Convention at Lake Geneva and served as chairman of the event. The convention drew speakers and participants from all over the world.*

*He was a most prolific writer. Hundreds of his articles appeared in health magazines and other publications with national circulation. At the age of 23, he was runner-up as the Olympic Middle-Weight wrestler. His interest in Naturopathy started with Bernard McFadden's Physical Culture movement and continued as a leader and supporter until his death in 1976.*

**Q:** *How long have you been teaching health and how to overcome disease?*

**A:** Almost 50 years—I started when I was 16. That was 57 years ago.

**Q:** *Have you given much thought to the serious affliction of cancer?*

**A:** Yes. The more civilized we become, the more cancer we seem to have. My first case of cancer 45 years ago was overcome by changing the food pattern.

**Q:** *What do you believe causes cancer?*

**A:** The complex habits of eating and civilized living in general; the kind of living accepted without question by people who seem to think it is good.

**Q:** *How do you think civilization has anything to do with its appearance in human beings?*

**A:** By removing us from the simplicity in living, yes, the simple natural life, and making us slaves to unnatural, bad habits which sap the vitality and undermine the health.

**Q:** *How would you list the causes of cancer in their order in your opinion?*

**A:** Wrong food, i.e., white flour, white sugar

and all denatured foods, which all cause irritation, poor elimination and constipation.

**Q:** *Would you say that cancer is a disease of civilization?*

**A:** Yes, by all means it certainly is. All who have made a serious investigation of the problem agree on this point.

**Q:** *What experience have you personally had with cancer?*

**A:** When I first came in contact with cancer, having been in a position to study the various theories and cures advanced and knowing of the remarkable recoveries accomplished by Lucius Donald Bulkley, M.D., and also the marked influence of water applications of Preissnitz and Kneipp, I combined these in my approach to the problem.

**Q:** *What do you think of the cancer research over the last 45 years?*

**A:** It has accomplished nothing, because most is in the wrong direction. To learn the cause of cancer, the total man and his habits have to be studied.

**Q:** *You referred to the work of Dr. L. Donald Bulkley as being highly successful. Would you care to comment?*

**A:** Yes. He developed a remarkable dietary regime insuring all the vitamins and minerals of the foods he served. His success was brilliant. He was the founder of the New York Skin and Cancer Hospital.

**Q:** *Who do you think were the outstanding men of the medical profession who contributed most to the knowledge on the cause and cure of cancer?*

**A:** Dr. L. Duncan Bulkley, Sir William Arbuthnot Lane, M.D., and Kristine Nolfi, M.D. Of course, there were others.

**Q:** *Why were Sir William Arbuthnot Lane's theories not accepted by the rank and file of the profession, and why were Dr. Bulkley's theories not accepted in the face of the great success he had treating cancer dietically, and why was not the work of Dr. Nolfi formally investigated and accepted by the profession?*

**A:** That question can be answered much better by organized orthodox medicine, i.e., allopathy, and our so-called Public Health Service. It seems orthodox medicine would rather have people remain ill than to have them find the road to recovery through methods they do not approve of or accept.

**Q:** *In your opinion, which are the most harmful as a possible cause of cancer—poor eating habits,*

*inoculations, cigarettes, or environmental factors?*

A: All of these causes seem to hang together. While these are unquestionably important causes, there are many other causes. Long ago I stated that inoculations have been polluting the nation's bloodstream for too long, and not only have these helped to produce cancer, but many other conditions. The bad part about any of this questionable mass medication is the compulsory feature, as for instance, our Armed services, and as a requirement for the admission of our children into school. Let those who want these things have them, but the wishes of those who want to avoid inoculation should be respected. After all, the ones who are protected by inoculations should have no fear of the unprotected. As for cigarettes they do have a very definite connection with cancer, especially cancer of the lungs. It was long since shown by leading authorities on lung cancer that of the 20,000 deaths in this country every year, a large number developed the condition because of cigarette smoking.

*Q: How do you think our food supply at the present time is compared to the nineteenth century or even 50 years ago so far as cancer is concerned?*

A: Our food is far worse today of course. Fifty years ago the food was more simple, more natural, less processed, and people suffered less from constipation. One of the chief causes of cancer today, according to a report of the Joint Senate Committee, which sat in Washington, investigating chemicals and adulterants in food, found that there are 842 different chemicals and adulterants used in food. Most of these had never been fully tested. Surely all this processing helped to prepare the soil of the body for cancer as well as many other diseases. We are beginning to test for the harmfulness of these chemical additives to our food supply.

*Q: What processes used in food do you consider the worst?*

A: They are all bad. Any process which makes the food less nourishing and hence more irritating to the system is bad, very bad. For instance, refining sugar, bleaching and refining flour, in all of which chemicals are used, putting all sorts of chemicals into so many of our foods to make them keep longer or look better. I think milling and refining our grains is one of the worst sins our manufacturers commit. There is not one logical reason for it. It is done only because the grains with pericaps broken will not keep as long. And the next horror is refining our sugar, for children

seem to all have a sweet tooth. And even more important is pasteurizing our milk. Milk is a definite basic food. All of these processes destroy basic vital minerals in these foods.

*Q: Has the Government done anything to protect us from such practices?*

A: Well, yes, but only to a small extent. The government moves far too slowly, the while our peoples suffer and perish.

*Q: What do you mean "to an extent"?*

A: For instance, whole wheat flour must now be a 100 percent product, but now much of our whole

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**... there would be far less cancer today if these three basic foods: bread, sugar and milk, would not have been robbed of their vital elements by refining and preservative processes.**

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wheat bread is made from bromated whole wheat flour, and the white flour may not be bleached as it used to be; but white sugar is still flooding the market and making millions of people ill. Milk that is pasteurized must be so marked. In fact, in many cases, it is the only kind obtainable.

To my mind there would be far less cancer today if these three basic foods, bread, sugar and milk, would not have been robbed of their vital elements by refining and preservative processes.

*Q: What about other foods?*

A: There is only the reasonable measure of protection for the consumer afforded by the Government. The Pure Food and Drug Law, passed when Paul V. McNutt was Social Security Administrator, years ago, provides that the ingredients of all foods be marked. On the whole this was carried out, but the required notice of ingredients was in such very fine print and in poorly contrasting colors that it was scarcely readable.

*Q: What foods would you suggest avoiding to protect the body against cancer?*

A: Any foods containing artificial flavoring and artificial coloring, for in these colorings, in many cases, lies the danger of irritating the system. In many cases both flavoring and coloring are derived from coal-tar products. So any foods artificially colored or flavored should be avoided. Coal-tar derivatives have been *proved* to be carcinogenic,

i.e., cancer-producing. This applies to any foods so treated.

*Q: What foods would you suggest eating to prevent cancer?*

A: Whole grain products, whole milk, raw un-refined sugar, an abundance of fruits and vegetables, either raw or cooked. But eat all of the raw food possible, and when foods are cooked, they should be properly cooked and all the juices preserved and eaten. The outer skins of all tuber vegetables, the outer leaves of all leafy vegetables containing the protective elements should be used; and no meat, as this is the most altered of all foods both when the animals and fowls are alive, via medicated foods, and again after slaughter by the use of various chemicals for preservation and appearance.

Nuts of all kinds, grain and the legumes in place of meat are best. Many investigators assert that cancer is not found where the people do not eat meat. If there must be meat in the diet, it should be kept to a bare minimum, and the source fully known.

*Q: Some people claim that cooking in aluminum causes cancer. What is your opinion?*

A: I have heard that said, but I have never seen such a case. I do believe, however, that probably there are much better means of cooking, as for instance, glassware, enamelware, pyrex, stainless steel, etc.

*Q: What is your opinion of cooking foods generally and its relation to cancer?*

A: I believe that such foods as can be eaten raw should be so eaten, for example, fruits, nuts, many vegetables, and when foods are cooked, then they should be either baked or broiled or steamed or cooked in as little water as possible, and the water remaining after cooking used with the food. Thus

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## **Civilization makes us slaves to unnatural, bad habits which sap the vitality and undermine the health.**

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in raw foods and cooked foods the vitamins and minerals so necessary to prevent and overcome cancer are assured.

*Q: What is your opinion of the exclusive grape dietary for cancer?*

A: From glowing reports of its effectiveness one

can regard it of value, but I have not seen the actual bona fide results. Johanna Brandt of South Africa focused attention upon it, though it was used as an exclusive regimen centuries ago. I firmly believe that any exclusive raw fruit dietary will have a beneficial effect.

*Q: Would you say there is a specific cause or cure for cancer?*

A: No, I do not think so. I think the orthodox doctors are wasting their time, and all of the monies collected in the cancer fund-raising campaigns are wasted on useless research. The only specific cure I know of for cancer is for the sufferer to get back to a simple natural life in every way, thereby giving the vital healing power of his own body a chance to restore vital power and thereby overcome the disease. These apparently are methods of arresting the condition.

*Q: What do you think of fasting for cancer sufferers?*

A: Fasting is "Nature's" grand remedy. Most people eat without hunger. Therefore, they are also eating food they do not need. A good fast balances the system if it is carried on under care. Reckless fasting is *not* to be encouraged, but fasting alone does not overcome cancer.

*Q: To sum up in a few words, what would you say is the cause and cure of cancer?*

A: The cause in one phrase is "civilized living." Our poor habits of eating, taking of drugs, inoculations, lack of use of lungs, lack of exercise, use of the common addictives, as alcohol, coffee, tea, tobacco, chocolate and cola drinks. The cure is in getting away from all these poor habits and a "return to nature" or "physical culture" living, whichever you choose to call it. This will add years to anyone's life and life to anyone's years. The bloodstream must be purified by natural living from every standpoint.

The cause of cancer is in civilized living. The cure of cancer is in simple natural physical culture living. Before cancer can be overcome, we must first of all remove the cause. Orthodox medicine has not done that up to this time. The natural approach has proven itself.

*Q: Have you any suggestions for improving cancer research?*

A: Yes, I firmly believe that the allopathic physicians of America, and the American Cancer Society, are duty bound to the public they serve to investigate and determine the merits of every cancer remedy which appears, irrespective of where or whom it comes from.

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## Breast Surgery or Not?

Leslie Langham

*This is not a cancer therapy.*

*Leslie Langham's story is presented in "Cancer Forum" because we found the evidence of a patient participating in her own medical decisions most interesting and we know you will too. But, we want to emphasize that there was no clinical evidence of cancer and to emphasize that a vitamin supplement which might be of benefit to one person because of a special need or deficiency might have the opposite effect for another person. Excesses or deficiencies can upset the balance in body chemistry. Also, Dr. Gerson found that oil-based vitamins burdened the liver of cancer patients.*

*Leslie Langham was sensitive to her own needs as you will discover reading about her experience.*

This story goes back more than forty years, when I was in my late twenties, living near New York City.

I suffered much from menstrual pains, and was persuaded by a wealthy friend to go see her doctor, a New York gynecologist, with offices, and high fees commensurate therewith, on Park Avenue.

The doctor told me of a new treatment for menstrual difficulties and gave me some pills, representing this new treatment. He did not explain what the pills contained. I got the pills on his prescription from the drugstore.

When I had taken this medication about a month, I noticed a swelling in the left breast; a kind of mastitis. I had had a mastitis before, and without associating this with the medication, tried by diet to clear up the bloodstream. The diet did not help. The lump in the breast became larger and hard. In alarm, I now realized an association with the doctor's prescription and the condition. I called for an appointment to see this doctor, was delayed getting one, as the doctor was not immediately available. On instinct, I stopped taking the pills. The lump seemed to grow even a little more. By now it was as large as a very big orange, and steadily growing harder. It was in the one breast only. The other was clear.

When I finally visited the doctor's office, he was not there. He was in the hospital having gall-bladder surgery. Another doctor was taking his place. I explained my problem, was examined, and

when I dressed and returned to the doctor's consulting room, was told that I must have immediate surgery. "That breast will have to come off."

I come from a family which had produced some fine doctors. My reaction at once was that I must have a clear understanding of the reason for such surgery. The doctor began to look annoyed. "It could be cancer," he said, "and even if it isn't, it could turn into cancer in time. It should be removed."

I said, "This lump has arisen because of my taking, at Dr. X's direction, these pills. The lump should be examined on that basis. If this is cancer, then these pills produce cancer. They should not be given to women at all."

It is needless to detail the conversation that followed. This doctor was the kind who resorted to surgery with little excuse, obviously. He denied at once that the pills could have caused the lump. I myself denied at once the possibility that he was correct. "In any case," I said, "before I, or any member of my family, would resort to surgery, we would get two opinions," and with that, I got up and left. I arrived home and threw the expensive pills into the trash, after having discovered that they were made of, or consisted of, hormones. I began a waiting, watchful concern. I hoped, since the lump had come up most certainly in connection with taking these pills, that by discontinuing them, the lump might go away.

But it did not, and a year passed, then another, then five, ten years, and I still had the lump. I did

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**"I quite firmly told him I would not submit to surgery, and did not feel it necessary. He was less sarcastic than the last doctor I had consulted."**

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not consult another doctor about it. I developed a philosophy that if I was to die of cancer, I would die of cancer. After a few years I had grown accustomed to having one breast as hard as a rubber ball, and the other in its natural state.

Then came a time when I had to have a job, and the job I got required a physical examination. The doctor examining me was a woman, kind and understanding. She at once said she could not give me a certificate of perfect health; that I would first have to have surgery to remove the breast.

At this I became, though still polite, a trifle vehement. I told her I was desperately poor, I had no people to help me, I could not possibly undergo surgery, and I needed this job for mere survival. I practically demanded that she sign the certificate of health, and after I had told her the lump had, to the best of my belief, arisen as the result of a couple of months of hormone pills prescribed by a doctor, and that the lump was not in the least painful, she gave in and gave me the necessary certificate.

Some twelve to fifteen years after this, the lump still in its hard, large state, I fell ill of a cystitis, went to a doctor some hundreds of miles south of the New York specialist on Park Avenue. This doctor made a urine analysis and called me in for a general examination. I must mention here that I never once—in seeing doctors subsequent to the original consultation in New York which had been, obviously, the cause of the lump—I never once said anything to any examining doctor about it. I let the doctors make their discovery for themselves. On this occasion I went through the usual experience.

“This lump—how long have you had it?”

I told him, maybe fifteen years.

“Well, it will have to be removed. We shall have to arrange for surgery.” He told me to dress and come through to his office, and when I did, he reached over for his telephone to call for the surgery appointment he had proposed.

I quite firmly told him I would not submit to surgery, and did not feel it necessary. He was less sarcastic than the last doctor I had consulted. “You feel you know better than the doctor?” he asked.

I had to restrain myself, and answered, “In this case, indeed I do. The breast will not be removed. And as to the cystitis, I will go home and try a well-known remedy for that—blackberry wine.” This I did, and cured the cystitis.

At this time I encountered, through a chiropractor, the work of the doctors Shute, of Toronto, Canada. The chiropractor gave me some literature on Vitamin E. He said, “Since you come from a medical family, you can probably understand this paper. It is a new field of research.”

I read the research, got some Vitamin E, and returned for my next chiropractor appointment in excitement. I said, “I never in my life have felt such a rejuvenating pickup! My whole body seems glad to be alive!” How much was I taking? I was taking 300 IU's of Vitamin E per day. The manufacturer was Thompson, USA.

At this point the chiropractor said that since Dr. Shute was still much in the experimental stage of this E work, he would probably be glad to receive a report from me. I sent it. Dr. Shute wrote me suggesting that I take 600 IU's for the rest of my life. I did this, and got into the habit of taking it, but at one point got careless, and dropped it for perhaps two years. My health reflected the lack, and I certainly lacked intelligence too, in not noticing the connection. I still had the lump, still the same; had twice been examined by orthodox doctors, to

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**“It could be a cancer,” he said,  
“and even if it isn't, it could turn  
into cancer in time. It should be  
removed.”**

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whom I said nothing whatever of the lump. They themselves found it, both suggested immediate surgery, and both got huffed when I said no. I now slid back into my 600 IU's per diem of E.

One day I was in a health food store, noticed a book by Herbert Bailey, “Vitamin E: Your Key to a Healthy Heart”—bought the book. I did not get to reading it for some time, and meantime I was now in a large southern city which had a famous medical school—and once more a friend persuaded me to go to her gynecologist. I went, largely to please the friend. This man was a most noted doctor.

Once more I went through the ropes. After the examination this man reached across his desk, phoned, smiled into the instrument, and said, as though he and the other doctor were out duck-hunting: “Doctor, I have a patient for you—surgery, tumor, breast.” When he hung up I said, “If you were making that appointment for me, please cancel it. I do not intend to submit to surgery.” This man virtually resorted to threat. He said that the condition was, at my age, very ominous. If it wasn't cancer already, it could easily move into it. I left while he was still fuming.

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**“My health reflected the lack,  
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Business now took me back to New York. I had known a fine doctor there for many years—he too, like me, given to writing—a very intelligent and humane individual, a personal friend. I now went to see this man for a “general checkup.” I did not mention the lump in my breast. He found it. He said to get dressed and come through to his office. I did. He said, “I have known you for a long time. I

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**“I will give you pills to alleviate the pain, and as the pain gets worse I will increase the strength. All I can do is help you with the pain.”**

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know your mettle. I am your friend and I will always help you. At this point, I must help you through cancer.”

“Cancer?”

“Yes—you have cancer.”

I asked him, did he recommend surgery. Mind you—he knew nothing whatever of my previous consultations about this lump. “No,” he said. “It is too late for surgery. The tumor is very large, and at your age, I am against the violence of surgery. I will give you pills to alleviate the pain, and as the pain gets worse I will increase the strength. All I can do is help you with the pain.”

I took the prescription from my doctor friend. “Take it easy,” he said. “I have continually advised you not to overdo the way you do. Take it easy. Enjoy what life you have left before the pain gets you.”

I went out on Fifth Avenue, New York, to take it easy—before the pain would get me. I walked blindly up one street and down another. One thing kept hammering at my brain...the pain—the pain—pills for the pain—“before the pain gets you.” I stopped cold, right at the drugstore where I was to get the pills for the pain that would get me. “But,” I told myself, *I have no-pain*. I have no pain!” I went in and got the prescription filled. If anyone would like to see this bottle, containing these pills, I still have it, unopened, all the pills inside intact. The label is now very old and dingy.

After this experience, one day I picked up the Herbert Bailey book on Vitamin E, and began to read it. As I read along, I learned that Bailey owed a tremendous debt to Dr. Shute of Canada, who had saved him from a lethal heart attack by giving

him thirteen hundred and fifty IU’s of Vitamin E per day. I put the book down. I thought, well, if Bailey can take thirteen hundred and fifty per day, so can I. I got up and began right off.

Approximately two weeks after that, I was bathing when I felt at the back of my neck a small, movable tumor that my mother had said I was born with. I had gotten into the habit of feeling this tumor almost unconsciously. On this day, feeling for it, I could not locate it. I felt again, and again. The tumor was gone.

At this point, as a writer, I feel I should continue this story in the dramatic vein it deserves. On the other hand, it is a medical story, and I was taught in my youth that the scientist gives mainly the facts. The conclusion arrives from the facts.

I wrote Dr. Shute telling him that the Vitamin E dose of 1350 IU’s per diem had apparently dissolved a tumor on the back of the neck the size of a small walnut, extending out about 50%, the other half embedded. Dr. Shute answered me graciously.

I was taking a hot bath one day, and in towel-ing, suddenly saw my reflection in the bathroom mirror. I stopped, astonished. The bath towel fell to the floor. My left breast seemed to have a sag, like the right. Almost frightened at the seeming miracle of this, I touched my breast. The tumor was gone!

I stood there in the bathroom a long time, confirming and reconfirming the fact. I began counting back—twenty, twenty-five, thirty years—I could not at the moment remember the exact time I had taken those pills. One symptom remained. Tumors in the breast apparently produce an inversion of the nipple. This one did, anyway. While the

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**“After a few years I had grown accustomed to having one breast as hard as a rubber ball, and the other in its natural state.”**

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lump was gone, the inversion remained. I told myself this too would probably correct itself.

It didn’t though. The nipple has not come back in all the ensuing years—maybe fifteen or so—and if a doctor were to examine me tomorrow, he would say, as they all do, “There is an inversion of the nipple here. This is usual with a growth. But I find no growth.”

“Yes,” I would say, “I cured the growth.”

He would then give me the kind of look these



doctors do when a patient dares to have his own opinions. I would tell my story; he would listen patiently, and dismiss me as a puzzle. He had not been taught about Vitamin E.

A few months after the breast cure, one day I had a pain in the chest. I was travelling, far from my home. I found the first liquor store and went in. I told the proprietor that I had at one time had a heart attack and the doctor had told me if ever I felt the pain come on again, to take a good swallow of brandy. "I do not drink anything," I said, "but I suppose I had better get some brandy. Would you make it something pleasant, like apricot."

He brought out the brandy and I apologized for taking the swig in his store, but, I said, "It is possibly necessary." Having got the swig down, I said, "Do you think I look ill?" He laughed. "I was thinking how very well you look," he said. We stood there pondering this thing, and suddenly I said, "I think I know what it is! I am taking too much Vitamin E!" This was Greek to him, but I told him the story. By the time I left, the pain had subsided. Next day I took no Vitamin E. The following day, I took eight hundred IU's, and I have maintained that level ever since. Apparently too much could cause that peculiar chest pain. But less than that certainly would not have dissolved the tumor. And if the editors of this magazine would give thought to this story, they would have some qualified person do a report on Vitamin E and the lymph glands. Thereby, I think hangs the tale!

Some time—a year or so—after I had dissolved the lump, a friend, also a writer, called me and asked if I would go to her house and stay with her animals while she went to the hospital. She was going to have surgery. I went over and talked with her. She had "little lumps" in the left breast. I asked if she had had two opinions as to the necessity of surgery. No, she trusted this doctor, and he was said to be the best available for the job. I told her of my own experience. She reflected and said, "You just happened to be lucky. It might have been cancer with you—you might have died of it—because you didn't get it removed."

"Kay," I said, "you have an intelligence far above average. Look at the logic of this. First, nobody should have surgery without a second diagnosis and consent. Second, if you should try the simple resource of taking Vitamin E for, say, two months—what possible harm could that do you? If you have cancer of the breast, how much could it grow in two months? If you haven't, what pain and

misery and expense might you not save yourself by simply trying the experiment."

She refused to listen. She trusted this doctor; he knew his business; she was afraid of cancer; she would have it off. So she did.

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"I arrived home and threw the expensive pills into the trash, after having discovered that they were made of, or consisted of, hormones."

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This woman weighed around two hundred pounds. The breast they took off was as big as a smoked ham. They operated up under the arm too. She was a mass of stitches. And when I went to the hospital to see her, they had already supplied her with a huge rubber simulation to put inside her bras on the left side. She was amused at it, lying on the bedside table.

"Did they," I asked her, "find it was cancer?"

"Not yet," she said.

"What do you mean, not yet? It seems to me it's cancer, or it is not."

"They can't decide all at once. There were a number of small lumps."

"You mean you could have two types of lumps in the breast, and one type could be cancerous?"

"That's what they tell me." I restrained further comment.

Before this friend left the hospital, I visited her there three more times. Each time they had "not yet" found cancer. Each time there lay the rubber simulation on the side table, big as a ham. When she finally came home, they had still "not yet" found cancer. "They kept on analyzing the little lumps," she said. "But they didn't find any."

I said, "I'm sorry you had to go through it, Kay. From the evidence, it looks as though it was not necessary. I hope, if you meet someone else in the same fix, you will advise her to give the Vitamin E a trial. The point is, it cannot possibly harm. And it might utterly heal."

And what moves me to tell this story now is an encounter in the past month with a woman of about thirty-five who works as a checkout girl in a supermarket. She was missing quite a while, and returned thin and sick-looking. When I questioned her, she said she had had a breast removed. I asked her, did she have cancer.

"No," she said. "They found it was a negative tumor. But the doctor said it was just as well to have it taken off."

Poor girl—poor girl. . . .

## Sprouting

1. Soak seeds in a jar overnight. Start with one tablespoon.
2. Cover jar top with cheese cloth or nylon mesh and secure with a rubber band.
3. In the morning, pour off water and rinse. (Distilled water is best.)
4. Place jar on its side out of sunlight until seeds open and growth appears. When the leaves open, the jar can be placed in the sunlight for them to turn green.
5. Rinse the seeds as often as needed for them to remain damp but not soaked.
6. Refrigerate when the sprouts are ready to be eaten.

## In Memoriam

Zelman Kaplan	Benjamin Zier
Janet Weinstein	Russell B. Brown
William B. Kintner	Gloria Hartman
Amy Levow	Mrs. William Ziperman's
Joanne Siegel	beloved father and
James Lariviere	brother-in-law
Barney Hansen	Carol Ossi
Henry Siegel	Marion Collins

*In lieu of flowers, send a tax deductible contribution to F.A.C.T. as a memorial to the deceased. This may give life to a cancer victim. Acknowledgements will be sent to the families of the deceased and to the donors.*

In order to receive information by mail, please send a stamped, self-addressed business-size envelope to Foundation for Alternative Cancer Therapies, Ltd., Box HH, New York, N.Y. 10011. A packet of information is available for \$1.00.

## Holistic Health: More Than the Absence of Disease



By Harold H. Bloomfield, M.D.

A 43-year old man comes into a doctor's office complaining of lack of energy, insomnia, anxiety, decreased libido, digestive problems, and low-back pain. A vigorous workup uncovers no organic illness. The doctor may prescribe a tranquilizer or stimulant or just tell the patient to relax more. But is this enough?

About seven out of 10 patients doctors see are suffering from such symptoms. And 80% of them have no underlying illness—just chronic fatigue. It's true that fatigue may be a symptom of organic problems such as infectious mononucleosis, anemia, kidney infection, or hormonal imbalance, but once these have been ruled out, conventional medicine has no answer for what is plaguing the patient.

Here is where the holistic approach—positive wellness—can step in. It starts with the assumption that a person should feel great, and if he doesn't he has a real health problem. The World Health Organization defines health as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." The person who is chronically fatigued is of major concern to the holistically minded doctor, who by intervening early may help ward off real illness later on.

First, it's important to look at the patient's lifestyle. Is he getting enough sleep? Is he too sedentary? Or he is compulsively on the go, disregarding his body's natural rhythms of rest and activity? Is he under too much pressure? Is he on an excitement treadmill? The pressure to seek stimulation in our culture has become so intense that people forget they need to recuperate. Many rush from a hectic office, battle commuter traffic, and arrive home only to turn on the T.V. To keep feeling "up" they need perpetual stimulation. Finally the system breaks down.

The first prescription of the holistic approach is that the patient must not rely totally on prescribed stimulants to ward off his chronic fatigue. Non-pharmaceutical stimulants should also be discouraged; if the patient drinks four or more cups of coffee a day he should be told to limit himself to one.

Secondly, he should try to get off the excitement treadmill. His nervous system was not designed for it. Winston Churchill knew that; he took catnaps every day during World War II. Maybe it's time our patient took a vacation—not just any vacation but a restful one. Even a day at home might help. At least once a month I take a day off, make no commitments, take the phone off the hook, and let myself recoup.

Something I urge my patients to do is meditate for 20 minutes or so before breakfast and in the evening before dinner. This "healing silence" must be working, because many doctors tell me they are now meditating twice a day, with good results. It's a great way to do some psychological housecleaning, to let the mind settle down, and reduce stress and strain. I understand some corporations are starting to provide quiet space for meditation and relaxation. Employees come back feeling more refreshed than they ever do after coffee breaks.

Another thing to look at is the patient's nutrition and exercise habits. Many people suffer from fatigue because they are "sugarholics." Some overeat and some don't get enough protein, vitamins, or minerals. Needless to say, excessive drinking and any smoking at all should be firmly discouraged. Patients should be advised to exercise vigorously four or five times a week for at least 20 minutes and to do some stretching or yoga positions for flexibility.

A doctor has a tremendous opportunity to be a catalyst for health. Patients come to him because they are hurting; they're in a mood to listen. The most persuasive doctor, of course, would be an exemplar of good health: alert, confident, full of energy, free from excesses, satisfied with his work and the direction of his life, and at peace with himself.

*Dr. Bloomfield is founder of the Center for Holistic Health in San Diego and co-author of The Holistic Way to Health & Happiness (Simon and Schuster, 1978).*

(credit: MEDICAL WORLD NEWS/  
December 11, 1978)

## An Approved Drug!

*This is another in a series calling attention to monographs showing adverse reactions to prescription drugs. It is important that patients ask their doctors just what side effects they might expect and decide for themselves whether or not to use the drug. The adverse reactions to Valium are as follows:*

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**WARNINGS:** not of value in psychotic patients. Caution against hazardous occupations requiring complete mental alertness. When used adjunctively in convulsive disorders, possibility of increase in frequency and/or severity of grand mal seizures may require increased dosage of standard anti-convulsant medication; abrupt withdrawal may be associated with temporary increase in frequency and/or severity of seizures. Advise against simultaneous ingestion of alcohol and other Central Nervous System depressants. Withdrawal symptoms (similar to those with barbiturates and alcohol) have occurred following abrupt discontinuance (convulsions, tremors, abdominal and muscle cramps, vomiting and sweating). Keep addiction-prone individuals under careful surveillance because of their predisposition to habituation and dependence.

**PRECAUTIONS:** Observe usual precautions in impaired renal or hepatic function. Limit dosage to smallest effective amount in elderly and debilitated to preclude ataxia or oversedation.

**SIDE EFFECTS:** Drowsiness, confusion, diplopia, hypotension, changes in libido, nausea, fatigue, depression, dysarthria (disturbance of articulation), jaundice, skin rash, ataxia, constipation, headache, incontinence, changes in salivation, slurred speech, tremor, vertigo, urinary retention, blurred vision. Paradoxical reactions such as acute hyperexcited states, anxiety, hallucinations, increased muscle spasticity, insomnia, rage, sleep

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disturbances, stimulation have been reported; should these occur, discontinue drug. Isolated reports of neutropenia, jaundice; periodic blood counts and liver function tests advisable during long-term therapy.

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## My Case History

By Ben Krotin

*Although this article was written in 1960, Mr. Krotin sent it to CANCER FORUM this year. The material he used to cure his cancer could still be obtained if our Food & Drug Administration would allow proper clinical trials instead of hounding people who supply material. At a time when cancer has reached epidemic proportions, no logical treatment should be ignored or discredited without a thorough examination. It is certainly incumbent upon our government institutions to use their resources, financial or otherwise, to examine Mucorhycin without bias and with an understanding of how biological substances perform.*

*Mr. Krotin no longer lives on Vyse Avenue.*

This is the story of a Cancer of the Left Lung, from which I was supposed to die last year. Instead, I returned to work this year (1960).

My name is Ben Krotin and I live at 1698 Vyse Avenue, Bronx 60, New York. I will be glad to verify all the facts in this piece, should anyone who may be reading it want to question the following statements.

In May, 1959, I entered Bronx Hospital with a fever of 105°, pneumonia, and pleurisy. In June 1959, after two biopsies and 35 x-rays, my family was told I had cancer, that surgery was useless, and that I could not possibly live longer than six months, since the cancer had spread throughout my left lung. Meanwhile, I went from 160 to 130 pounds, was unable to digest an adequate amount of food, and I was incapable of speech.

My brother, Jack, desperately trying to save me, began research work of his own on independent methods for treating cancer. He first read "A MATTER OF LIFE OR DEATH," by Herbert Bailey. He communicated with the Independent Cancer Research Foundation in New York, which sent him literature on how Krebiozen could be ob-

tained by a doctor. Jack found it very difficult to get Krebiozen for me, so turned to another treatment which the Independent Cancer Research Foundation had written up in bulletin form. This was called Mucorhycin.

On June 19, I was taken out of the Bronx Hospital and entered a private hospital, where a new doctor gave me Mucorhycin, injections and capsules. By the time I left, on July 28, my weight had improved, my digestion had improved, and I was able to speak for many minutes without gasping.

Various members of my family, unable to believe my progress could continue, brought me to another doctor who stated: (1) "Improper Diagnosis." (2) "Your doctor is a quack."; (3) Krebiozen, Mucorhycin and Antineol are the works of mercenary quacks."

I got angry and asked: "Louis Pasteur, Dr. Semmelweis, Elizabeth Kenny, were they mercenary quacks?!"

Well, to return to the present, x-rays show a complete clearing of the lung which x-rays had originally shown to be filled with cancer. Nevertheless, I still take Mucorhycin, and thanks to Mucorhycin, I now work and play like any average 40-year-old.

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## X-Ray Registry

The human system is being bombarded with nuclear-medicine procedures and x-rays for dental and medical purposes without any records being kept on the amount of radiation exposure, although dangerous levels have been established. The U.S. Department of Energy, which controls occupational radiation, restricts doses to 3 rem a quarter or 5 rem a year to the whole body, gonads, red-bone marrow, and blood-forming organs. Licensed nuclear-medicine radiologists may not give a patient more than 1.25 rem in any quarter, or 5 rem in any year unless they know a patient's lifetime cumulative dose.

Dr. Leonard Kreisler, medical director of Reynolds Electrical & Engineering Co., Inc., prime contractors to the U.S. Department of Energy in the Las Vegas office of the Nuclear Underground Test Program, has proposed that a record-keeping system be established from birth to death to insure to the degree possible the safety of people exposed to radiation.



He points out that there are hidden areas of exposure to radiation which cannot be controlled: A coal miner can get radiation from gasses emitted in the mining process, or airline pilots are subject to cosmic radiation at high altitudes. Some examples of measurable radiation for you to make comparisons are: A four-scan skull series on a CT scanner uses a dose equivalent to the amount allowable for two years and a single dose of radioiodine for a thyroid scan is equal to 24 times the maximum annual allowable exposure.

Since the suggestion for a radiation registry might be debated to death or not considered at all, perhaps the reader might be wise and keep his or her own record. It should be easy to ask what the rems are of your dentist, radiologist or X-ray technician. *Remember, the maximum allowable radiation dosage is 5 rem per year!*

## Diet and Cancer Link

An official publication of the American Cancer Society states, "...colon and breast cancer show clear evidence of being related to nutrition and account for more than half of all cancers." This statement was made during the National Conference on Nutrition in Cancer held under the joint sponsorships of the American Cancer Society and the National Cancer Institute in Seattle on June 29, 30, July 1, 1978.

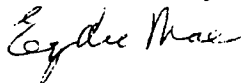
I believe, in time, it will be recognized that all cancers are caused by body dysfunction to which nutrition was one of the contributing factors.

## Letter . . .

Dear Ruth,

I just wanted to let you know that Arn and I are no longer connected with the Orthomolecular Research Institute in Santa Cruz. We left there last June and it is now being run by Tom Murdock. We wish him well in his venture.

Best wishes to you,



Eydie Mae Hunsberger

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## Recipes for Life

by Dr. Ann Wigmore

Dr. Ann Wigmore, who runs the Hippocrates Health Institute, has put together a recipe book to share with people how easily raw food meals are prepared, how delicious a raw food meal is, and how readily and simply raw foods can fit into any and every diet. Dr. Wigmore says, "Today there is such a great interest in health: these recipes will promote health, for all the ingredients really are Mother Nature in her most natural form."

On page 3 of this interesting recipe book is a comparison of protein from animal sources to one from plant sources: "Animal protein has to be broken down into simple amino acids before it can be reconstructed into human protein. In meat-eaters, putrefactive bacteria predominate and most of the meat rots in the lengthy human intestines, placing an excessive strain on the liver, which is not equipped for elimination of large quantities of uric acid and other toxic by-products of meat eating. These toxins are often absorbed into the tissue of the organism." In plant life, she says, "Much of the protein is already in a pre-digested state; this is especially true of sprouts and indoor greens, where most of the protein is in the form of simple amino acids. Furthermore, the protein in plants has the advantage of being free from nucleoproteins and therefore does not lead to the formation of uric acid in the system and does not encourage gout or rheumatism."

After reading Dr. Ann Wigmore's book, you will be convinced of the merit in making raw foods a very large part of your daily diet. The recipes are very different from what we are used to eating, and because they are so wholesome, they are conducive to restoring health.

If you have been struggling trying to prepare pleasant and appetizing meals, this book should solve your problem. It is packed with a great variety of dishes including salads, sauces, desserts, pies, candies, loaves, nut cheeses, raw soups and others too numerous to mention. The book is \$7.95 and can be ordered from FACT, Box HH, Old Chelsea Station, New York, NY 10011. Add \$.50 for postage and handling.

"The more you think you know, the more you'd better listen . . ."

N.W. Walker

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