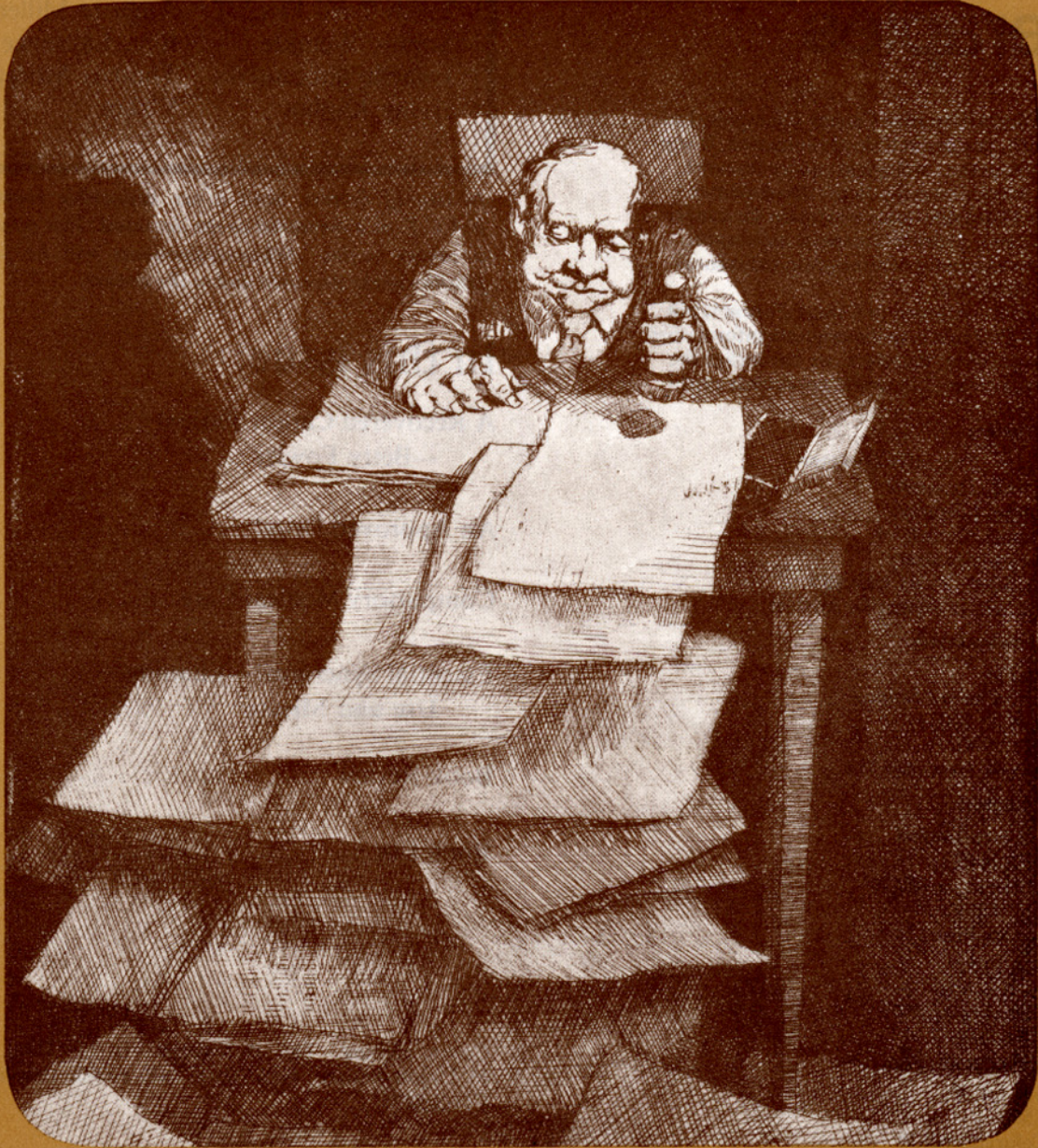


CANCER FORUM

PUBLICATION OF THE FOUNDATION FOR ALTERNATIVE CANCER THERAPIES, LTD.



The Bureaucrat

Hank Virgona



foundation for
Alternative
Cancer Therapies Ltd.

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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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A Recovered Cancer Patient — Betty Fowler



Following is a transcript of a tape of Betty Fowler, a recovered cancer patient, speaking at the Annual Cancer/Nutrition Convention of the Foundation for Alternative Cancer Therapies which was held at the Biltmore Hotel in NYC May 29th, & 30th, 1979. It has been edited in order to adapt it to a written presentation but it in no way changes the meaning of the material.

MC:

Betty Fowler was Director of the Leonard Fowler dancers in the Fowler School of Practical Ballet here in New York. A native of Chicago, Mrs. Fowler attended Straton Business College there and Columbia University in New York. She is married and has a daughter. She's been active in the Girl Scouts and has served in various administrative capacities in the fields of publication and dance. I suspect that Betty's most proud credential, however, is her successful struggle with cancer. She's going to tell us something about that struggle today. It is with my pleasure and pride to introduce Mrs. Betty Fowler. Please welcome her.

Betty Fowler:

My name is Betty Fowler and I want to make two points very clear. First, I'm not a doctor. I have no intimate knowledge of that field of medicine. I'm also not a nutritionist. But I do have a credential important to many of you here today. I'm a warrior in the battle of cancer. I'm a recovered cancer victim. I'm one of Dr.

Kelley's girls. I was diagnosed as having cancer eight years ago and to all of you here I hope I can be helpful with my testimony of the Kelley program.

When I first heard the three words, "You have cancer," I knew it would change my life. My first thought was, "I'm going to die." My second thought, which I shall never forget was, "Why, me?" I think only another cancer victim can know what it means to be told, "You have cancer." It is a sentence of death by painful means.

I was working and living here in New York City when I was diagnosed as having cancer. But first, I would like to tell you a little bit about my medical background; my experience with the medical establishment.

When I was 37, I had a partial hysterectomy. I was told I had to have it because I had a tumor that was quite large. The doctor said that it was necessary to have it removed, or else, well, he wouldn't guarantee what would happen. I was losing much blood during each menstrual period and I was feeling a little weak from it. I was urged to have the operation before it was too late. I was scared so I followed orders and had the operation. By the way, I remembered being prepared and sedated in the morning for the operation which was scheduled for 1:00 P.M. I remembered being wheeled into a long corridor and waiting and waiting and waiting for my turn in the operating room.

I was working and living here in New York City when I was diagnosed as having cancer. But first, I would like to tell you a little bit about my medical background; my experience with the medical establishment.

I was finally wheeled in at 4:00 P.M. At that time I was getting worried—concerned that I might not get the hysterectomy operation. Don't laugh. I had that fear because when I was 23, and pregnant, I was in the hospital for another operation. I was to have a pyelonoidal cyst removed and I can remember being wheeled up to the elevator and the nurse rushing up and saying, "Don't take her, you have the wrong patient. This girl does not need to have her gall bladder

out.” I was shaking even though I was sedated when I was wheeled back to the ward. About an hour later I was given another shot and then eventually I was wheeled back to the operating room. I was a ward patient at the time, and I remember annoying the doctor by asking him what he was going to cut. He said, “Don’t you think I know my job?” I said, “Yes, but I just want to make sure that you are going to give me the operation I am scheduled to have.” Because I knew, once under anesthetics, I was a victim of theirs. He assured me he was just going to cut the pyelonoidal cyst.

Now, back to the partial hysterectomy. I just wanted to tell you a little about that. After that partial hysterectomy I was discharged with a clean bill of health by the specialist and told I would feel like a new woman in three months. Three months passed but I did not feel better. I felt worse. I started passing gas. I began to feel very tired and acquired a new symptom in my life, constipation. It did not make me feel better to learn that the tumor removed was the size of a five-month pregnancy. I was, however, relieved to learn that a biopsy showed I had no malignancy. I asked the doctor, “Why am I so constipated?” He said it was o.k. for some people not to have movements daily or even weekly, as in my case. I felt logy. I felt rotten. I felt miserable.

Shortly after the hysterectomy, I went to our family physician with the complaint that I had pain in my abdomen. He examined me and was surprised to find a cyst in the former womb area. He asked me to return to the specialist on Park Avenue. I refused. I told our family doctor that I no longer had confidence in the specialist. I begged him to take care of me. After pleading, he did so. He removed the cyst in his office by cauterization. It took two painful office visits to remove the cyst, but I still felt rotten. I was fatigued a lot, and passing gas much more often. Sometimes it was even a joke in our family. We bought candles. We lit them. We kept them going all night. Not for an aura of romance, but so that it would not be so smelly in the house.

I also had attacks of other illnesses for which I went to the doctor, and they were diagnosed as myositis and facial neuritis. I continued to have pains in my abdomen and it was suggested that I had a nervous stomach. The family doctor thought, though, that some of my symptoms resembled a gall bladder in trouble, so I took the

test. Fortunately, my gall bladder seemed to be o.k.

I went to the dentist, and I had to go quite often because my gums bled every morning, often at night and sometimes during the day. I would be talking and people would look at me, I could see by the look on their face that something was wrong, I would go to the mirror and you could see blood coming out of my gums. My teeth were loose.

I was born in Chicago in 1925. I went to school and worked there until I was 20. I came to New York City to attend Columbia University. When I was born, I had a brown mole on my left cheek. When I was 14 the mole became a little larger and hair started to pop out of it. It did not hurt but I felt a throbbing sensation in the area. I saw a doctor, my uncle. He recommended electrolysis first. I went to the electrolysisist and had the hairs removed and the mole receded and my uncle said, “Well, leave it alone for now, but I want you to watch the mole all your life for any changes.” I also, as a child, had the so-called childhood diseases. I had measles, mumps, I had colds and sore throats and at 16 I even had a touch of pneumonia. And, of course, when I was 10 I had my adenoids and tonsils removed.

As I told you, when I was 23 I developed a pyelonoidal cyst in the fifth month of pregnancy. For two months I received X-ray treatments on a weekly basis. In my seventh month, as I mentioned, the cyst was cut and drained. One week before delivery, it had to be cut and drained again. But three months after giving birth to a baby girl I had an operation to remove the cyst. The cyst would not heal. It drained for 2½ years. I went from doctor to doctor here in New York City.

When I was 25 I went to Chicago to visit my family. They wanted to see the baby. And I saw a doctor there—he was a friend of the family’s. As I said, my uncle was doctor, who cauterized the area every day for a month. He told me to continue the treatment for another month and he recommended a doctor. I went there. I had it cauterized every day. The draining stopped, but shortly afterwards, I came down with mononucleosis.

When I was 39, that’s two years after the partial hysterectomy, the brown mole on my left cheek started to throb and enlarge. I saw a skin specialist and had the mole excised. A biopsy was performed. The diagnosis, lucky me, was “non-

malignant.” When I was 40 I noticed a small growth under my left breast. I saw another specialist and had the growth removed and biopsied. Diagnosis, lucky me, was “non-malignant.”

In 1968 my husband and I went to Russia to audit ballet schools there. Before going, I had a smallpox vaccination. My vaccinated arm, my left arm, ballooned and I ran a high fever for about four or five days.

When I returned in 1969, I saw a gynecologist for a check-up. This doctor recommended estrogen. He said, “You’ve had a partial hysterectomy. You need this.” I took the estrogen for three months. I stopped for two reasons. First, white spots developed on my thighs, and a growth developed under the arch of my left foot. The doctor said it was a tumor, and surgically removed it. This, too, was biopsied and declared non-malignant. At the same time the skin specialist removed some small growths on my face, my forehead, and my right wrist.

This same year I went with my husband to France where he was teaching in Cannes. The entire time there, three months, I felt ill. I came down with a fever. After about three days of running a temperature of about 104° to 105°, I saw a doctor. He came to see us where we were staying. The doctor said, “Ha, ha, you blue-eyed Americans cannot take the Mediterranean sun. But I will bring your fever down.” He gave me first a 600 unit shot of penicillin plus two antibiotics. My fever came down for three hours and he came back and said, “Aha. You see, I did a good job. You have no more fever.” He left and a few hours later I started to shake and perspire. I could not stop shaking. It was very bad. I thought I was actually dying. The fever returned in the morning and I decided to wait for help until I got back to the States. However, as soon as we left Cannes, I don’t know why, my fever disappeared. When we returned to the States, I found myself more depressed than ever. My gas was worse. It was constant and odorous. And I found that my eyes were deteriorating, and that bothered me a great deal. I could not focus. I could not read phone numbers or addresses in the telephone book. I was alarmed to find it difficult to read the newspapers.

Another thing happened. I began to suffer with muscle weaknesses and bad cramps. I can remember the cramps striking me at night while I was sleeping and waking me with such pain that I

would scream and wake up my husband and entire family.

Next, my chestnut brown hair began to turn gray and the texture changed from soft to brittle. Worst of all, my face started to itch 24 hours a day. If you’ve ever had a bad sunburn that hurt so badly that it started to itch, then you can understand what I went through. Nothing I took would stop this itching. Twenty-four hours a day. At times I thought I would scream from it. There was never any let-up. I could not tolerate any sunlight. The sun in my face and especially in my right arm felt as though they were being baked in an oven. If it was sunshiny out, I would not want to go out. I suffered with this itching face for three full years, going from doctor to doctor, from 1968 to 1971.

One doctor gave me a battery of tests. All I got after the battery of tests was a big bill, the statement that nothing was wrong with me and the suggestion that since I was getting older, I might not be able to cope with it. I should perhaps see a psychiatrist now. He said, “You need help with the aging process.” I was a little angry. I asked him to explain my face itch. He said, “I think it’s due to your overactive imagination.”

It was excruciating. That pain in my face—it was getting worse every day.

It was excruciating. That pain in my face—it was getting worse every day. I happened to see my dentist at that time and he said to me, over and over again, “I want you to see a specialist. I don’t like the way your face looks.” I said, “But I saw one the last time you said it.” “Go back and tell him your dentist said to mention it.” So I made an appointment with a surgeon who had previously operated on my face and done a good job, who had removed some of the growths on my wrist, and who had also removed the tumor under my left arch. He looked at my face and said, “It looks fine to me but I’ll take a tissue sample of your face.” And he jokingly said, “I don’t think you’re going to get your money’s worth, but we’ll do it.” He also burned some of the growth.

Well, about a week after I saw him, his office called. The nurse said, “We would like to have you come to the office with your husband, we have something to tell you.” Well, no one likes to hear bad news, so I said, “Well, what is it? Tell

me over the phone.” She said, “I can’t. You must come down with your husband.” So I came down with my husband and the doctor sat us in his office and said, “You’ve got your money’s worth. You have cancer.”

Now, I was really shocked. After all, hadn’t I had a lot of operations? Hadn’t I had a lot of biopsies and wasn’t it always true that they were not malignant? I thought I must be dreaming. I thought, “Wake me up, I don’t want to hear this.”

He said, “You must go into the hospital. It’ll only be for one night. We’ll do the surgery in the morning and you’ll go out that same day.” I said, “Well, if it’s not that serious a cancer, why can’t we do it in your office?” He said, “No, no, it’s a safety precaution. A good doctor does that.” So I went into the hospital, and I found out why I was there. For a condition on my face I had to undergo a series of X-rays and many other tests. They take your blood. All sorts of things. They take your urine and what have you. When I mentioned that I was concerned about the X-rays, and why they were taken, I was told, “This is hospital procedure. We have to do this. In my estimation those X-rays and other tests didn’t do me any good but they did hike up the bill.

In the hospital I had a section between my lip and chin cut. The operation was done with a local anesthesia. I got the results of this biopsy and it said, “Cancer.” But the surgeon said to me, “Your face is too tender to do anymore with it. You must go home. Let your face heal. It should be about 6 months and then call for an appointment.” I did not wait for six months. I called for an appointment four months later because I was in continuous pain. Not only was it itching, but I had intense pain. I could not even put my hand anywhere on my face. I would want to scream. But I did see the surgeon and he biopsied another portion of my chin which confirmed that I had cancer. He was concerned now that it was not only what they call basal cell epithelioma which was he told me, “a very simple cancer,” but that it could be melanoma. It could be even worse. “It may have metastasized.” he said. “You may have cancer in the mouth somewhere.” He did not know for sure. He recommended that I should see an oncologist, a cancer cell specialist whom he knew; especially one who is expert in chemosurgery. He explained the treatment to me. He said the cancer was,

“evidently, deeper than he had thought.” I would be under the care of this very well-known chemotherapy specialist. I was lucky. I would not have to be hospitalized for this treatment. But I would have to go to the hospital for five or ten days, every day just as if I were on a job from 9 to 5.

Special chemicals, he told me, would be put on my face and where an area revealed cancer, the specialist would cut. I cannot recall to this day whether the chemicals were supposed to turn green or whether they were supposed to turn purple. But I do remember that wherever they were put on, wherever the color turned green or purple, they would know where to cut my face. he went on to explain that if I did not heal, for example, if I had holes in my face, he knew of a very good plastic surgeon. For several reasons I decided not to follow this path.

First, the expense was beyond the means of my husband and myself. Secondly, I will confess—female vanity. I could not bear to think of going out shopping or going to work with a face any more mutilated with scars and lumps than I already had from previous facial surgery. I must mention here that after the second facial surgery, when the bandages were removed, instead of a scar, there was a big lump between my lip and chin. The surgeon quipped, “This is your cancer showing.”



My husband, who is an expert in photography, decided to take pictures of me. This is not the

worst showing of the blue blob, I call it that because my grandson called it that. I had two other pictures showing that they were even worse. But I was interviewed on TV in Tacoma and they kept the pictures.

I was assured by this skin specialist that this chemosurgery would definitely be the route to go. Now, in my family, on my father's side, I don't know about my mother's, I grew up watching two uncles, three aunts, and two cousins die of cancer. Each one had a different type of cancer. And as a child I used to marvel and wonder why doctors say, "Oh, you're going to get better. You will recover." They said that until the day they died. When this specialist said, "You will recover," I thought, "Oh, my god, I've heard that same phrase before.

The skin specialist said, "You must start immediately. You can't wait." And while I was in the office he started to make a phone call. And I said, "Wait, I can't go. We have our own business. I must make arrangements and I have other matters to take care of."

It took a while but I finally convinced him that I would call him back and let him know when I could start the chemosurgery treatment. I never did call him. But his office and he, himself, called my husband urging my husband to reason with me for my own good.

Right after receiving the black news, I called my husband at work and told him I would not be home. I would not be at our place of business. He wouldn't see me until I found another way to combat cancer. I told my husband that I was going to a health store. I had been there about six months earlier, and had gone in to get something—you see, I was beginning to wonder during that one year when I was following the medical establishment, maybe there was another way. And I had bought the Gerson book. I had read it and was quite taken with it and was very disappointed to find that the man was dead. So I went to this health food store which had often posted notices of health meetings of this organization. I went to the bookshelf and found a book called, "New Hope For Cancer Victims," by William Donald Kelley. I thought, "I'll get this." I scanned the book in the store while I was waiting for the customers to leave. The first four pages of the Kelley book got me very excited. Dr. Kelley described the symptoms a cancer patient has, and they matched mine—every single one, except for one, the hernia. I did not have that,

but I had another as replacement—my itching face. Now here are the following complaints I had while going from doctor to doctor for three years: flatulence, hot flashes (diagnosed as early menopause), tremendous fatigue, attacks of myositis in the face, neuritis, bleeding gums, pains in my abdomen and colon, sudden weakness of the eyes, muscle weakness and cramps, extreme mental depression and a sudden change in my hair texture and color.

I begged and pleaded with the owner of the health store to help me find a way to Doctor Kelley. I told her I knew she knew how to get that Kelley test. I was reluctant to tell her I had cancer, because when you say to someone, "I have cancer," people look at you funny. They look at you as if to say, "Oh, you're dead." So I did not want to confess this, but finally I just broke down and cried and told her, "I have cancer. I have just come from having a biopsy done." Then she gave me the name of the person to contact. She said, "Here is the phone number of Ruth Sackman. She's a beautiful person. She helps cancer victims day and night." At this point I went to a phone booth and called Ruth Sackman and made an appointment with her at 2 o'clock that afternoon.

I want to take a little time out from my story to tell you that without Ruth's support and generosity in giving information and knowledge and much time to help and explain this new approach to fighting cancer, I would not be here today. We went through a lot together. And my story is, indeed, our story.

A cancer patient on one of the many non-toxic programs goes through unusual symptoms. Frightening because they are not universally known. Scary, because you cannot consult a doctor about it. I had my first Kelley test in January of 1972. I found out from the Kelley test and from speaking with Dr. Kelley, that my cancer was painful from the beginning because it had started on a nerve. Many people do not suffer with cancer at first. They suffer towards the end as it hits the nerves. I also found that I had serious nutritional deficiencies. Dr. Kelley established a nutritional program for me.

All my life, until I started the Kelley program, I had not eaten food nourishing my body. Let me give you an example. I would wake up in the morning to go to work and have a cup of black coffee. I was tired. Before I'd leave, I'd have another cup of black coffee. I would get out of

I had abused my body most of my life and now that I was dislodging poisons which were trying to find a way out, I was going through reactions or flareups and all this was part of the healing process.

the subway and go to the coffee shop and ask for a container of coffee and take it up to the office. I would have coffee and finish it in the morning. Around 10:30 the coffee wagon would come around. I'd have some more coffee and maybe a cheese danish. At lunch time I would go out, if I was busy, and probably bring back a hamburger or a cheeseburger, maybe some french fries, greasy ones, and black coffee. this pattern of junk food eating went on all day, day after day.

I can't recall having a salad. I cannot recall drinking any juices and I must confess that my first sip of carrot juice did not taste good. It tasted bitter. It took a long time before it tasted rich and sweet.

Now, the Kelley program is not at all similar to any program devised by the medical establishment. For example, the enemas. At the very beginning and for about 6 months, I took enemas every two hours during the day and my husband got me up at 3:30 in the morning to give me an enema and he did this for a whole year. I couldn't get up. He used to push me out of bed—I could not make it.

Now, a lot of people are against enemas. But I've talked to some doctors. I talked to some here and I talked to some in Spokane. They do give enemas to terminally ill cancer patients.

I had also suffered with a great many migraines all of my life. I used to take a lot of aspirins. My husband used to say, "You really take too many." I took 2 to 4 every four hours. And then, after the hysterectomy, I started taking laxatives. I had to. I didn't know about enemas. Nothing would make me go.

Even while on the Kelley program, I spent one year following the criteria of the medical establishment. I wanted the miracle they write about. I wanted the silver bullet drug. Something that I could either swallow, or else a shot. Something that would make the cancer go away. I found out there was no silver bullet to combat cancer. The prescription for me was nutrition. I had diffi-

culty coping with the reactions of my body to the changes stimulated by the nutritional program.

You follow a program and you think you're going to feel well at once, but you don't. I did not feel better at first. I felt worse. I had more severe stomach aches. I had more gas when I first got on the program and I felt weaker than before. I was also more nauseous than before. My body ached. Every day was like living with flu-like symptoms. My brain felt sluggish. I often had a fever. I was still depressed, but from Ruth Sackman and Dr. and Mrs. Kelley, I finally got the message.

I had abused my body most of my life and now that I was dislodging poisons which were trying to find a way out, I was going through reactions or flareups and all this was part of the healing process. this is very important. I tell you all this because after I recovered from cancer, my brother came down with cancer of the stomach. My sister came down with cancer of the thyroid. One niece came down with cancer of the breast and insisted on going through a mastectomy and a year later it had metastasized. Another relative had lung cancer. My son-in-law even came down with lung cancer. I got them all except my niece on the Kelley program and they are well today. I still have difficulty trying to get the concept across with the one niece who has had a mastectomy.

Every single place where I was cut, an eruption came out—a big one, like a boil. It would get a funny white thing, not like a boil because I had those before I was ever on a program, too. And sometimes they would go away and sometimes if I would stop the program they would recede and through my own eliminative process and enemas and colonics, it would leave. I have got to find a good way to reach people to make them understand. "Don't panic. Stick with it." If you don't have faith, do it anyhow!

During this time, for example, I had a very offensive B.O. I had bad breath. I would look at my tongue and it was terribly coated and at the back I could see something like little hills, ridges or mountains. Most of them are gone.

I woke up one morning with terrible laryngitis. I looked into the mirror to check my coated tongue, and see what the big bumps on the back of my tongue looked like, when pop, the blue blob on my chin spit out pus and struck the mirror. It was very sticky . . . very smelling . . . The blue blob drained that day and the next and then

stopped. I recorded the date, January 3, 1973. Intermittently, until I was healed, the blob opened and drained. At one point, I broke out in a rash all over my face and body. That, of course, is another aspect of the healing process. You can break out in rashes. The last time I recorded the blue blob opening and draining was December 14, of 73. Around that time I saw our family physician. He looked at the blue blob on my face and said, "You know, that doesn't look like cancer. I think you've never really had cancer." I said, "Well, what does it look like?"

"But doctor, I've had three biopsies and they all said 'Cancer.'" And he answered, "The biopsies were mistaken." I said, "Three times?" He said, "Mistakes will happen all the time."

He said, "That's a sebaceous cyst." I said, I was just amazed, I could not believe him, I said, "But doctor, I've had three biopsies and they all said 'Cancer.'" And he answered, "The biopsies were mistaken." I said, "Three times?" He said, "Mistakes will happen all the time." I told him about the Kelley program. He said he'd have to read a study of hundreds of findings like myself before he'd consider the Kelley program.

The following year I saw Dr. Kelley for a retest. I asked him about the blue lump on my face. I asked him if I could have it removed now. He said, "Yes, you can, if you want to." He said, "It's o.k. now." So I went to a specialist in New York, and he said, "My goodness, that's the largest mucous cyst I've ever seen." I said, "Oh, I thought it was a sebaceous cyst." He said, "Who told you that?" I said, "Our family doctor." He said, "No, no, he made a mistake. But that's the largest myodox or mucous cyst I've ever seen." He asked me when I got it. I said I didn't remember and that was no lie, because I do not know when the cancer turned into a sebaceous cyst, or when the sebaceous cyst turned into a mucous cyst.

He asked me if his son, just returning from service and a doctor too, could come and see it. I agreed to this. It took three visits to this specialist to remove the cyst; it was that big. He gave me a note which I have here certifying that the cyst he removed on my chin was not cancerous. Isn't it

wonderful that my cancer changed? Isn't it wonderful what the nutritional program did.

I met my husband in the theatre. I was one of his students. I can remember his telling us in class, "Art is a very jealous mistress. It demands your all." And so does fighting cancer the nutritional way. It means work. It meant faith. It meant daily application of the biological principle as outlined *for me*.

It meant taking enemas, drinking carrot juice, and eating salads with plenty of greens. It meant eating fruits and vegetables. It meant taking supplements and stopping them when you begin to get toxic symptoms. It was very hard. It was very hard for me to follow what Ruth Sackman said. She said, "Listen to your body." But I must tell you; when you have cancer you don't know how to listen to your body. Your body is that diseased. So you have to find a way to know when you're toxic. Don't wait, as I did, if you go on the Kelley program.

It also means adhering conscientiously to the basic biological principles and not cheating. Many tell me, for example, that they cheat on the diet. They eat foods with additives and preservatives. I didn't. I started the nutritional program in February of 1972 and I've been on it ever since. I have a retest when indicated. My last test was great. Normal is 700. I have finally achieved that. My aim is to reach 1000, where one should be.

Four years ago my husband and I left New York City for many reasons. We exchanged, you might say, the tall beautiful canyons of New York, for the tall evergreens of Washington State. I go out every morning, about 5 o'clock to take our dog for a walk and I breathe in the air. It's good now. I also work full time.

I hope I've inspired those of you who might have cancer here to follow a good nutritional program, whether it be Dr. Kelley or some other non-toxic therapy. I hope my talk has given you strength, courage and faith to follow a nutritional program.

I hope that some day, I will not be alone up here—that there will be thousands of us.

I feel it's important to support FACT, because there's got to be an avenue for people who have cancer to have a freedom of choice. Rather than be bombarded with toxic X-rays, neutron rays, chemotherapy or surgery. Choose alternative non-toxic therapies.

Compulsory Medical Care by Clarence Darrow

"The efforts of the medical profession in the United States to control the treatment of human ailments is not due to its love of humanity. It is due to its love of its job—which job it proposes to monopolize. It has been carrying on a vigorous campaign all over the country against new methods and schools of healing because it wants the business, and insists that nobody shall live or die without its services.

"Whether it cures more or fewer people than the schools which do not use medicine, or whether it cures anybody, are debatable questions which I shall not attempt to discuss. I stand for everyone's right to regulate his own life so long as it doesn't infringe on other people's rights to do the same; and if a man wants to live and die without the aid of the medical profession, he should be permitted to do so. If he hasn't that right it is pretty hard to tell what rights he should have.

"Now I would have no quarrel with the medical profession if they would leave me alone. I am willing that they should advertise their wares, but I object to being forced to patronize them. They have specifics to prevent one from getting almost every disease, yet not one of them can explain how prevention is brought about—nor can he prove that it does prevent. They are not content to vaccinate those who apply to them, but they ask the State to compel everybody to be vaccinated. I might as well ask the State to compel everybody to hire me to try their cases!

"Sometime if they keep on—and they will keep on if the people give them a chance—they will be able to vaccinate us for everything and we shall be compelled to submit. I have watched this medical profession for a long time, and it bears watching. I know that there is not a single thing affecting human life that they will not lay their hands on if we give them the chance."

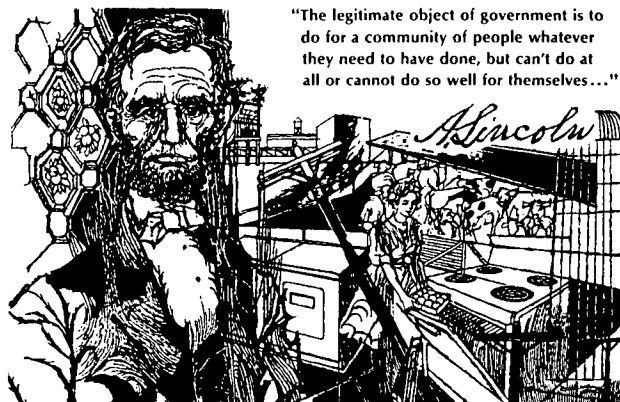
—CLARENCE DARROW

Editor's note: Many families have objected strongly to compulsory vaccination and fluoridation and rightly so. The argument that if some children aren't vaccinated it endangers the others,

is fallacious. If, as one supposes, the vaccination is effective, then those who choose vaccination are protected. This is simple logic, not hysteria. There is no way the unvaccinated children could affect the vaccinated children. Some parents feel that childhood diseases are normal for building the immune system, so they prefer the natural process to take place. In a book *Vaccination, the Silent Killer*, written by Ida Honorof and E. McBean, the authors make an angry protest against vaccinations as being more detrimental than helpful and causing more deaths than the disease itself. They present substantive evidence of their claims and encourage the reader to fight against any encroachment by the government into *control* of their health matters. The government's role should be *protection* of the public health, not control. There is a vast difference between the two.

The above article written by Clarence Darrow, the famed lawyer, was in defense of healing arts other than allopathic medicine, and protection of our rights to include our judgement in individual health matters. These rights should be taken for granted, but if we are not always vigilant, restrictions or impositions take place and then we have to fight to regain what was lost and to retain what we already have.

For those who want to restrict the state's compulsory medication, whether it be vaccination or fluoridation or any other interference in ones freedom to make his own choices, we suggest copying the above article and mailing it to your governor, your department of health and to your state representatives. Tell them you expect them to protect your interest. Copies should be sent to friends and relatives encouraging them to do the same.



Essential Synergism Vitamins — Use and Misuse

by Ruth Sackman

Would you be surprised if a vitamin deficiency was created because of the intake of too many vitamins instead of too little? Well, one can do just that by using vitamins improperly. Excesses are as harmful as deficiencies and overdoses deplete essential synergists causing imbalances.

With the greater appreciation that nutrition is important in maintaining and restoring health, it is wise to become more sophisticated about vitamin use. The more knowledge we gain in using them intelligently the greater benefit can be derived and possibly encourage more people and professionals to utilize vitamins in lieu of chemical medication. This would certainly be an improvement in reducing the many complications generated from drug-taking and drug interactions.

Dr. Royal Lee, one of the pioneers in the development of and interest in vitamins, became quite alarmed about the improper use of vitamins and the poor standards used to manufacture them. He spoke and wrote frequently alerting people to exercise greater care in using and buying supplements. One must bear in mind, as he did, the frequency with which vitamin supplements are ordinarily taken (usually daily, three times a day), therefore, it is important to know the nutritional factors which one is ingesting on this consistent basis and the quantity likely to produce the desired results, and to be sure the quantity is not an overdose likely to aggravate the problem one is trying to alleviate. *Imbalances in body chemistry can be caused by excesses as well as deficiencies.*

Dr. Royal Lee wrote in an article titled *The Fallacy of High Potency in Vitamin Dosage* "... Any imbalance is unwise. The only possible argument for higher intakes of any food factor would be to replenish reserve stores. There is ample proof that imbalances in vitamin intake are worse than deficiency."

"But there is another principle that is little known, and highly important to this question of dosage. It is the fact that many vitamins may cause, *in excess quantities*, the same symptoms as are caused by their deficiency."

"Vitamin B₁ in small doses can cure herpes zoster; large doses can cause herpes zoster."

Dr. Lee, in this same article, quotes from a book, *The Vitamins in Medicine* by Bicknell and Prescott published by Grune & Stratton, showing how overdose actually affects body chemistry—how Vitamin E affects calcium balance, how overdose exhausts an "essential synergist", leaving the body unable to metabolize the very vitamin being used.

He states, "a deficiency of B₁ causes symptoms similar to hyperthyroidism. An excess of the same vitamin causes similar symptoms." He quotes Dr. Clarence A. Mills, "The symptoms of B₁ toxicity resemble closely those of hyperthyroidism and at times become quite acute. Since thiamin has been held to be entirely non-toxic, and since it has attained such wide usage in both lay and medical hands, it seems that this overdosage toxicity should receive careful and immediate attention.' ... Thiamin has other disturbing toxic effects. It can cause gall stones, according to one report. It can cause fatty degeneration of the liver, and choline or lipocaic ordinarily effective in preventing such changes, is ineffective in this case. In some test animals, Dr. Barnet Sure reports, that only twice the daily requirements of thiamin for lactating mothers results in *sterility* if continued over two generations."

Dr. Lee writes about the toxicity of synthetic vitamin D, but that is usually understood by most vitamin users so there is no need to elaborate. But, his inclusion of vitamin E as potentially dangerous when used improperly needs to be taken into account. He states, "In a deficiency of E, there is a loss of bone calcium. In an excess of vitamin E, there is also a loss of bone calcium... Rats on vitamin E Deficient diets developed soft skulls, and again showed bone decalcification on an excess of pure tocopherols."

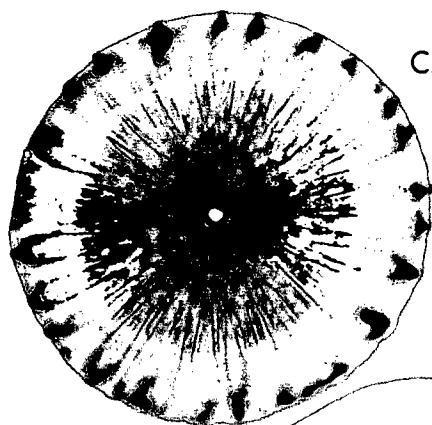
Vitamin K is another nutritional factor having a reverse action in overdosage. These phenomena take place because of the exhaustion of an "essential synergist" needed for metabolism. No one yet knows precisely what is required for the complete metabolism of our foods and it is this *unknown factor*, the depleted "essential synergist" that makes it impossible for vitamins to be metabolized. This is what causes the deficiency.

The reason one doesn't get a deficiency from the overuse of whole foods is that nature has provided the full complex of all the essential elements for full utilization. In taking a

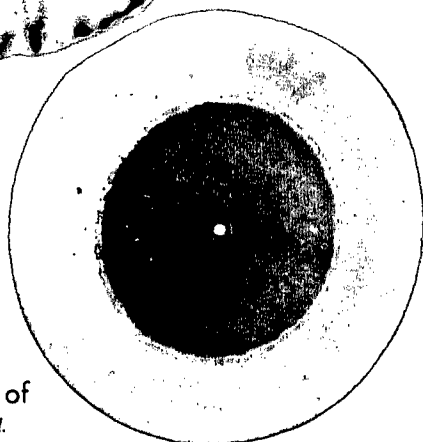
fragmented supplement, the body attempts to reconstitute it back into its required complex for proper synergism by drawing the missing ingredients from the body itself. The overuse of a supplement will eventually deplete the body of many of its essential elements creating a deficiency of those elements or creating a deficiency of the very supplement being taken because the body no longer has the "essential synergist" for its metabolism.

Vitamins manufactured of whole ingredients would be the safest because they contain both known and unknown factors. Fragmented supplements would need careful supervision. It is best to have a periodic medical evaluation to avoid serious health problems if you're on your own.

You may be interested in a vitamin deficiency test developed by Herman Baker, MD of the New Jersey Medical School and Seymour Hutner of Pace University in New York which provides a 12-vitamin measurement within five working days for \$75.00. This test is available through your doctor only. Dr. Baker can be reached at the New Jersey Medical School in East Orange, New Jersey. He'll provide your doctor with instructions for preparing the blood sample. His telephone number is 201-456-4664.



Chromatogram of
Natural Vitamin C.



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An Approved Drug!

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

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(doxycycline hyclate)

ADVERSE REACTIONS: Anorexia, nausea, vomiting, diarrhea, glossitis, dysphagia, enterocolitis, inflammatory lesions (with monilial overgrowth) in the anogenital region, maculopapular and erythematous rashes, exfoliative dermatitis, photosensitivity, urticaria, angioneurotic edema, anaphylaxis, anaphylactoid purpura, pericarditis, exacerbation of systemic lupus erythematosus, hemolytic anemia, thrombocytopenia, neutropenia and eosinophilia have been reported. Prolonged administration of tetracyclines may produce brown-black microscopic discoloration of thyroid glands. No abnormalities of thyroid functions studies are known to occur.

Bulging fontanels in infants and benign intracranial hypertension in adults have been reported in individuals receiving full therapeutic dosages. These conditions disappeared rapidly when the drug was discontinued.

A dose-related rise in BUN has been reported.



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Women and the Crisis in Sex Hormones

by Barbara Seaman & Gideon Seaman, M.D.

The Seamans have done a superb job of reporting on the possible side effects of synthetic hormones on women. After reading this book, and every woman who has ever taken synthetic hormones, Estrogen Replacement Therapy, or DES, or any woman who plans on taking any kind of synthetic hormone, should read this book, and after having read the book, she will think twice about taking the pill or Estrogen Replacement Therapy, or DES for any reason.

The preface of this book says, "If doctors were paid for keeping people well, instead of curing them once they are sick, our medical curricula would be quite different. They would include a more thorough study of nutrition, physical therapy, public health, and occupational medicine, as well as time tested home remedies."

To make us even more acutely aware that we must rely upon ourselves, the Seamans quote Dr. John Knowles, president of the Rockefeller Foundation, who said: "The next major advance in the health of the American people will result only from what the individual is willing to do for himself."

Back to synthetic hormones...in England, the *Lancet* reported on the Pill in 1969... "the metabolic changes associated with this treatment may modify biochemical processes in all body tissues. *More than 50 metabolic changes have been recorded.* The pill abolishes the normal menstrual cycle, distorts metabolism, and causes serious disorders in some users. The longer "a woman stays on hormones, the more each cell in her body is poisoned. Her sugar metabolism is altered, her blood fats, including cholesterol and triglycerides, resemble those of a coronary-prone middle-aged man. Their bodies become deficient in essential vitamins. There is growing evidence that the pill may produce infertility and birth defects.

The Seamans say women need not suffer from menopause symptoms, or fear of pregnancy. There are plenty of safe alternatives to hormones and the writers do a thorough job of listing these.

The first chapter is devoted to DES. Enough has been written about DES and how the daughters of some of the women who were given

DES by their doctors developed vaginal cancer as a result. A time bomb was planted in the fetus. And yet, even though it is well known that DES is carcinogenic, it is still being given today in the form of a morning after contraceptive. This known carcinogen is also in the meat we eat. "We are all chemically medicated to some degree with DES, without our permission and usually without our knowledge.", the Seamans tell us.

I was shocked to learn that some women who were given DES were never informed they were part of a highly controversial experiment. Some of the DES abnormalities not usually visible to the naked eye are: cervical erosion, abnormal mucosa, adenosis—considered a possible precursor of malignancy, and painful coitus.

The pill was the brainchild of Margaret Sanger. In 1962, when the pill had been on the market for a little over a year, Searle had a file of 132 reports of thrombosis and embolism among the pill users. The pill was not withdrawn from the market. In 1965, it became obvious that something occurs in the cervix of pill users, but the researchers were not sure what it was.

The list of side effects is lengthy. The *Lancet* reports, "...that if one looks closely at the study, it reveals that users and ex-users of the pill have a combined mortality from all causes that is 39% higher than the mortality rate of the control group."

Pill users grow so sun-sensitive that they get a rash just from light streaming in through a window pane. Spider veins, and bleeding under the skin are other dermatological effects, as well as monilial infections of the vagina. Skin cancer, including malignant melanoma, has been tentatively linked to the pill.

The Seamans say, "Research on a total of more than 65,000 women implicated the pill as a possible cause of cervical cancer. Pill users have demonstrated increase in nonmalignant cervical polyps; blistered, "eroded" areas, and dysplasias (cellular changes which some doctors consider malignant or premalignant)."

Other side effects are blood clots, strokes, altered sugar metabolism, depression (there is a higher suicide rate among pill users); blindness, when taken by diabetics, and a host of other problems.

Every woman should read this book, if only to be made aware of what certain drugs can do to undermine health. The Seamans do a great job of educating women on the dangers of oral contra-

ceptives and Estrogen Replacement Therapy. The book may be obtained at any book store, or by writing to the publisher:

Rawson Associates Publishers, Inc.
630 Third Avenue
New York, N.Y. 10017.

Recipe

ESSENE BREAD

Wheat berries	Green pepper, chopped fine
Parsley, chopped fine	Carrots, minced
Celery, chopped fine	Caraway seeds
Onion, chopped fine	Poppy seeds

Soak wheat berries in water 15 hours. Pour water off and allow wheat to sit until sprouted.

Put sprouted wheat through Champion juicer, vegetable chopper, or meat grinder.

Add seasonings and vegetables. Form into loaf or patties.

Bake in sun or warm place (70-90 degrees) until firm. It may be necessary to turn these a few times so that the under side does not get sticky. "Bake" about 12-24 hours. The longer they sit the more the flavors go throughout the bread.

Variation: Use raisins and dates instead of vegetables.

Reprinted from Eydie Mae's Natural Recipes.

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