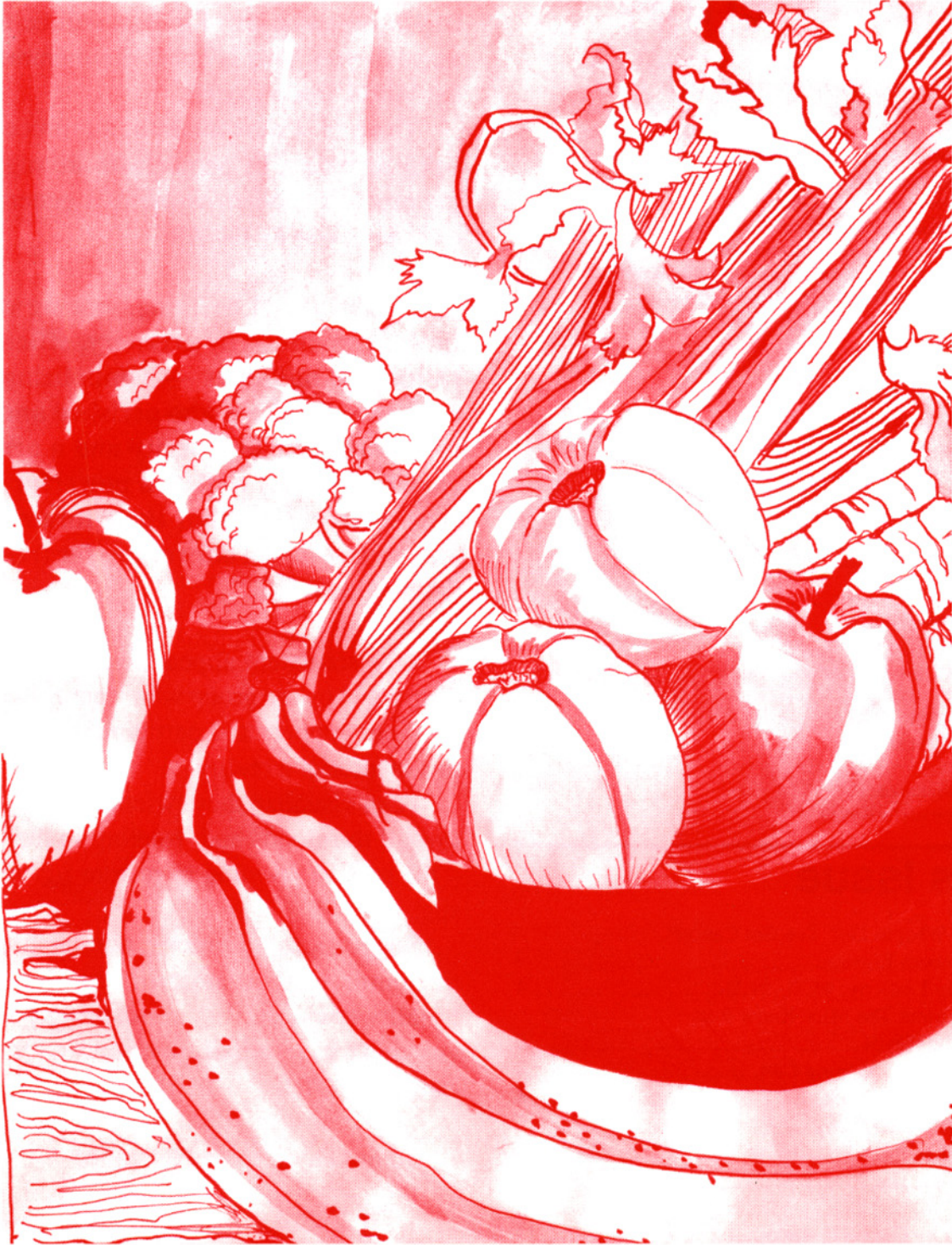


CANCER FORUM

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



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Cover by Vianey Cordova

One Dollar

Foundation for Advancement in Cancer Therapy

Foundation for Advancement in Cancer Therapy, Ltd. is a non-profit, tax-deductible organization. It supports and encourages biological cancer research, nutritional science investigations; disseminates information about non-toxic treatment for cancer to cancer victims; provides financial assistance; and fights to eliminate carcinogenic substances from the environment.

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In this Issue

What to Do? What to Do? I've Got Cancer!
by Dr. Kenneth Korrrins.....3

Potassium by LeoRoy, M.D., N.D.....4

Of Mice and Men: The Mice Know Best
by Consuelo Reyes.....6

GE Foods in Your Shopping Cart.....7

Ruth Sackman's Notebook.....8

Myths & Truths About Soy
by Weston A. Price Foundation.....9

Letters.....11

Recipes.....12

Book Review by Consuelo Reyes.....13

Tape List.....14

Book List.....15

Dear Reader,

I hope you will bear with me if I digress from the usual direction of the "Dear Reader" letter to bring you some very important information that I expect will be of interest to you. This is about the memorial at the World Trade Center.

There is a movement in the process of being organized by people who are suggesting erecting modern windmills generating electric power on the site.

"These would be living, soaring structures surrounded by greenery, office and residential buildings — symbolizing our reverence for those who perished and our commitment to prosperity and a healthy environment, as well as a powerful message to terrorists that their infamy has only strengthened our resolve for freedom from Mideast oil."

This statement appears on a flier being distributed by the group who want to encourage your support and participation to make this memorial a reality.

I can visualize these windmills reaching toward the clouds and rotating in the wind — the motion seeming to restore life to the site.

Suggestions, questions, comments, participants enthusiastically welcomed! Email: wtcwindmills@mindspring.com. (If you don't have email, just send a letter or card to FACT.)

To our environmental health!

WHAT TO DO? WHAT TO DO? I'VE GOT CANCER!

by Dr. Kenneth Korrens

The patient diagnosed with cancer today is confronted with an overwhelming amount of options and often confusing and contradictory information. As a physician who treats many patients who have cancer I am confronted daily with the dilemmas that these patients must come to terms with. I would like to offer some guidelines as to how to initially approach the diagnosis of cancer to help make the decision process a little more manageable.

The first and possibly the most difficult thing is not to panic. Any decision that is motivated by fear runs the risk of being seriously flawed. You cannot make a proper decision when you are in a panic state. It is not uncommon for the patient, once he is diagnosed, to feel that an immediate decision has to be made as to what course of treatment to ensue. The physicians involved in the patients care often reinforce this sense of dire emergency. The truth is that the cancer has been there for a very long time before it was discovered, often for years before it manifested clinically. Taking two weeks to adjust to the news and better understand what options are available in most cases will not alter the prognosis and is strongly advised in order to make a decision that you will ultimately feel comfortable with. (The exception to this is in instances when the patient is in imminent medical danger and a life saving emergency procedure must be performed.)

Most people who first learn they have cancer are diagnosed by a conventional doctor and are immediately sent to an oncologist or surgeon for treatment. While I strongly advocate that patients get oncological consults it is usually the case that patients do not leave the oncologist's office with a clear understanding of all their options and realistic expectations as to what conventional medicine has to offer. It is rare that oncologists themselves have any understanding of treatments other than radiation, chemotherapy and surgery and will generally discredit other modalities without adequately investigating them. In addition the patient will often walk away with an overly

optimistic picture of the potential of conventional treatments. This is a very unfortunate situation as the patient is all too often disappointed with results of conventional treatments and regretful that they did not investigate alternatives earlier in the course.

It is essential for the patient to be very clear about the medical terms used in relation to the treatments. For instance patients are often told that their cancers have an excellent response rate to a certain chemotherapy. To the patient this sounds wonderful and they may not see much difference between terms like response rate, disease free survival and overall survival. However from a medical/scientific perspective each of these terms are very different. A response rate simply means significantly shrinking a tumor for a period of time. It tells us nothing of how the treatment will impact on survival. In fact studies do not necessarily show a positive correlation between shrinking tumors with chemotherapy and living longer. How can it be that chemotherapy can shrink tumors and people do not live longer because of it? It must be understood that chemotherapy is a double edge sword. It is a potent cytotoxin and will very efficiently kill cells that have a quick replication time. Cells that replicate quickly are not only cancer cells but also include the immune system. Therefore, chemotherapy is as effective as a killer of the immune system as it is of cancer cells. In addition chemotherapy causes increased genetic mutations in cells. It is well known that the more genetically mutated a cancer cell is, the more aggressive it will become. At the end of chemotherapy you may have much fewer cancer cells (chemotherapy except in a few rarer cancers never seems to kill all the cancer cells) but these are now more aggressive cells and you also have a much weakened immune system. Remember that the immune system is supposed to fight cancer in the first place and now that is even more compromised than it was before the chemotherapy. Now the cancer can come back with a vengeance even though there might have been an excellent early response with the tumor greatly shrinking.

What are the alternatives? Many patients are lead to believe that there are no other alternatives other than these toxic treatments and feel that doing something is better than just waiting for the cancer to run its course. The truth is that there are many other options that offer hope and do not have the high toxic profiles and side effects associated with most chemotherapy.

From *TO YOUR HEALTH*

POTASSIUM

BY LEO ROY, M.D., N.D.

Early in his career Leo Roy, M.D., N.D. worked with Max Gerson, M.D., a maverick, at his clinic in Nanuet, N.Y. Dr. Gerson successfully treated cancer patients using metabolic concepts during the late 40s and 50s and authored a book, *A Cancer Therapy, Results of Fifty Cases*. An important element of the system was potassium/sodium balance. He found cancer patients potassium deficient so he provided supplementary potassium. Dr. Roy continued that same concept when he returned to his own practice in Canada. He prepared the information on these two pages for his patients.

WHY POTASSIUM IS IMPORTANT TO YOUR BODY

- Aids and maintains growth, healing and health of cells.
- Essential in making and using protein molecules.
- Restores and maintains muscle, energy reserves and endurance.
- Vital to nerve impulses; relaxes and controls nerves and insomnia.
- Calms and reduces tensions, hyperactivity, hyperexcitability, fast heart beat, palpitations, etc.
- Essential to muscle functions — controls cramps and pain.
- Balances and neutralizes excesses of body acids.
- Controls and detoxifies flus, gripes, colds, diarrhea and diarrhea-type dehydration.
- Offsets acid, burning stomach and acute indigestion.
- Helps avoid dryness of mouth, skin and hard stool.
- Slows down and blocks growth of fibroids and tumors (even in cancer).
- Counterbalances and is the natural antidote to sodium.
- Is part of the oxygenation processes of the brain.

Potassium is very soluble in water and suffers much losses from cooking and boiling.

SYMPTOMS INDICATING POTASSIUM DEFICIENCY

Usually a combination of several of the following:

- Poor or faulty functioning of nerves or muscles.
- Underactive reflexes — mental sluggishness.
- Uprightness and restlessness, hyper-irritable personality, reduced tolerance to stress and distress.
- Soft and sagging muscles,
- General apathy and loss of enthusiasm in living; weariness, mental fatigue and confusion.
- Loss of endurance and stamina and energy reserves.
- Depression.
- Tendency to sigh and yawn frequently.
- Prone to colds, chills, flus.
- Constipation.
- Insomnia; difficulty falling asleep.
- Irregular and fast heart beat; heart pounding.
- Mouth may be dry and throat tight and tense.
- Eyes tend to tear excessively.
- Cravings for an excess intake of sugars and alcohol
- Is associated with kidney malfunctions.

Therapeutic doses are available in a potassium food concentrate in the form of Organic Minerals and/or MinTran from Standard Process Products, or MinBal, from NutriWest products.

POTASSIUM IN FOODS

Nearly all vegetables, legumes, nuts and animal products contain adequate to generous amounts of potassium. So do some fruits. The following foods are sources of moderate concentrates of potassium:

All Root Vegetables

Beets and skins
Potatoes and skins
Carrots and skins
Parsnips and skins
Sweet potatoes and skins
Turnips and skins
Radishes and skins
Horseradish

All Vegetable and Greens

Asparagus
Artichokes
Beet tops
Cabbage
Cauliflower
Chicory Greens
Corn
Cucumbers
Dandelion leaves

Onions
Peas
Spinach
Swiss Chard

Berries

Blackberries
Blueberries
Raspberries

Fruits and Their Juices

Apples and juices
Grapes and juices
Grapefruit and juices
Pears and juices
Oranges and juices
Prunes and juices
Olives
Watermelon

Grains:

Oats
Rye
Millet
Durham wheat
Regular wheat
Fennel seeds

Nuts:

Black walnut
Cashews
English walnut

Miscellaneous

Eggs
Brewer's yeast
Garlic

These following foods are sources of the highest concentrations of potassium:

Name of Food	Content: Mg/100 gm	Name of Food	Content: Mg/100 gm
Dulse	8,060	Chestnuts, dried	875
Kelp	5,273	Wheat germ, raw	827
Cocoa (powder)	900 - 3,200	Chickpeas, dried	797
Blackstrap molasses	2,927	Lentils	790
Brewer's yeast	1,894	Almonds	773
Lima beans, dried	1,529	Raisins	722-763
Molasses	1,500	Parsley	727
Rice bran	1,495	Sesame seeds whole	725
Kidney beans	1,310	Brazil nuts	715
Peppers, hot, red, dry	1,201	Rice polishings	714
White Beans, dried	1,196	Filbert nuts	704
Wheat bran	1,121	Prunes, dried	694
Mung beans, dried	1,028	Peanuts/peanut butter	674
Red beans, dried	984	Lima Beans, fresh	650
Pinto beans, dried	980	Dates, dried	640-780
Apricot, dried	979	Bananas	625
Pistachio nuts	972	Watercress	606
Peaches, dried	950	Avocado	604
Prunes, dehydrated	940	Pecans	603
Sunflower seeds.	920	Yams	600
Figs, dried	900	Coconuts	588

OF MICE AND MEN: THE MICE KNOW BEST

by Consuelo Reyes

Spliced with alien genes for longer shelf life, proper plumpness, uniform size and color, the Flavr Savr tomato was the first genetically-engineered (GE) food to hit the market. Despite no long-term studies and consumer reticence, near euphoria spread throughout the food industry. A new age was heralded and our FDA, ever in step with the biotech industry, declared GE products "safe" and "substantially equivalent" to conventional foods and, therefore, in no need of regulation.

But even before the new tomato had been available in supermarkets, scientists had fed it to laboratory rodents who refused to eat it. When force-fed, the animals got sick. These facts were not made public at the time. In any case, the Flavr Savr was a commercial disaster because, despite all its hi-tech breeding, it lacked the essential characteristic — flavor!

None of this, however, dampened the fervor as companies from Western industrialized countries, especially the U.S., infiltrated the marketplace with scores of new GE foods. Slowly studies began to surface. A highly esteemed British scientist, Dr. Arpad Pusztai, reported harmful effects in rats fed GE potatoes, specifically damage to the kidney, thymus, spleen and gut of young rats. Dr. Pusztai subsequently lost his job and his status in the scientific community — a warning, in effect, to all maverick researchers to go with the flow or else!

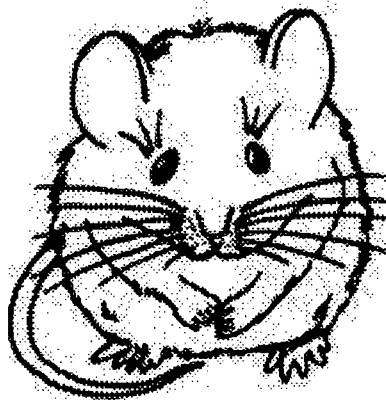
No doubt many independent-minded researchers were intimidated, but fortunately (as reported in the latest issue of the British monthly, *The Ecologist*), a 17-year-old Dutch undergraduate was not. Hinze Hogendoorn conducted experiments following basic scientific protocol which put the so-called experts to shame. He got 30 female six-week-old mice from the herpetology center and a supply of standard rodent mix — some Kellogg's and Quaker cereals, some oatmeal — all specified "GE-free."

He also bought some GE corn and soy. When the mice were let loose in large cages with the two piles of food — one GE, the other non-GE — the young rodents completely emptied the non-GE bowls, leaving the GE food untouched!

But Hogendoorn went further. He conducted a series of experiments to find out what would happen if the mice were force-fed GE foods. The results: one died, others ate more than normal but lost weight and exhibited odd behavioral changes. As Hogendoorn put it, the GE-fed mice "seemed less active," "more nervous and distressed" and "completely at a loss." "Many," he said, "were running round and round the basket scrabbling desperately in the sawdust, and even frantically jumping up the sides — something I'd never seen before." Meanwhile, the non-GE-fed control group ate less, achieved normal weight and displayed the usual mouse demeanor.

In the face of these findings, which received much play in the British press to the great embarrassment of the scientific establishment, the matter was essentially ignored by the American media and our FDA blithely goes on insisting that GE foods are perfectly fine and need not even be labeled as such! GE foods are now rife in our food supply (see list page 7) to a degree that is nearly impossible for the consumer to avoid.

Hogendoorn's work has added new fuel to the already fired-up anti-GE movement in Europe, which has gone so far as organized protests to uproot GE plants in the fields, boycotts of supermarkets and fast food chains selling the stuff. But Americans have been generally silent and compliant, in spite of their gut "yuk" reaction to the whole gene transfer concept. Perhaps it's time to turn that "yuk" into action on this side of the pond. Perhaps we need to exhibit some indignant behavior to our government "watchdog agencies" entrusted with the public health. Why not let your Congressional representatives and your President know that in the realm of genetically-engineered foods the mice know best! Aren't we humans as smart as our little quadruped friends, the mice?



GE FOODS IN YOUR SHOPPING CART?

Do you know which of these foods contain genetically-engineered (GE) ingredients? They probably all do. If you read every word on the package, you won't find any mention of these products containing genetically-engineered ingredients:

- Heinz Ketchup
- Hellman's Real Mayonnaise
- Kraft Miracle Whip
- A-1 Steak Sauce
- Frito-Lay Fritos
- Kellogg's Corn Flakes
- Ball Park Franks
- Famous Amos Cookies
- Bravos Tortilla Chips
- General Mills Total Corn Flakes Cereal
- Post Blueberry Morning Cereal
- Nabisco Fig Newtons, Oreos
- Healthy Choice Dinners
- Lean Cuisine
- Weight Watchers Dinners
- Carnation Instant Breakfast
- Loma Linda Meatless Chik Nuggets
- Uncle Ben's Rice
- Rice-a-Roni Rice Pilaf
- Bisquik
- Heinz 2 Baby Cereal
- Enfamil ProSobee Soy Formula
- Similac Isomil Soy Formula
- Nestle Carnation Alsoy Infant Formula
- Quaker Chewy Granola bars
- Bakers Unsweetened Chocolate
- Quaker Rice Cakes
- Pepperidge Farms Bread
- Thomas' English Muffins
- Nabisco Snackwell's Granola Bars
- Duncan Hines Cake Mix
- Hershey's Milk Chocolate
- Mound's Almond Joy
- M & Ms, Snickers, Milky Way
- Ultra Slim Fast
- Light Life Gimme Lean
- Aunt Jemima Pancake Mix
- Gardenburger
- McDonald's McVeggie Burgers

- Campbell Soups
- Ovaltine Malt Powdered Beverage Mix
- Betty Crocker Bac-Os Bacon Flavor Bits
- Old El Paso Taco Shells
- Jiffy Corn Muffin Mix
- Coca Cola
- Minute Maid Orange Juice
- Pepsi
- 7-Up
- Schweppes Ginger Ale
- Gatorade
- Hawaiian Punch
- Kool Aid
- Ocean Spray Cranberry Juice
- Tang
- V-8 Tomato Juice

* This list was compiled from Friends of the Earth and Greenpeace. Some companies may have changed their formulas because of consumer complaints..

The following is a list of genetically-engineered crops (and some of their common varieties and derivatives) currently approved for sale:

- Corn (corn oil, corn starch, corn flour, corn sweeteners and syrups, popcorn)
- Flax (flaxseed oil)
- Papaya
- Potato
- Soybean (soy flour, soy oil, lecithin, soy protein isolates and concentrates)
- Squash (yellow crookneck) Canola oil is produced from rapeseed which is genetically-engineered to reduce erucic acid which is too toxic for human consumption.

No long-term safety tests are required for approval of GE foods. No labeling of GE foods – crops or ingredients in processed foods – is required by the U.S. government. Even though parts of the world prohibit the sale of foods with GE ingredients, U.S. products are available worldwide. The lack of labeling means that, practically speaking, GE foods are nearly impossible to avoid anywhere in the world!

RUTH SACKMAN'S NOTEBOOK

Everything in excess is opposed to Nature.

—Hippocrates

When one is conditioned to think of cancer as a disease to be killed, destroyed, bombarded with x-rays, poisoned with chemotherapy, it is hard to conceive that the body needs gentle handling. Patients, and even practitioners, who adopt alternative systems, continue to treat cancer using the conventional medical concept of exterminating cancer cells by aggressive means even though that system can only buy time. The medical model doesn't correct the cause. The body developed the disease slowly; it can only get well at the pace at which the body can respond. To whip it into healing will only cause the organism to collapse from exhaustion instead of gaining ground which is the opposite of what the patient is trying to achieve.

In my association with some cancer patients, no matter how often a different concept of healing is explained to them, they continue to want to do everything they have read or heard about. They want to use as many therapies as they have become familiar with simultaneously. They are afraid if they forego one, it might be the very one that would produce the miracle. Unfortunately, *there are too many alternative therapies to choose from*. Patients are caught up in a momentum which is difficult to switch off. This mind-set is hazardous and it is too often the cause of failure.

I knew a woman, who usually attended every health event and listened to all the pundits on the radio. She developed breast cancer herself in spite of thinking she "knew it all." Since she was aware of the multitude of resources, she decided to embrace as many therapies as she possibly could — nutrition (metabolic program), Laetrile, Hoxsey, Essiac, cell therapy, et al.

One day she called and told me she could manage to get out of bed by lifting her legs with a towel and putting them over the side of the bed. Up to that point she had always left the impression with

me that she had everything under control and was doing very well.

When I heard this description of how she had to maneuver to get off the bed, I concluded something was amiss. She was not doing well. I thought she needed to see a doctor and suggested a referral.

The doctor called me after his examination to say that her liver was swollen. Was it any wonder? She had burdened the liver, the primary healing organ, beyond its capability. It was overworked! At this point she needed to discontinue all the overstimulating activity she had generated because of her limited understanding of the physiological reactions of the treatments. The key to benefitting from non-toxic, alternative cancer therapies is to understand the physiology of the body and how the therapies impact on the healing process.

At this point, instead of giving the body relief from overdoing, she decided to add still another therapy — immunotherapy, which, of course, only further stimulated the healing activity. This was a bad choice, a huge mistake! It was the most dangerous choice of all! Instead of giving the body the rest it needed, she did the opposite. She exacerbated the condition even more!

She started the immunotherapy program on Wednesday and died on Friday!

PROTECTING YOU

*Protecting You for that great force within,
Whose spring of life brings joy and
purpose forth,
That urges on the seeker to the win,
From climes of east or west or south or north.
The Healing Apparatus takes that force,
That calls its home life center in the brain,
Communicates that power from the Source,
To ev'ry cell connected to the main.*

*The Soul of life becomes that glowing gem,
That radiates that poise of life sublime,
To tribute all its strength back to the stem,
To that great Maker from the first of time.
May all those sonnets, these life poems here,
So guide you through, protect you,
bring you cheer.*

— Dr. Timothy Ross Whelan

Myths & Truths About Soy

Myth: Soy estrogens (isoflavones) are good for you.

Truth: Soy isoflavones are phyto-endocrine disrupters. At dietary levels, they can prevent ovulation and stimulate the growth of cancer cells. Eating as little as 30 grams (about 4 tablespoons) of soy per day can result in hypothyroidism with symptoms of lethargy, constipation, weight gain and fatigue.

Myth: Soy foods are safe and beneficial for women to use in their postmenopausal years.

Truth: Soy foods can stimulate the growth of estrogen-dependent tumors and cause thyroid problems. Low thyroid function is associated with difficulties in menopause.

Myth: Phytoestrogens in soy foods can enhance mental ability.

Truth: A recent study found that women with the highest levels of estrogen in their blood had the lowest levels of cognitive function. In Japanese Americans tofu consumption in mid-life is associated with the occurrence of Alzheimer's disease in later life.

Myth: Asians consume large amounts of soy foods.

Truth: Average consumption of soy foods in Japan and China is 10 grams (about 2 teaspoons) per day. Asians consume soy foods in small amounts as a condiment, and not as a replacement for animal foods.

Myth: Modern soy foods confer the same health benefits as traditionally fermented soy foods.

Truth: Most modern soy foods are not fermented to neutralize toxins in soybeans, and are processed in a way that denatures proteins and increases levels of carcinogens.

Myth: Soy foods provide complete protein.

Truth: Like all legumes, soy beans are deficient in sulfur-containing amino acids methionine and cystine. In addition, modern processing denatures fragile lysine.

Myth: Fermented soy foods can provide vitamin B12 in vegetarian diets.

Truth: The compound that resembles vitamin B12 in soy cannot be used by the human body; in fact, soy foods cause the body to require more B12.

Myth: Soy formula is safe for infants.

Truth: Soy foods contain trypsin inhibitors that inhibit protein digestion and affect pancreatic function. In test animals, diets high in trypsin inhibitors led to stunted growth and pancreatic disorders. Soy foods increase the body's requirement for vitamin D, needed for strong bones and normal growth. Phytic acid in soy foods results in reduced bioavailability of iron and zinc which are required for the health and development of the brain and nervous system. Soy also lacks cholesterol, likewise essential for the development of the brain and nervous system. Megadoses of phytoestrogens in soy formula have been implicated in the current trend toward increasingly premature sexual development in girls and delayed or retarded sexual development in boys.

Myth: Soy foods can prevent osteoporosis.

Truth: Soy foods can cause deficiencies in calcium and vitamin D, both needed for healthy bones.

Calcium from bone broths and vitamin D from seafood, lard and organ meats prevent osteoporosis in Asian countries — not soy foods.

Myth: Modern soy foods protect against many types of cancer.

Truth: A British government report concluded that there is little evidence that soy foods protect against breast cancer or any other forms of cancer. In, fact, soy foods may result in an increased risk of cancer.

Myth: Soy foods protect against heart disease.

Truth: In some people, consumption of soy foods will lower cholesterol, but there is no evidence that lowering cholesterol improves one's risk of having heart disease.

Myth: Soy isoflavones and soy protein isolate have GRAS (Generally Recognized as Safe) status.

Truth: Archer Daniels Midland (ADM) recently withdrew its application to the FDA for GRAS status for soy isoflavones following an outpouring of protest from the scientific community. The FDA never approved GRAS status for soy protein isolate because of concern regarding the presence of toxins and carcinogens in processed soy.

Myth: Soy foods are good for your sex life.

Truth: Numerous animal studies show that soy foods cause infertility in animals. Soy consumption enhances hair growth in middle-aged men, indicating lowered testosterone levels. Japanese housewives feed tofu to their husbands frequently when they want to reduce his virility.

Myth: Soy beans are good for the environment.

Truth: Most soy beans grown in the US are genetically engineered to allow farmers to use large amounts of herbicides.

Myth: Soy beans are good for developing nations.

Truth: In third world countries, soybeans replace traditional crops and transfer the value-added of processing from the local population to multinational corporations.

This information was obtained from the Weston A. Price Foundation, which is a non-profit, tax exempt charity founded to disseminate the research of Dr. Weston Price, whose studies of non-industrialized peoples established the parameters of human health. Dr. Price's research demonstrated that humans achieve perfect form and perfect health when they consume nutrient dense foods, i.e., whole, unprocessed foods indigenous to their environment. The Weston A. Price Foundation is the leading authority in the nutrition field. It is now in the process of expanding its influence by adding chapters around the country and seeking new members. If you are interested in additional information or want to participate, you can contact:

The Weston A. Price Foundation
PMB 106-380, 4200 Wisconsin Avenue, NW,
Washington, D.C. 20016
202-333-HEAL
website: www.WestonAPrice.org
email: WestonAPrice@msn.com

LETTERS

Greetings to you, dear Ruth,

It is always a joy to speak with you. I thank you for your immense generosity. We keep making copies of tapes and information packets and encourage people to consider this biological approach. It is so simple and hope-filled, but so often people are hanging on to their doctors' answers...

The tapes communicate so much of the person speaking, I think they help so much. I feel like we need to expand beyond the 10 or so we have and I just went over your listing and found so many I thought could be helpful. I hope this isn't too much!

May your book flow easily toward completion. Thank you for all the way you serve our endangered planet.

With love, Sister Miriam, Genesis Farm

Dear Ruth Sackman and staff:

Yours is a truly remarkable magazine; dedicated to helping people. I have saved every issue, and refer to them when a friend has cancer. Please renew my subscription, for which I enclose \$25. Can you even operate on this small amount? (My husband is cured.)

I have a missionary friend now with cancer. I am enclosing also \$25 for a subscription for him.

God bless you all, J. & C. S.

Dear FACT:

I am a forty-eight year old registered nurse. I work at Graham Regional Medical Center, a forty-three bed level IV trauma center in Graham, a small town in north central Texas. Although I work in a conventional medicine-oriented atmosphere, my real interest is alternative medicine. It is my firm belief God has provided healing through Mother Nature for every disease that might befall us — even cancer.

My goal is to work in an alternative medicine clinic. I have stacks of information off the internet about various clinics, but unfortunately for me living in Texas, they are mostly in California, Florida, Nevada or Mexico. I know Texas laws require many restrictions which may explain their non-existence, although the Burzynski Clinic has been in Houston for many years.

A large clinic or even a small doctor's office setting appeals to me, as long as it is in the alternative or holistic medicine field. Can you help? Do you know of any such clinics in Texas, or plans to build

them...even across the border in Mexico? All the clinics in Mexico are along the California border for some reason.

I would appreciate any information you could give me, such as names, phone numbers, etc.

I look forward to hearing from you.

Sincerely, G.C.

Edit. note: Perhaps a reader may have an idea that would be helpful for this job seeker.

Dear Mrs. Sackman,

I am enclosing a check for fifty dollars for renewal of your indispensable *Cancer Forum* bulletin.

I was much saddened to learn of the passing of Dr. Bernard Jensen. My wife and I have a fond memory of that marvelous and seemingly ageless physician addressing us in a dynamic and inspiring manner back in April of 1989. Alas, a later photo of him in the *Cancer Forum* a few years ago indicated that the weak and seated doctor may have suffered a stroke, so we were somewhat prepared for the news of his death.

All best wishes for health and your vital work.

Sincerely, J. & A. P.

Edit. note: Actually, Dr. Jensen did not suffer a stroke. It was a car accident. He had lost the use of his legs, but after long, arduous work with great positive determination the doctor did walk again.

Dear Mrs. Sackman:

It is with great appreciation for YOUR determination and motivational leadership at F.A.C.T. that I write this letter. I enjoy so much reading and rereading the previous issues of *Cancer Forum* you kindly forwarded and especially for their timeless messages.

Enclosed please find my contribution check of \$10.00 that I understand will include a subscription to *Cancer Forum*.

Meantime, please advise the cost of your Information Packet and when/where the next Annual Cancer/Nutritional Convention will be. I wish to attend with family members.

Sincerely, M.C.

Dear Mrs. Sackman,

Once again, you've held my hand and heart in wisdom and comfort. Thank you.

I know you receive many thank you's. I wish to go a step further with a small appreciative gift. I'm not familiar with your decor or tastes. However, I know you must become weary at times, so perhaps you can rest and enjoy a pretty silken pillow for your head.

Eternal affection, L.M.

RECIPES

Barley and Yogurt Soup

- 1 cup finely chopped onion
- 1/3 cup pearl barley
- 3 cups chicken or vegetable broth
- 3 cups whole plain yogurt
- 2 tablespoons finely chopped mint plus some chopped mint for garnish

1. Put onion, barley and broth in a saucepan, cover and bring to a boil. Simmer about an hour or until tender.
2. Cool the soup, then refrigerate. When thoroughly cold, stir in the yogurt and two tablespoons of mint. Chill. Before serving sprinkle a little chopped mint on top. Yield: six servings.

Mint Chutney

- Juice of 2 limes
- 1 clove garlic, peeled
- 1 piece fresh ginger, about 1 inch long, peeled and coarsely chopped
- 1 cup whole, plain yogurt
- 2 cups fresh mint leaves, washed and well dried

1. Pureé in a blender: lime juice, garlic, ginger, yogurt and honey.
 2. Remove mixture to a bowl. Stir in mint leaves by hand.
- Serve with lamb, fish or other meat dish. Stores in refrigerator 2-3 days.

Warm Greek Potato Salad

- 1 1/2 pound potatoes
- 2 medium, firm, ripe tomatoes, diced
- 1 large cucumber, cut into 1/2-inch chunks
- 1 large red onion, coarsely chopped
- 1/3 cup extra-virgin olive oil, Greek, if available
- 4 tablespoons lemon juice

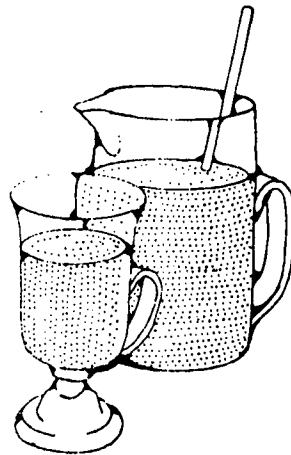
- 3 tablespoons fresh oregano leaves or 1 teaspoon dried

1. Place potatoes in pot with just enough distilled water to cover. Bring to a boil and simmer until just tender. Remove from pot and let cool enough to handle. (Save cooking water for broth.)
2. If potatoes are organic, do not peel. Slice and put in a serving bowl. Add tomatoes, cucumber and onion. Add olive oil and lemon, oregano and toss gently. Serve within an hour to retain warmth. Makes 10 servings, about 1 cup each.

Hibiscus Cooler

- 3 cups hibiscus tea, steeped at least 30 minutes
- 1 cup orange juice
- 1/4 cup lime juice
- 1-3 teaspoons finely grated ginger or ginger juice
- 2-4 tablespoons raw honey, to taste
- Fresh mint leaves (optional)

Combine all in a pitcher. Serve chilled or over ice, garnished with mint. 4 servings.



Carob Velevet Mousse

- 2 cups ricotta cheese
- 1/2 cup nut milk, e.g., almond milk
- 2 teaspoons pure vanilla
- 1/2 teaspoon cinnamon
- 2 level tablespoons carob powder
- 2 tablespoons raw honey

Combine all ingredients in a blender or food processor. Pour into individual bowls and chill for at least an hour before serving. Makes 4 servings.

Cold Fruit Soup

In a blender, pureé seasonal ripe fruit such as peaches, blueberries, strawberries or melons. Add enough fresh fruit juice to make "soup." Season with minced fresh ginger or cinnamon and top with a dollop of plain yogurt and a sprig of mint.

Book Review by Consuelo Reyes

***Peace, Love & Healing* by Bernie S. Siegel, M.D., 1998 (HarperPerennial, New York, pp. 288), \$14.00.**

Would you do a favor *you really didn't want to do* for a friend who asked you to?

According to Dr. George Solomon, a researcher looking into the links between emotional patterns and disease, a "no" answer — far more than any other personality trait — is a significant predictor of long-term survival.

This is just one of the many fascinating and functional facts in *Peace, Love & Healing* by Bernie S. Siegel, M.D., the well-known, love-exuding surgeon and early proponent of the critical mind/body healing connection. This paperback edition is actually a reissue of his 1989 book of the same name, with an updated introduction, and it is well worth a revisit.

There's little dispute today that there is a typical cancer personality. As Dr. Siegel puts it, "they're the people who always tell you they're fine, no matter how they feel. When you ask 'What's wrong?' they say 'Nothing.'" In short, denial, repression, alienation leading to a sense of loss, depression — and the stage is set for disease. Bernie's prescription in a nutshell: learn to become your authentic self; love and honor who you are, what you feel and you give the body the opportunity to normalize and unleash its amazing healing power.

The book abounds in lighthearted as well as poignant lessons on how people have overcome emotional roadblocks. There's the woman with metastasized cancer of the cervix who was near death. When her much despised husband suddenly died, her condition took a dramatic turn for the better and she proceeded to completely recover. Cases like this are usually called "spontaneous remissions," but Bernie knows better: he's found that "over 90% of these healings occur after a significant change in life." This is not to suggest, he notes, that husband elimination is a cure-all, but rather that life events and *how we look at them* do profoundly affect healing.

Then there's the woman with a 6 month-to-live cancer prognosis who decided death was okay. She rejected the urgently recommended conventional

treatment, much to the distress of all those around her. Sure of her convictions, she just went about trying to make every day as good as possible — a mindset that led to quitting smoking, mending relationships, changes in diet, exercise, etc. She ended up far outliving her terminal diagnosis!

The author is so full of hope, enthusiasm and concrete examples, I found myself a little overwhelmed at times and wishing he might pare down the prose a bit so I wouldn't miss a real gem. One such treasure I seem to have immediately incorporated for myself is his "we'll see" attitude. Our tendency to pass judgement on events as either "good" or "bad" sets in motion a whole range of psychological and physical reactions that can affect body function. But, as Dr. Siegel says, no one can know the future. Adversity can be an opportunity. Who are we to decide? Instead, he suggests a "we'll see" approach: when things happen, don't judge, just say, "we'll see." I find myself now replacing my "Oh dear" or "Good Grief" with a "hmmm, let's wait and see." It feels like a huge weight lifted off — who knows, maybe something good is just around the corner? The body relaxes — balance restored.

A large portion of the book, however, tells of patients who, because of their good mindset, were able to endure the extremely toxic effects of chemo and radiation and perhaps exceed the expectations of their original dire prognoses. Dr. Siegel is, after all, a conventionally-oriented physician whose work with mind altering techniques has been largely to the benefit of those undergoing conventional cancer therapies. So it's clear where his faith lies.

This is an area where FACT would have to part ways with the good doctor. He's absolutely on target when he states that, whatever the treatment, the patient with peace of mind will do better. But how much greater the outcome might be if a body already overburdened by cancer were not subjected to the additional abuse of toxic protocols which, after all, only seek to kill cancer cells without repairing the body that produced them. Why employ all those wonderful visualization, meditation, relaxation techniques to help make the pain and side effects more bearable or death more acceptable, when the same methods in conjunction with a carefully-designed, non-toxic metabolically-sound approach might actually bring the patient to true recovery?

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