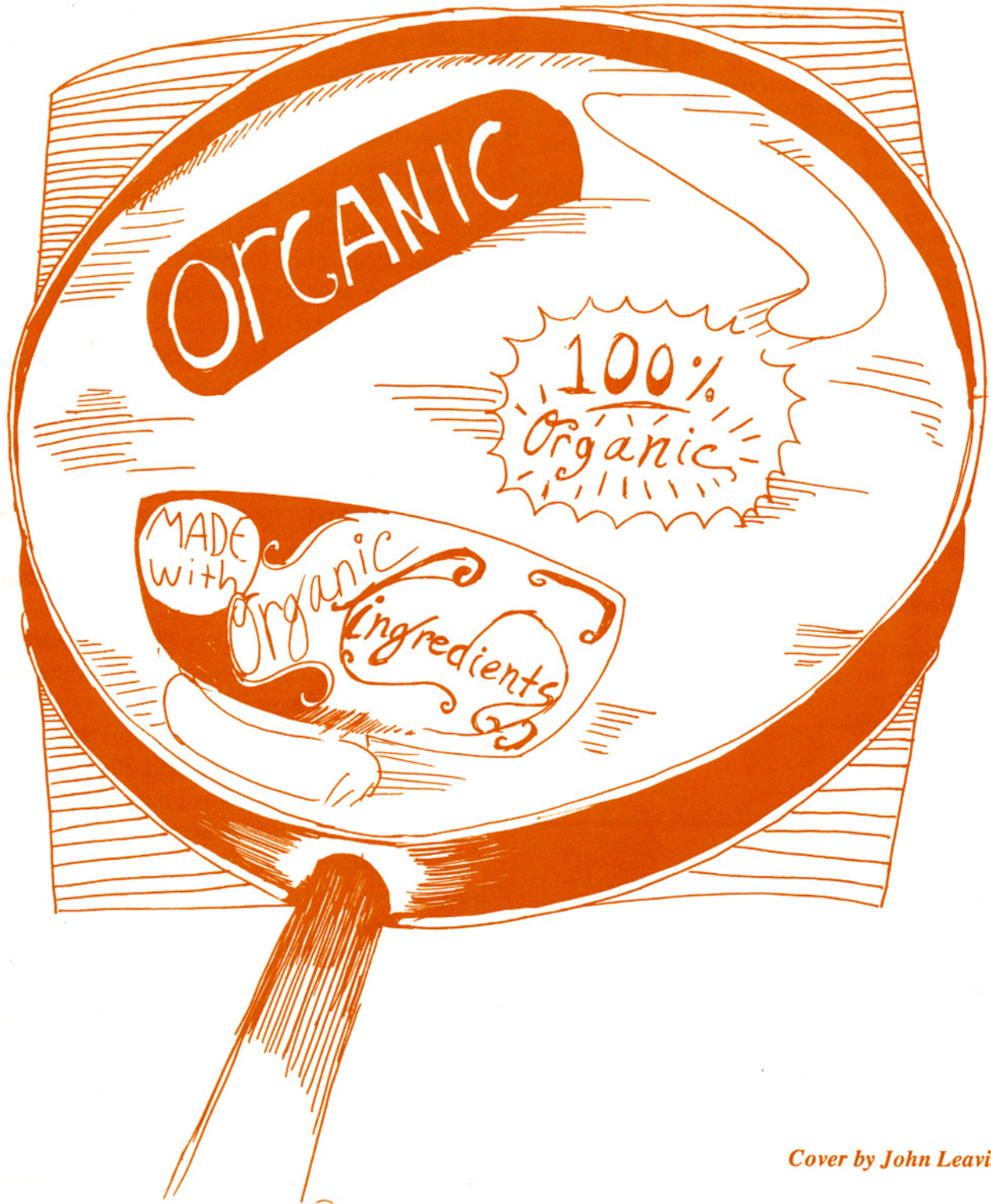


# CANCER FORUM

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



*Cover by John Leavitt*

# 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 patients; provides financial assistance; and fights to eliminate carcinogenic substances from the environment.

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Dear Reader,

The health industry has grown into nearly a 20 billion dollar a year business. Traditional food suppliers want to participate in this largesse which I think is a good thing. But, we have to ask: "Will they understand and maintain the same standard that we have become accustomed to?" It is going to be up to us to be aware of these changes and be the watch dogs of the industry.

You will find on page 6 the changes in labeling organics which might be confusing until we become accustomed to them.

There is another challenging change that is difficult to understand at present but may become clearer in time. Julia Irons, head of the V. E. Irons Company, a company that produces high quality, natural food supplements under the Sonnebrand, Vitratox and Veico labels, sent me a list of health-oriented companies that have been sold to some of the conventional food processors. Following is a partial list:

General Mills owns Small Planet Foods and Cascadian Farms.

H. J. Heinz owns 20% of Hain's which owns Westsoy, Celestial Seasonings, Health Valley and, Terra and Earth's Best Baby Foods.

Kelloggs owns Worthington Foods.

Nestles owns Power Bar and other labels.

Procter & Gamble owns Energy Drinks.


Unilever owns Ben & Jerry's.

Kraft Foods owns Balance Bars and Boca Burger.

Royal Numico NV Zoetermeer of the Netherlands owns GNC stores, Thompson Nutritional Products, Richardson Labs, and others.

We want to be sure that we are still getting the same quality and purity with the new changes.

Caveat Emptor,



# An Attitude Toward Fevers

Phillip Incao, M.D.

*Philip Incao received his M.D. from Albert Einstein College of Medicine in New York City, and then studied Anthroposophic Medicine in England and Switzerland. He practiced family medicine in Harlemville, NY for 23 years, then in 1998 moved to Denver and now has a medical practice there. Dr. Incao also travels extensively, giving talks on his approach to children's health. This interview is reprinted from the John Lee Medical Letter (JLML), edited by John R. Lee, M.D., a long time friend of FACT who did groundbreaking work on the problem of hormonal imbalance so common today. He is author of several books, including Natural Progesterone, available on the FACT Book List.*

**JLML:** Dr. Incao, can you give us a thumbnail sketch of what Anthroposophic medicine is?

**PHILIP INCAO:** Certainly. Anthroposophic medicine is an extension of Western medicine based on the teachings of the Austrian scientist and philosopher, Rudolf Steiner. It takes into account not just the physical body, but also the spirit, the soul, and the life force or "chi" of the human being, for example. All of these aspects of the human being affect each other, and we need to consider all of them in healing. I've used these principles in my practice for over 25 years, and I've found them to be wonderfully effective and gentle.

**JLML:** One of the hallmarks of your treatment approach is that fevers are beneficial, and that by suppressing a fever with Tylenol or antibiotics, we're often doing a child more harm than good.

**PI:** That's very true. We have a tyranny of fear in the U.S. about fevers and infections, which is understandable. At the turn of the century many children died of pneumonia, scarlet fever or whooping cough. Parents are overanxious to lower a fever, and assume that when it goes down the child is healthy, which is often not the case.

We have a mindset that says it's bad to have an illness, and that health is the absence of illness. This isn't always true. Fever is the healing flame, the great cleanser of the body, and a critical part of developing a child's immune system. An immune system that is vigorously exercised in childhood is a much

stronger and more able adult immune system than one that has been suppressed since birth with vaccinations, antibiotics and fever-reducing medications. The "use it or lose it" adage applies well here.

**JLML:** Why do you think it is that children have more fevers, and higher fevers than adults?

**PI:** Childhood is the time of most rapid growth and dramatic change, and a child will remodel and renew his body many times as he grows. Every remodeling job requires some demolition, a breaking down of old cells and tissues which results in debris, which must be cleaned up before the body rebuilds itself. The immune system pushes the debris out of the body. That is why children so often have more discharge of mucus and pus, because their immune systems are actively working. This is great! If you suppress fever or the discharge, the debris stays in the body and becomes a poison, or may cause allergies or other chronic problems.

Germs don't really cause illness, they feed on them. Every childhood inflammation, every cold, sore throat, earache, fever and rash is a healing crisis and a cleansing process, a strong effort by the human spirit to remodel the body so it can be a more suitable dwelling.

**JLML:** Wow, that's a different and beautiful way to look at a process that every parent goes through seemingly endless times during childhood.

**PI:** It's amazing what a different attitude toward a fever can do for a child's healing process. They seem to intuitively know this is something they need, and they don't suffer as much from a fever as an adult does. It's not at all unusual for me to see a child with a fever, happily playing, that would have put an adult in bed.

**JLML:** But that doesn't mean they should be running around outside, right?

**PI:** Oh no, definitely not. This is a time when the child should rest, and it's extremely important for them to stay warm. My general rule of thumb is to dress them warmly enough so that their cheeks are rosy and their hands and feet are warm, but there is no sweat or perspiration. The body needs to be hot to burn out the illness. If the body is harboring a lot of toxicity, then a discharging fever with a runny nose, vomiting, or diarrhea for example, could be just the housecleaning that the body needs. The discharge is a sign that the fever and inflammation pro-

duced by the immune system is “digesting” toxins and releasing them. Most people are actually healthier after they've had a fever.

**JLML:** So much for germ theory!

**PI:** In its time, germ theory was a great revelation. The discovery that bacteria could influence the course of illness helped us create a whole new level of public and private hygiene, which has given our immune systems much less work to do in some respects. But germ theory is very limited. There was an article in *Scientific American* way back in 1955, titled, “Second Thoughts on the Germ Theory,” about the observation that everyone harbors disease germs, but not everyone is sick. The conclusion was that whether or not we get sick depends on the condition of the host — your body — more than it does on the germs.

So we've known for a long time that germs feed on disease and weakness, they don't directly cause it. That's why I prefer the word “inflammation” to the misunderstood and misleading word “infection” which strikes so much fear into people's hearts. In the case of inflammations involving germs, the germs are doing us a favor by helping to cleanse the body.

**JLML:** We've been so conditioned to think of fevers as dangerous, how does a parent know when it's serious?

**PI:** Even mainstream medicine agrees that a child's fever would have to go over 106.5° before there is even a risk of brain damage, but most parents think that the magic number is 104°. Our culture is “fever-phobic,” a term coined by Barton Schmidt, a professor of pediatrics at the Children's Hospital in Denver.

A typical parent will give a child a fever-reducing medicine if the temperature is one degree above normal. What that does is send whatever was trying to come out of the body into “deep storage.” Nothing has really gone away, and it will either simply recur or worse, may reemerge as a different, more chronic illness anywhere from weeks to years later. A good example of this is the repeated earaches children get when the first earache is not really healed but is only suppressed by an antibiotic. Although they can be lifesaving when really needed, when given unnecessarily, antibiotics actually weaken the immune system.

**JLML:** What about febrile seizures? The great fear of every parent is that their child will run a high fever and have a seizure.

**PI:** This is another example where parents have been unnecessarily scared out of their wits. The first misconception is that a febrile (fever-caused) seizure, also called a fever convulsion, is directly caused by a high fever. This isn't totally accurate, because 99 percent of kids have a high fever and don't get a seizure, and kids who do get a febrile seizure often don't have that high a temperature. A seizure is caused when the fever rises very rapidly, often before the parent even knows it's there. Some children will get a febrile seizure because the body doesn't go with the flow of the fever warmth surging through it. This often happens when the hands and feet are too cold and the fever gets “stuck” in the head.

The other misconception is that febrile seizures cause permanent brain damage — they don't. Generally, if a convulsion has not occurred in the first 24 hours of the fever, then it is not likely to occur.

The best way to avoid a fever convulsion is to keep the child warm and give plenty of fluids, so that the heat of the fever can circulate throughout the body. If the child is throwing off the blankets, at least keep the belly, legs, and feet warm.

**JLML:** When should a parent see the doctor about a fever?

**PI:** I don't have a set answer for that question. It depends on the parents, the child, the doctor, and the specific details of the illness. Once my patients have gone through a few fevers with their children, I rarely hear from them unless the fever looks like it might go above 104°, but every parent has to use their judgement and intuition.

**JLML:** Can our readers contact you?

**PI:** Yes, they can call my office in Denver at (303) 321-2100 or send e-mail to me at [drincao@aol.com](mailto:drincao@aol.com). There's a Home Remedy Kit I recommend for the common inflammations of childhood with a dozen remedies I've used for 25 years with excellent results.

*For subscription information on the John R. Lee, M.D., Medical Letter, the number to call is 800-528-0559 or 602-252-4477 or you can visit the website:*  
[www.johnleemd.com](http://www.johnleemd.com)  
email: [info@johnleemd.com](mailto:info@johnleemd.com)

# Recovery from Crohn's and MS

My name is Leslie Howlett. I am 40 years old, married, with two great kids — Katie, 15, and Mike, 13. For most of my adult life I have had health issues. I have been diagnosed with Crohn's disease (July '91) and Multiple Sclerosis (April '99). Dealing with Crohn's disease was made temporarily better after a bowel resection and being put on anti-inflammatory medication, however there were always problems with weakness and malnutrition, which has also resulted in severe osteoporosis. When I was diagnosed with Multiple Sclerosis my husband and I were devastated and my children were very frightened. I was told by my family doctor that I could see the best neurologists in the country at an MS clinic in Boston. There I was told MS is progressive, crippling and there is no known cure. I was offered Prozac to deal with the anxiety and a new drug, Copaxone, which I was told slows the progression of MS in some people. I left the hospital in a state of shock. I couldn't believe this was my life. I couldn't believe I was going to end my days in a wheelchair. This was the best the medical community had to offer and after I cried for about a week, I decided I was going to find a better way.

After doing a lot of research, I decided I would approach the management of my health with a raw food and juice therapy diet and colon hydrotherapy. I began working with Carol Facella, C.N., Kittery, Maine in June of 1999. I understood the philosophy of putting only easily digestible nutrients into my body and cleansing out waste and toxins during colon hydrotherapy. Food was to be my medicine. Colon therapy would aid my compromised digestive system. Before I started my new life-style I was only 118 pounds at 5'10." I constantly felt tired and weak. Sometimes I would fall into bed at night exhausted, afraid that my body was too tired to keep breathing through the night. I had recurring bouts of optic neuritis and vertigo. I had trouble holding my urine. I would wake up and not be able to feel my arms or legs. I constantly had the sensation of bugs crawling up my legs or a hair across my face.

Then I would have episodes when I would lose the use of my right leg or arm or lose the sensation in the right side of my body. I was very depressed. I even considered suicide because I didn't want to be an emotional burden and financial drain on my family. I cry as I write this, remembering the feelings I had when my children were taking care of me instead of me being able to take care of them. Carol Facella and her knowledge of nutrition and colon hydrotherapy has literally saved my life.

Today I feel great. I am symptom-free of all MS and Crohn's disease. I am a healthy weight of 140 pounds. I am able to work and take care of my family. I am able to work out, lift weights and have started running with my dogs. My energy level is fantastic and I require no prescription medication for my Crohn's disease or MS. I truly feel that I am healthier than I have been since my early childhood. Not only do I feel this way, but my doctor has done blood work to verify that my serum nutrient levels were in his words "perfect." I will always need to maintain my current diet and colon hydrotherapy to stay healthy, however, I feel the trade-off is well worth it. I feel that nutrition and colon hydrotherapy can eliminate a dependence on pharmaceuticals which cost thousands of dollars a year and have risky side effects. Current medical treatment for MS and Crohn's only treat symptoms. I am getting better.

\* \* \* \* \*

## EXERCISE AND CANCER

Most doctors believe that moderate exercise can help prevent heart attacks. Now a doctor at the University of Southern California says it also may help prevent cancer of the colon.

Dr. David Garabrant surveyed 2,950 men with colon cancer. He found that men with jobs that kept them sitting and inactive most of the day had the highest incidence of the disease.

Trying to explain the observation, Garabrant theorizes that physical activity stimulates the rate at which half-digested food moves through the intestines. The food stays in the intestines longer when a person has little exercise, so any cancer-causing ingredients have more time to act on the cells, the theory goes. Garabrant is doing follow-up studies to check his findings

# THE IMPORTANCE OF BEING LABEL SAVVY

## Understanding the New National Organic Standards

by Consuelo Reyes

Much will be the hoopla over the new federal rules for organically certified foods in effect since October 21 of this year and overseen by the U.S. Department of Agriculture (USDA).

Many hail the regulations as a sign that organics have arrived — no longer a haven of the far out health-nut fringe, but an increasingly important sector of the food industry, accounting for some 10 billion dollars a year in sales. The advocates say the standards insure a baseline of quality in place of the disorganized system that arose from the 60's.

There are many, however, who fear the national standards dilute the whole concept of organics developed by dedicated farmers.

But one thing is clear: the new federal organic regulations are here and we consumers will be confronted with labels on which the words we see may not necessarily mean what we think. Here are the new labels:

- “100 PERCENT ORGANIC” means produced with no hormones, antibiotics, synthetic pesticides, irradiated components, genetically modified organisms, or sewage sludge. This is your best bet for quality assurance. Or, as David Hinckley in the *Daily News*, put it, “If you want to be absolutely sure your food has none of that...you need ‘100% Organic.’”

- “ORGANIC” — at least 95% of all ingredients by weight must be organically produced as stated above. But the really important question is, what about the other 5%? The new rules have no control over this 5%. Will these be low quality, highly sprayed items or, perhaps, irradiated or genetically-engineered ingredients which are currently not required to be labeled as such?

- “MADE WITH ORGANIC INGREDIENTS” — at least 70% of ingredients by weight must be organic. Again, what of the other 30% non-organics?

- Processed foods with less than 70% organic ingredients may not display the word “organic” on the front of the package. But they may list the organic ingredients on the back information panel.

Small organic farmers are deeply concerned about government oversight in this area, fearing, among other things, these new rules and regulations will be used to harass them. Already, they feel overwhelmed by all the paperwork and constant testing required for certification.

Will the new guidelines be a good thing for the country's health or just another case where quality falls vaguely into the shadows? Time will tell. Meanwhile, if you're accustomed to buying organic, you would be well advised to understand exactly what you're seeing on the new labels and what you're not seeing.

\* \* \* \* \*

*Hey, Hey, Ho, Ho — Genetically-altered food has  
GOT TO GO!!*

*You're eating something you don't know —*

*Hormones in meat and milk are messing with kid's  
growth.*

*They're planting fish genes in strawberries, and in  
tomatoes;*

*rat genes in lettuce, and pesticides are inside corn  
and potatoes!*

*They tell us this will feed the world,*

*and expect us to sit back like good boys and girls.*

*But beware what you hear when the interest is profit!*

*This stuff isn't labeled,*

*SO IT'S UP TO US TO STOP IT!!*

*Tell the FDA and government; tell your friends.*

*Tell supermarkets, teachers, restaurants and media,  
and this nightmare might end!*

*Tell them that DNA cannot be predicted,*

*tell them that all of life is interconnected.*

*Tell them you need to eat ORGANIC,*

*so your health is protected!*

*These foods are toxic — BE AWARE!*

*As long as we buy them, they'll remain there.*

*Respect yourselves and each other, respect  
your HEALTH —*

*Get genetically altered ingredients*

*OFF THE SHELF!!*

*— From SOSFood.org*

# F.Y.I.

The following letter appeared in the New York Times over 25 years ago. Today, of course, the link between diet and cancer is common wisdom in the medical establishment. We are pleased that acceptance has replaced hostility in this area.

## Yesterday's "Quacks"

To the Editors:

Your front page story on the increasing evidence of the role of diet in the causation of cancer (December 3, 1975) has implicit a lesson in humility for us all.

In 1958 I was employed by Symon Gould of the Health Guild, a distributor of vegetarian, organic gardening and other "crackpot" valetudinarian literature. Several branches of the Federal Government descended upon us in wrath, threatening prosecution and suspension of mailing privileges unless we agreed to cease and desist from the distribution of various books which made the same point which you headlined today. We could find no medical men or academic scientists willing to testify in our defense, since it was the official policy of the medical profession that one who argued for a relation between diet and cancer was *ipso facto* a "quack," and we were forced to sign a consent order.

We pride ourself on having come a long way since the persecution of Galileo. Remember the fable of Aesop about the two sacks, the one we carry in front of us containing the faults of others and the one behind with our own faults? And the statement of Nobel laureate Lorenz is also to point: "Those who have warned against the indiscriminate use of insecticides, pesticides and chemical preservatives have been discredited in an infamous way."

Sam Abrams, Portsmouth, N.H., 12/13/75

## Our Wormy Friends

Charles Darwin estimated that good soil has about 53,000 worms in each acre. Taking that down to the garden scale suggests that a 10-by-20 foot backyard garden patch with decent soil has about 250 earthworms. Each worm is capable of producing, over a year, a third of a pound of castings, which works out to 80 pounds of top-quality fertilizer being added to that garden plot every year.

It's free fertilizer, requiring no transportation from the garden store and no work on the gardener's part.

Worms don't ask for much in return for their good works—just plenty of organic matter (from plant cuttings, vegetable and fruit peelings, etc.) and enough moisture to keep them active and healthy. Artificial fertilizers do not provide food for earthworms and may repel them because of their high soluble salt content. Earthworms are also a favorite high-protein snack for some birds, along with moles and skunks.

## Radiation and Mastectomy

LAUSANNE...A Swiss investigator reports that the routine use of local postoperative irradiation in early breast cancer should be seriously questioned. In the six controlled trials that have been published so far, says Dr. Jan Stjernsward of the Swiss Institute for Experimental Cancer Research, survival rates were significantly lower among those who were irradiated than among those who were treated by mastectomy alone. Though the irradiation technique and the degree of radical mastectomy performed differed somewhat from study to study, in all six trials the increased mortality rate was statistically significant, varying between 1% and 10% five years after treatment. Dr. Stjernsward concludes that stopping the routine use of prophylactic local radiotherapy after radical mastectomy not only could increase the survival rate but also save resources

## Medical Terminology

Benign.....What you be, after you be eight  
Coma.....A punctuation mark  
D & C.....Where Washington is  
Fester.....Quicker than someone else  
Fibula.....A small lie  
Genital.....Non-Jewish person  
Node.....I knew it  
Pelvis.....Second cousin to Elvis  
Rectum.....Darn near killed him  
Secretion.....Hiding something  
Terminal illness....Getting sick at the airport

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# Ruth Sackman's Notebook

I am troubled and frustrated by the way some patients use alternative metabolic, cancer programs. These are carefully balanced systems and usually individualized. Without any experience, patients, in their anxiety not to miss an opportunity, make changes in systems that have been in existence for as long as 40 or more years with a history of recovery for many patients.

I can understand where they are coming from, but certainly, if they have chosen a different direction from traditional therapy, they should realize that they are not qualified to make decisions in uncharted territory. They should depend on the experience of the person who is guiding them through a new path until they become secure and have acquired the knowledge necessary to make changes. Experimenting with the many ideas found on the internet, along with all the books, TV and radio infomercials, etc., is foolhardy and dangerous.

The vast majority of people make an alternative choice without any understanding that the alternative is an entirely *different concept of healing*. They tend to use the alternative system or product but retain the conventional concept of focusing on the symptom—cancer cells—not the cause. It is hard to pry them loose from this entrenched way of healing. Unfortunately, with this narrow thinking, the results are limited, disappointing and, in some instances, fatal.

A sound biorepair system focuses on the host, not the tumor. All too often, patients decide to take care of the area which they feel has been neglected by a metabolic program. Usually, they resort to some highly publicized product which may actually provide tumor reduction, or may not, but which may exact its price down the road. What they do not understand is that the **biological balance**, which is the essence of a sound metabolic program, is upset by their misdirection.

Let us take SPES as an example. It was presented, especially on the internet, as a sure cure for prostate cancer as an herbal remedy and suppos-

edly, safe. Many men, in their desire not to neglect an opportunity, chose to use it. When patients began to suffer from unusual symptoms and other complications, the California Health Department investigated SPES. Although it was touted as a totally natural substance which precludes the FDA's interference, it was found to contain Xanax, a pharmaceutical relaxant. PC SPES, another product marketed by the same company, contained Coumadin, a pharmaceutical blood thinner that can cause serious bleeding. Without the doctor's knowledge that a patient was using Coumadin or Xanax, he would not be able to evaluate symptoms correctly or he could prescribe medicine which would be contraindicated and dangerous. For example: the Coumadin with aspirin could cause a hemorrhage.

Someone choosing to undertake a biorepair using a metabolic program should avoid adding or taking away anything without consulting the professional who is guiding them.

## TROUBLE WITH THE THYROID

A vital organ which doesn't get the attention it should is the thyroid gland. A contributing factor creating thyroid dysfunction is the overwhelming use these days of pesticides in our food supply. Most of these pesticides, used for growing and processing foods mimic estrogen, thus creating a hormonal imbalance affecting thyroid activity.

Because inadequate thyroid function has become more prevalent, recognizing this factor, a doctor wisely suggested that the thyroid test should become a routine part of an annual checkup. If this is done, no doubt it will be surprising how many people have inadequate thyroid function. If this is so, it is important that the correction be made, as one weak organ of the endocrine system strains all the others.

If there is a need to normalize thyroid function, most doctors tend to use synthetic thyroid hormones because they are under the mistaken impression that the dose is always consistent and doesn't need periodic evaluations and adjustments. The company manufacturing Synthroid, a synthetic thyroid hormone, at one time claimed that their prod-

uct was more reliable and always consistent whereas the dose of natural thyroid was unpredictable. However, a lawsuit brought against Synthroid for misleading advertising was successful in restricting their claim. The position of the Food and Drug Administration is that "no currently marketed orally administered levothyroxine sodium product (thyroxine or synthroid) has been shown to demonstrate consistent potency and stability and, thus no currently marketed orally administered levothyroxine sodium product is generally recognized as safe and effective."

Howard Hagglund, M.D., a specialist in thyroid problems, compares, in the *Townsend Letter*, the use of natural thyroid and synthetic thyroid hormone, "The truth is that natural thyroid contains T1, T2, T3, T4, whereas, the synthetic hormone contains only T4." Dr. Hagglund has been using natural thyroid hormone for his patients for many years and never found the use of natural thyroid inconsistent. No problems whatsoever arose! "I am frequently surprised at the number of problems that clear up from evaluating and giving the proper dose of thyroid and nutrients."

Here are some of his major clues in diagnosing hypothyroidism:

Thinning hair, cold hands and feet, missing outer third of eyebrow, obesity, insomnia, depression, elevated cholesterol and, of course, the standard thyroid test.

The medical profession has been concerned about osteoporosis, not only in women after menopause but, in younger people as well. Prescribing calcium supplementation is the usual approach to control the calcium deficiency. Since calcium metabolism is linked to thyroid function, it might be more appropriate to examine thyroid activity.

Tablets made from chalk, seashells or other than edible and natural sources can create unpredictable calcium problems. Dr. Max Gerson, author of the book, *A Cancer Therapy, Results of Fifty Cases*, who ran a cancer clinic in Nanuet, New York, found calcium supplements hazardous for his cancer patients.

In another instance, an unusual episode was reported in *Medical World News*. A doctor found a

mass in a woman via x-ray which he assumed required surgery. When he performed the surgical procedure, he found the mass was a calcium deposit that was not absorbed by the patient's bone structure. This malabsorption is not unexpected with inorganic calcium.

Another cause for concern: Dr. Royal Lee, who was an authority in the vitamin field, found that inorganic calcium tablets drew minerals from the bone structure, teeth and nails, in order to become synergistically sound, ultimately, causing a calcium deficiency. The very opposite of what one was trying to achieve.

Instead of assuming the body is not getting sufficient calcium, since it is the most prolific element in the food supply and since thyroid function is linked to calcium metabolism, an examination of the thyroid might reveal poor calcium metabolism. Correcting thyroid function might be a more substantial and safer way of handling osteoporosis.

#### SOME SOURCES OF CALCIUM

Collard leaves	1 cup	360 mg
Almonds	1 cup	330 mg
Sesame seeds	1/4 cup	280 mg
Kale	1 cup	250 mg
Mustard greens	1 cup	180 mg
Broccoli	1 stalk	160 mg
Okra	1 cup	150 mg
Dandelion greens	1 cup	150 mg
Rutabagas	1 cup	100 mg
Filberts	1 cup	200 mg
Brazil nuts	1 cup	180 mg
Dried chickpeas	1 cup	250 mg
Pinto beans	1 cup	135 mg
Pistachio nuts	1 cup	130 mg
Dried figs	1 cup	125 mg
Walnuts	1 cup	100 mg
Spinach	1 cup	95 mg
Dried lentils	1 cup	80 mg
Dates	1 cup	60 mg

This list was culled from the book, *Composition and Facts About Foods* by Ford Heritage. It is only a partial list just to provide a guide to the many sources and varieties of food that contain calcium.

# Recipes

## Complete Meal Salad\*

You can follow this program both at home and when you are traveling. The Complete Meal Salad may be eaten at any meal, is nutritionally substantial and satisfies the appetite. The salad consists of greens (grown organically), avocados, assorted sprouts, soaked sunflower seeds, dulse and a vegetable (cucumber or zucchini squash). If you wish, add some kelp as seasoning. Mix the salad as you would a regular salad and add a diced red pepper or tomato.

Another valuable meal is rye or barley cereal: Soak one cup of grain for twenty-four hours. Blend it with one cup of water and six dates. This makes an excellent breakfast for one person.

The Complete Meal Salad would help busy people be healthier and feel better. It offers more nutritional value in a lighter, more easily digested form. Although some people may complain that it would be hard to change over to the salad, its benefits actually outweigh the effort of changing. It would reduce malnutrition and disease. It would cut the cost of meals and build better health. It shortens the time required for preparing meals and reduces the space needed for preparation and can be served as a "do-it-yourself" meal.

*\* Based on a recipe from Ann Wigmore, which was minimally edited. A simple dressing may be added to the salad, e.g., olive oil and lemon juice.*

## Arugula Salad

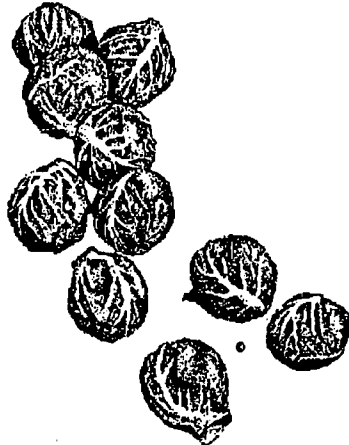
3 tablespoons extra-virgin olive oil  
1/4 teaspoon mustard powder  
1 lemon, juiced  
1-2 bunches fresh arugula, washed and dried  
2 large tomatoes, cut in wedges  
1/4 cup raw walnuts, coarsely chopped  
1-2 tablespoons grated goat cheese or other raw

organic milk cheese

Mix olive oil, mustard, and lemon juice in a salad bowl. Add arugula and tomato wedges. Toss to coat with dressing. Top with walnuts, cheese and serve. Serves 6.

## Green Barley Salad

1/2 cup pearled barley  
1 cup distilled water  
1/4 cup cold-pressed olive oil  
juice of 2 or 3 lemons  
3 cups coarsely chopped watercress, parsley or cilantro  
1 tablespoon or so pine nuts for garnish (opt.)



1. Place barley and water in a saucepan, bring to boil, then turn down to simmer until cooked (about 20 minutes). Toss with a tablespoon of olive oil and refrigerate for a few hours.

2. When ready to serve, toss the cress with the barley, stir in olive oil and lemon juice. If you like, sprinkle a few pinenuts on top. Serves 4.

## Brussel Sprouts In Mustard Dressing

1 pound brussel sprouts  
2 tablespoons cold-pressed olive oil  
1 tablespoon lemon juice  
1 clove garlic, pressed  
1/4 - 1/2 teaspoon mustard powder  
1 tablespoon minced green onions  
1 tablespoon chopped fresh parsley

1. Trim root ends of the brussel sprouts, remove loose or discolored leaves, and cut into quarters. Steam until just tender (5-7 minutes).

2. In a small bowl mix well olive oil, lemon, garlic, and mustard. Stir in onions and parsley.

3. As soon as the brussel sprouts are cooked, place in a serving bowl, toss with dressing and serve. 4-6 servings.

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# Letters

Dear Mrs. Sackman,

Just a few lines to let you know how valuable my few minutes of talk with you on the phone was. They were "quality" minutes and I appreciated very much the few suggestions you made concerning my health.

It's such a comforting feeling to know that there is a door you can knock on and talk to a person with such knowledge and an open ear — one you can turn to when all roads seem to be a dead end street.

Enclosed please find a check in the amount of \$50.00 to be allocated as you see fit.

May God continue to bless you abundantly with knowledge and long life so others can benefit from that God-given knowledge just as abundantly.

Thankfully, M.M.

P.S. I tried contacting Mrs. Sokosh several times (as you suggested), but haven't been able to talk to her! I guess she is a busy lady.

Dear Ruth,

Enclosed is my check for \$10.00 to renew my subscription to *Cancer Forum*.

I was sorry to read that Dr. Jensen had died. I am so grateful that I was able to have a meeting with him and still follow his suggestions. The slant board has been a great help to me, especially now. I get all bent out of shape bending in the garden and then come and straighten out. I have also been going to a chiropractor who was recommended to me when I was touched with sciatica. He had never heard of the slant board.

I had been planning to write to you when I finally faced a medical problem last October. I was planning to go to a reunion in Texas the first of October. A week before, I woke up with a black and blue spot on my wrist and my elbow. After looking at it for a couple of days, I finally decided to go to the VA and have it checked (should have checked Adele Davis first). They said I had a very low platelet count and they were keeping me right there in the hospital for the weekend. I was shocked. I felt perfectly well. Then they said I had to take prednisone, because the immune system was eating up the platelets. So, if I had read Adele Davis, she says to feed the immune system with vitamin C. However, with prednisone, you are stuck with it until you taper down. I have been miserable with swollen ankles, then the swelling gradually creeping up my whole leg and above my knees. Although I have tapered down to only 3 mg., there is no change in the swelling in my legs. My platelet count is up, but tapering off the prednisone is the

problem.

Is there any light at the end of the tunnel? Am I trapped forever with the swollen legs? Because I am a veteran, I felt secure with medical coverage at the VA, but now I long for our holistic health center which closed several years ago. Dr. Peter Albright retired and that was the end of it. I have found no doctors in the area like him.

Knowing how many requests you are faced with every day, I hesitated to ask your help, but I would be grateful for any information you may have that would help me. I have been in perfect health until now and it is hard to believe I will be 82 in July. In spite of the swollen legs, I have not curtailed any of my regular activities.

Best wishes for your continuing good works.

Sincerely, V.N.

Dear Ruth,

As you can see, I meant to get the enclosed check off to you a long time ago! There are so many interruptions and I don't get anymore efficient as I get older, unfortunately! Especially since my eyesight has been diminishing (a very scary turn of events).

However, I still have much to be very thankful for especially in view of the turn of world events — which is an appalling mixture of all sorts of human folly.

I shall be in touch soon, but did want to get this off to you.

I do know that I am eternally thankful to you, for all you have done and do still to help in your own very special way.

Hoping this finds you well and in good spirits.

With much love, J.M.

Dear Ruth Sackman,

I would like to thank you for guiding me through this process. Especially for answering all of my questions and for being so patient.

Enclosed is a \$5 check, payable to FACT for the information packet you sent me.

Sincerely, M.M.

Dear Ruth,

Now that you "sent me back on my own," I want you to know that I shall never forget that you saved my life more than once and I continue to keep in mind your rules, attitudes, approaches and teachings.

I shall never forget your loving attention, support and guidance all along when I needed it most during all those years. You were always there, at any crisis. I make sure to ask myself the right questions before

making a decision...and not to be spaced out (!)

You are so right about my health plan. If you are not careful, you are taken in like a fly. But they have a hard time with me. They don't impress me and I put them back where they belong. It is from a very good training ground to empower myself and not be intimidated by their arrogance. Although the doctor almost menaced me that I should take antibiotics, I told him to take note that I don't take them. It is my life and decision. He did not like it. Too bad...they have to learn. Of course, I got rid of the UTI with cranberry juice and golden seal only.

I do lots of exercises and walking in the park and I feel great (just 2 half grains of Armour) and I follow your basic diet. I am going to try to use the thermometer to monitor that condition.

This note is an official heartfelt thank you to tell you how grateful I am and remain.

You are an extraordinary person to me and everyone else who crossed your natural healing path, and I love you.

I wish you great success as always in your new undertaking [book]— it will be wonderful — and I hope to know about it soon. Please let me know of any new development. I shall also keep in touch.

Fondly, D.S.

Dearest Ruth,

My deepest thanks and appreciation to you for your tireless work on behalf of us all. Thank you for educating us on how to live a more happy, healthy lifestyle.

I.L.

Dear Ruth,

You surely do a fine job with *Cancer Forum*. It is very informative. Rarely do I read a newsletter cover to cover as I do yours.

My Dad died from cancer in April 1997. This was a shock to my family and me. He never complained of pain, just a little numbness in the fingers of one hand, which he exercised away. He was very physically active with Herculean strength. He said it was in his blood: by hand, he'd pick up used car batteries, radiators, old freezer doors, heavy metal scrap effortlessly and then sell them. All this until the very end, age 80.

In addition, he made it his motto: "I must sing a song to some person everyday." He made teens dance in supermarket aisles, dreary-eyed people on line in the post office turn to smiles, bored toll collectors crack a smile. He gave free tapes and his signed photo singing. He connected to people everywhere he went.

He drove from Riverhead, Long Island, New York, to Spartanburg, South Carolina, in 12 hours 5 months before the end.

Have you ever heard of a person with cancer having all this energy and spontaneity?

Four weeks before Dad died the shock came when we found that he had a tumor eating away a third of his second thoracic vertebrae (this was the cause of numbness in his hand).

This left him paralyzed from T<sub>2</sub> down. Even then he continued his singing to doctors and nurses, attempting to do exercises with his legs (with my help) to get his legs moving. He did this till the end!

I don't think my dad ever accepted he was sick; at the very end he was just so frustrated he couldn't move.

Nothing medically was done, it was all too quick after the tumor was found. My Dad never went to doctors besides.

I was with him to his last breath, holding his hand, comforting him home.

Cancer takes years to develop. As a musician must follow rules of harmony to compose harmonious chords pleasing to hear, so too one must follow very simple, inexpensive laws of life and Nature to lead a healthy life and to die at the time his maker decides as opposed to having to die from a dis-ease.

I've made many unnatural mistakes in my past but I'm always correcting myself and telling others. Your newsletter truly helps on the corrections, and helps people to realize they don't need to have this disease.

Thank you so much—especially for the caring.

Sincerely, A.D.

Dear Mrs. Sackman,

My friend Joseph Proctor is interested in receiving *Cancer Forum* and the information packet. I've given him your phone number. I'm so sorry I can't send more. The disability benefits I receive come to \$593.00 per month which doesn't allow for anything but the necessities.

Thank you so much for the loving care you give to everyone. Thank you for giving people an opportunity to have a hope for life. You are in my prayers. Thank you for showing my sister that there is an alternative. On behalf of everyone in my family, P.C., my niece, L.P., and others in my family, thank you.

Sincerely, R.M.

*Edit. Note: We have returned this check, but updated this writer's membership. FACT's role is to disseminate information for those who are interested. If finances are a hardship, let us know.*

# Book Review by Betty Fowler

***Fluoride — Drinking Ourselves to Death?* by Barry Groves (Newleaf, Dublin, Ireland, 2001), 329 pp., \$13.95.**

*Fluoride — Drinking Ourselves to Death?* by Barry Groves is a book that I highly recommend.

After serving for 27 years as an electronic engineer in the Royal Air Force, author Barry Groves began research into the role of diet in modern diseases. Author of several books, he lives in Oxfordshire, England.

The foreword of this book is by Toxicopathologist Dr. C. Vyvyan Howard. Dr. Howard explains that the format of the book is “based on a circular notice sent to United Kingdom dentists by the British Fluoridation Society (BFS) which detailed a series of questions that might be posed by patients and provides suggested answers to those questions.” Groves takes each question and the BFS answer as the basis of a series of short chapters.

Chapter 3 on “Cancer and Fluoride” and Chapter 24 on “Arsenic and Old Lies” will be of interest for those fighting cancer. For example, Groves informs that after 20 years, fluoridated cities had 10% more cancer deaths than unfluoridated cities. In 1976 the U.S. National Cancer Institute ((NCI) confirmed this data.

Tables are used to illustrate the text. For example, in Chapter 3, Table 2 depicts the association of drinking fluoridated water and the incidence of osteosarcoma (bone cancer) among young males. The headings across this table show fluoridation status for each area, number of cases, population data and the rates of osteosarcoma in seven counties and three municipalities in New Jersey. Groves writes that fluoride may have a causal relationship with more than bone cancer in males. The list includes respiratory, oral and uterine cancers.

In the conclusion of Chapter 3 Groves reports that the U.S. Food and Drug Administration (FDA) does not allow anything that has been shown to be carcinogenic in animal tests to be put in food. Unfortunately, this information is no longer accurate because the Delaney Amendment, which prohibited the addition of any carcinogenic substances in

food, was repealed in the 1990's as a result of pressure from industry. Nevertheless, the fact that water fluoridation enters the food chain and causes cancer in animals should automatically be a viable reason for the FDA to bar water fluoridation in the U.S.

Chapter 24 covers an important aspect of water fluoridation not mentioned by fluoridation proponents: what fluoride compound or compounds are added to public drinking water in fluoridated cities? The fluoridation compounds used are recovered toxic wastes from the manufacture of phosphoric acid and phosphate fertilizers. These compounds contain hazardous substances including lead, mercury, arsenic and high concentrations of radionuclides.

Most Americans accept fluoridation as a way of getting dental care to poor children, but many poor children are vulnerable and adversely affected by fluoride's toxic effects.

The chapter on Dental Fluorosis, Chapter 15, discusses the problem of fluorosed teeth. Dental Fluorosis is a visible sign of fluoride poisoning. The teeth are mottled.

In my opinion dental fluorosis and dental decay treatments caused by fluorosed teeth should be factored into the true costs of fluoridation.

This book is dedicated to Dr. John Yiamouyiannis. Groves writes that he considers Dr. Y, as he was known by his friends, to have been one of the most brilliant scientists of the past century. Dr. Y passed away in 2000. I would like to take this moment to heed the words of Dr. Y. He wrote in *Fluoride — The Aging Factor*, “You are the solution” to stopping fluoridation. It can be done if you take action.

The American Dental Association (ADA), is in the forefront of supporting fluoridation. Their well-financed efforts are hampering the public and legislators from receiving accurate information about the dangers of adding fluoride compounds to public water supplies. **They know that fluoride causes dental fluorosis—soft spots in the teeth, which are expensive to repair.** Talk to your dentist about opposing the ADA and joining those of us opposed to fluoridation. This toxic contaminant has no place in our precious drinking water!

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