"The plain fact that fluorine is an insidious poison, harmful, toxic and cumulative in its effects, even when ingested in minimal amounts, will remain unchanged no matter how many times it will be repeated in print that fluoridation of the water supply is 'safe'."

LUDWIK GROSS, M.D.,
Chief of Cancer Research of the Veterans Admin.
Bronx, N.Y.

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

Assumptions have been made that the above names represent patients who have died using an alternative cancer therapy. We would like to correct that misunderstanding. Contributions are made by friends of FACT wanting to help FACT while simultaneously expressing their sympathy to the family of the deceased. Many of the above listed names are unknown to us; the persons may have died of something other than cancer.

Acknowledgement cards can also be sent to honor someone's birthday, anniversary or any other special occasion.
This article has been reprinted in Cancer Forum because it shows what can be accomplished when a cancer patient does not give up hope but takes on the responsibility for his health by using health restoration principles. Dr. Wong Hon Sun’s program was right for him, but the one-meal-a-day system may not be applicable to everyone. One can try it to see if there is an improvement in their well-being. An important factor that encouraged the printing of this article was the emphasis on ridding the body of toxins, a need which is essential in order for the body to be well.

My Fight Against Cancer

By Dr. Wong Hon Sun, N.D.

The surgeon untied his head mirror. His face was extremely grave. He had just examined my nasal passages and throat, and what he had seen had confirmed his worst fears. On his table lay the Biopsy Report Sheet, upon which were scrawled the three fatal words: “Anaplastic Epidermoid Carcinoma!”

“Can’t you operate on the tumour, doctor?” I pleaded.

The surgeon shook his head. “The tumour is large,” he said slowly, “very large. It is quite inoperable.”

The tumour, being of the advanced, “anaplastic” type, had a tendency to enlarge rapidly. In the X-ray film it appeared as a large mass in the nasopharyngeal area (the region high up the back of the throat). It had grown so large that I was absolutely unable to breathe through my nose. I had lost all sense of smell and could swallow and speak only with difficulty. Moreover, there was persistent bloody post-nasal suppuration with intermittent nose-bleeding.

So this was it! This, it seemed, was to be the end of the road for me.

I was then yet a young man in my early 30s; a man who had never smoked or drank alcohol in his life, and who had from early childhood been under the constant care of doctors. How could I accept with resignation this cruel death sentence?

Under medical treatment advanced and inoperable cases of cancer are subjected to radiation treatment, more as a palliative measure than with any hope of cure. So I was subsequently given X-ray irradiation.

In my early youth I had been constantly ill with indigestion, sore throat, colds and sinusitis. These illnesses had worsened under the strain of my medical studies, and were the starting point of a progressive deterioration of my health. Now, greatly emaciated by cancer and, moreover, constitutionally anaemic, I was in no condition to undergo any protracted course of radiation treatment, which is extremely destructive to the red blood cells.

After a few doses of X-rays my blood count fell to a dangerously low level and the treatment had to be stopped. I could not, in any case, have gone on with it, being then unable, in my weakened condition, to tolerate further any excruciating after-effects of X-ray irradiation: the parched, burning sensation in the mouth and throat; the fearful nausea; the giddiness and splitting headaches.

So I resigned myself to death. The tumour had undergone some shrinkage, but I was still unable to breathe through my nose. There was still difficulty in speech and deglutition, and the bloody post-nasal suppuration had not ceased. The tumour being of the anaplastic type, it could swell up again rapidly at any time.

When one is dying slowly of a disease like cancer, one has a lot of time to think. I had read many books on the science of Natural Healing or Naturopathy. I had not paid much attention to them before, but it now became increasingly apparent to me that the Theory of Natural Healing was quite in accord with the fundamental principles of Human Physiology, a subject which I had exhaustively studied in the medical course. I dug up from my bookshelves the works of Benjamin, Lindlahr and other notable

In Malaysia today one out of every five persons falls victim to cancer during his or her lifetime. In Singapore cancer has become the No. 1 killer disease. It takes an annual toll of at least 1000 lives on the island — and the number is relentlessly increasing every year. In Hong Kong the incidence rate is even more alarming — eight people in this colony of hardly four million die of the disease every day!

Cancer has become a graver threat to the human race than even the atom bomb, and to its alarmingly increasing incidence rate medical science has as yet found no answer. Is there no way of curing this fearful pathological menace, or is cancer really a disease that is so mystifying and unique that it can never be adequately understood or controlled?

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naturapaths and, after careful study and deliberation, embarked upon a series of desperate self-experiments which were to prove the means of pulling me back from the brink of the grave.

There is no standard naturopathic treatment for cancer, and I had to plan my own methods of self-treatment. Some of these were adaptations of the general methods used in the naturopathic treatment of chronic diseases; others were entirely my own, based on fundamental physiological and naturopathic principles.

I planned my self-treatment of cancer along two main lines: (a) The elimination of the deep-seated toxemia pervading my system as a whole and the region of the cancerous growth in particular, and (b) The building up of the health and vitality of my body to resist the disease.

It took more than 6 months, from the beginning of my self-experiments, for the nasal obstruction to clear up completely; more than a year for the bloody post-nasal suppuration to cease.

I shall discuss briefly two main methods which I used in my self-treatment of cancer:

(a) The Single-Meal Routine

Bearing in mind the naturopathic principle of the unity of disease, I now gradually came to understand the close relationship between cancer and my chronic illnesses as mentioned above. Anatomically, the nasopharynx is situated at the upper end of the alimentary canal and forms also a continuous airway with the sinuses. Any long-standing toxic condition of the digestive system or the sinuses would, therefore, be reflected in the nasopharyngeal tissues. It became evident to me that unless my chronic digestive and sinus troubles were cleared up, there was little hope of a recovery from cancer. In other words, I had first to eliminate the factors which set up my chronic illnesses.

In a grave disease like cancer the body requires all its natural healing powers to cope with the disease. These natural healing powers can be brought into full play only when food is withheld, for digestion of food is a long and complex process which imposes no small amount of work on the body. On the other hand, prolonged fasting deprives the body of the vital nutrients necessary for its proper functioning and weakens it. I could think of only one practical solution to this problem, namely: reducing the daily food intake to the "physiological minimum" — that is, the least amount of daily food necessary for proper functioning of the body. But what is the daily quantity of food which constitutes the "physiological minimum"?

If we were to look at the animal world, we would find that few predatory creatures in their natural environment could have the opportunity to take, on the average, more than one meal per day all the year round. The elusive, swift-moving prey has first to be hunted down and caught. And there are always those foodless days when injury received in combat or accident renders hunting out of the question. But such are the conditions governing the mealtimes of the wild animal in its natural surroundings. And such were the conditions under which man sought his food in his primitive days, when he was in his peak physical form and knew no illness or disease.

I shall not weary the reader with tedious accounts of the dietary self-experiments which I underwent. Suffice it to say that in no case was I able to rid myself of my chronic digestive and sinus troubles until I restricted myself to one meal a day of natural, unspoilt foods — a dietary routine to which I have adhered for the past 12 years.

It might be thought that on one meal a day — I shall henceforth refer to this dietary routine as the Single Meal Routine — there would be serious malnutrition and undernourishment, great loss of vigour and rapid deterioration of health. Undoubtedly, if the Single Meal Routine were not well balanced, such symptoms could occur. Indeed, I had in the initial stages of my dietetic self-experiments experienced some of these symptoms (in mild form), and it was by repeated alteration and modification of my menu that I was eventually able to work out a diet that, despite the restricted daily intake of food, was both nutritive and adequate for my body's metabolic needs.

(b) The Flushing Treatment.

The three most potent weapons available to man in his fight against disease are abundantly provided by Nature — fresh air, pure water and sunlight.

It is common sense that fresh air must play an indispensable part in the treatment of diseases affecting the upper part of the respiratory tract. In other words, the passages of the nose, throat and sinuses must be kept frequently flushed with fresh air — Nature's own fresh air — to prevent the stagnation and reabsorption of toxic secretions, a condition which could prove rapidly fatal.

Forced deep breathing cannot be indulged in for long without producing distressing symptoms in the body. But Nature has provided every animal, man included, with an ingenious way of flushing his system thoroughly with fresh air — by exercising, not so much the lungs, but the legs.
Living under a hot tropical sun induces profuse sweating, and I drank water by the jugs — the simplest and most effective way of cleansing and purifying the system. I also made use of various subsidiary forms of naturopathic treatment, but owing to limitations of space, I shall not discuss them here.

The treatment for cancer does not end with the cure; the cure is but the beginning of the treatment. Even though the tumour had regressed, I still lived in the shadow of death. The therapeutic measures which I had used to overcome cancer were continued as preventive measures to guard against possible recurrence of the disease. It is appalling to think of the number of supposedly “cured” cancer victims who continue to die needlessly every year because they would not make any personal effort to guard against recurrence of the disease!

It is now more than 12 years after the biopsy; at least 14 years since I first experienced the symptoms of cancer. There was a time when I thought I would surely die, but God willing, I survived. I had staked my life on a theory of treatment, and the theory had not proved to be a delusion. For the past 12 years there has been no recurrence whatsoever of the cancerous growth (as confirmed by medical check-ups); for the past 7 years I have not been ill a single day. Despair had given way to hope, illness to health, debility to vigour.

Surgery and radiation are today the standard medical treatment for cancer, but medical science frankly admits that these two methods of treatment are only “palliative” in cases of advanced cancer. Unfortunately, cancer is such an insidious disease, that, when clinically diagnosed, it is often already in the advanced stage. Must these unfortunate victims of advanced cancer be allowed to die, or should they not be given the right to choose another method of treatment, however unorthodox, if it could offer them some hope of cure?

I make no claims to having discovered a universal cure for cancer, but on the basis of my personal experience of the disease and the numerous investigations I have made on the case histories of other cancer victims, I firmly believe that, even in advanced cases of cancer, complete recovery by naturopathic treatment is by no means impossible.

The cure for cancer must ultimately lie with the patient himself, and the reward of recovery is only for those who are prepared to undergo with fortitude some degree of self-denial. To those cancer victims whose prospects of recovery seem dim I would say: “As long as there is still breath in the body and the will to live, there is always hope ... there will always be hope ...”

Russell J. Down, M.D.

A Nutritional Controversy

In an article entitled “Diet and the Elderly” which appeared in the March 21, 1985 issue of “Today,” Chris Lecos challenges the concept that supplementary nutrition for the elderly is vital. He posits that many older persons are victims of false nutritional claims and believes that vitamins and mineral supplements as well as food products sold in health food stores are costly, do little good, if any, and may even be detrimental to one’s health.

He quotes S. Jaime Rozovski, Ph.D., an assistant professor of public health at the Institute of Human Nutrition at Columbia University. In an article written by Rozovski in the April-May issue of “Aging Magazine,” he said, “Older persons are a major target for opportunists who pander to people’s needs to feel better, cure disease, look younger, and lose weight rapidly. They also play on people’s fears by trying to convince them that they are being poisoned by food additives and pollutants, and by claiming that the whole food supply is being downgraded by processing.” He suggests that those who may require supplements should first seek sound medical advice.

Concurring with this point of view, the National Institute on Aging, in its publication, “Age Page,” believes that “a well-balanced diet will provide most elderly men and women who are in good health — in fact, most people of all ages — with the nutrients they need for healthy living.” However, those who believe they require supplements, should first consult a doctor or a registered dietician.

Interestingly enough, it is a medical doctor who refutes these tenets. On March 26, 1985, Dr. Russell J. Down of Merritt Island, Florida, wrote the following letter to the editor of “Today”:

Dear Sir:

This is to give you some of my reactions to your “Diet and the Elderly ” article in the March 21 issue,
Every movement begins on its own merits and the benefits it makes available to some number of people, is then invaded by entrepreneurs with selfish motives, and if favored by fortune, survives by virtue of good people and other virtues. Always, let the buyer beware; also, don't throw out the baby with the bath!

When I graduated from medical school in 1959, it was a much more benign and healthy physical environment, but one in which means to curb pathological processes had only recently made a dent in infectious diseases such as TB or in problems correctable by now routine surgery, etc. The disparaging attitude toward preventive medicine was summed up by one professor saying, "So you put the chlorine in the water (so what?; go into something interesting)." As for nutrition, during an intense and top of the line four year curriculum, we spent one afternoon touring the hospital kitchen and listening to the old woman who ran it explain to us how to cut the bath!

In this setting, just how dire do you suppose is the health threat of “people taking high-dose supplements of various vitamins and minerals without a doctor’s advice in the hope of prevention or curing a disease or condition?” I’ve practiced in offices, emergency departments and clinics enough to have had over 75,000 patient encounters, and can count on my fingers the number of times a case seemed to have been negatively influenced by a patient’s nutritional supplement program. Very truly yours

Russell J. Down, M.D.
Danger! Is Your Food and Drug Supply Safe?

Congressman Ted Weiss, Chairman of the Intergovernmental Relations and Human Resources Subcommittee, sends out a newsletter to his constituents as most congressmen do. Since I am one of his constituents, I receive this newsletter. The following articles are reprinted from two of the issues to alert you that the government agencies that we depend upon to maintain the safety of our food and drug supply are not dependable. Perhaps the reluctance on the part of these agencies to conscientiously protect our food and drug supply is contributing to the rise in the incidence of cancer from 1 out of 4 to 1 out of 3.

Ruth Sackman

FDA Allows Dangerous Drugs on Market

The Intergovernmental Relations and Human Resources Subcommittee, which I chair, has recently issued two reports concluding that the Food and Drug Administration failed to protect the public from serious and sometimes fatal side effects of new drugs. One report documents serious deficiencies in FDA's regulation of Oraflex, an arthritis drug approved by FDA in April 1982. The manufacturer of Oraflex, Eli Lilly and Company, withdrew the drug from the market less than four months later because of many deaths and serious reactions. The report concludes that FDA made no effort, prior to approving Oraflex, to obtain important information on its use in countries where it was already marketed. Reports of serious liver and kidney side effects were overlooked. The report also found that Lilly did not fulfill legal requirements to report to FDA about several Oraflex-associated deaths outside the U.S., prior to approval of the drug.

The second report documents FDA's failure to adequately review the risks of another pain reliever, Zomax, prior to its approval in 1980. Zomax was withdrawn from the market because of many serious allergic reactions and deaths. This report concludes that FDA was deficient in monitoring the drug and approved it without assuring that its benefits outweighed its cancer-inducing potential.

HHS Extends Market Life of Carcinogenic Additives

Although Food and Drug Administration (FDA) scientists concluded in 1983 that six color additives produced cancer in animals, the Administration has prevented FDA from removing these dangerous dyes from the market. Federal law prohibits the use of color additives in foods, drugs and cosmetics if they have been found to cause cancer in animal tests.

An investigation by the Intergovernmental Relations and Human Resources Subcommittee, which I chair, has revealed that Health and Human Services Secretary Margaret Heckler ignored the recommendations of three FDA Commissioners over the past two years to ban six cancer-causing color additives: Red No. 3, Red No. 8, Red No. 9, Red No. 19, Red No. 37, and Orange No. 17. FDA scientists testified during a recent subcommittee hearing that these additives could present a very substantial cancer risk to humans.

HHS has sanctioned continued public exposure to these cancer-causing substances while the industry conducts further testing intended to show them to be safe. This is contrary to federal law, which dictates that dyes should be removed from the market until they are proven safe.
Are X-Rays Dangerous?

By Anne Wexler

One morning you wake up with a toothache. You feel around with your tongue in the painful area and find a small cavity. When you reach your dentist's office and attempt to point out where the pain is, he seems to disregard what you tell him. He says, "We'll have to take X-rays first." You protest, "But, doctor, you took them about a year ago." His retort is, "Yes, but that was a year ago and there may be changes in your mouth." So before you can utter another word, he and his nurse are X-raying every tooth in your head. What has happened to the old-time dentist who didn't even X-ray the tooth with the cavity but just went ahead and filled it?

A condensation of Fred Warshofsky's article, "Warning: X-Rays May Be Dangerous to Your Health," which appeared in the August 1972 issue of "Reader's Digest" tells of a New York dentist with 17 X-ray machines in his two offices who recently sued Medicaid for non-payment of $300,000 in X-ray fees!

Nor are the dentists the sole culprits. In the same article are some other startling statistics. In 1970, 129 million Americans were exposed to a total of 210 million medical and dental X-ray examinations, a total of 650 million films. While undoubtedly some X-rays are necessary, there is now considerable controversy on the subject, as many experts fear that the X-rays may be a real threat to children before they are even conceived. If the cells housed in the male and female genitals are damaged by X-rays, there is a great risk of the offspring being born with genetic defects - mental retardation and blindness among others. While no one knows exactly how much radiation will cause mutations, K. Z. Morgan, director of the Health Services Division of the Oak Ridge National Laboratories estimates as many as 30,000 malignancies, stillbirths, and spontaneous abortions may occur each year in generations to follow because of such genetic damage.

Perhaps even more dangerous is the X-ray during pregnancy. A Harvard study of more than 70,000 infants in U.S. hospitals showed a 40% increase in leukemia and cancer of the central nervous system in children whose mothers were X-rayed during pregnancy. I can cite one heart-breaking example. A dear friend of mine, whom I will call Mrs. S., was having difficulty giving birth, clearly a breech delivery. At the last moment, the physician decided that an X-ray was needed. The baby grew into a healthy, active young girl. When she became ill in her late twenties, specialists found she had leukemia which some felt was due to the mother's pre-birth X-ray. It is commonly acknowledged that cancer does not develop overnight but takes years. The girl was energetic and athletic; consequently, the cancer took longer to mature. At the age of 29, the best years of her life, this lovely young woman was dead.

What about the other dangers of X-rays for women? "Cancer X-rays Peril to Women?" written by Judith Randall appeared in the Sunday News of March, 1976. Increasing numbers of females are having yearly X-ray examinations for breast cancer, and the question has arisen as to whether these apparently healthy women are increasing their chances of developing breast cancer from the X-rays. Randall states that the American Cancer Society feels that the danger in using the X-ray mammography machine is slight and can catch cancers when they are too small to be felt and are still easily curable. But Dr. John Bailor 3rd, a National Cancer Institute scientist, is not sure that the society is correct. His concern is that the radiation itself can cause cancer which does not become apparent until 10, 15, or even 20 years after the patient's exposure. Also, since the effects of repeated exposures are cumulative, if at some time in the future we find it has promoted breast cancer in some women, it would be too late to correct the error. Another one of Bailor's concerns is that women as young as 35 are among those enrolled in the breast-cancer detection clinics. He feels they are more vulnerable to the harmful properties of X-ray than older women.

A later article of Randall's appeared in the Daily News in December, 1979 based on some of the findings expressed in the New England Journal of Medicine. The latter suggests that some lives and a great deal of money could be saved if the medical profession would refrain from overusing one particular procedure designed to diagnose heart disease. The procedure is known as cardiac catheterization - radiopaque chemicals are injected into the bloodstream so that the coronary arteries which nourish the heart can be seen. While most recover, a small percentage suffer heart attacks due to the examination, and some die.

In the same Journal article, Dr. Brendan Phibbs of the Kino Community Hospital in Tucson, Arizona reports that the typical physician fee for the test is $400 and the average hospital charge $890. It is estimated that there are 300,000 to 400,000 of these procedures annually, and the annual bill for them is between $387 million and $516 million, he says. He
cites several examples of cases where he feels that the doctor recommended the study for his own profit:

A 50-year old woman who underwent the test despite the fact that her symptoms of shoulder and neck pain were clearly not caused by heart disease.

A 70-year old patient who was subject to the procedure 6 weeks after she had uneventfully recovered from a heart attack.

A cardiologist (heart specialist) who admits that the result of the tests he carries out are normal 60% of the time, but that he does them anyway "because that's what the referring physician asks for."

Still another area of some danger are the chest X-rays which many job applicants must take. According to an article, Daily News November 1982, the American College of Radiology now favors restricting their use based on a study by the Food and Drug Administration's Bureau of Radiological Health. Of 75 million chest X-rays performed in 1980, at a cost of $2 billion, the study approximated that 33% were unjustified as there was little likelihood that they would detect a disease or change its treatment or outcome if they did. Except for certain high risk groups, for whom chest X-rays may still be needed, tuberculosis has become rare in the U.S. It is the opinion of the John Villforth, director of the U.S. Bureau of Radiological Health, as stated in Warshofsky's article, that at least 30% of X-rays are unproductive as they do not contribute any diagnostic information to the doctor.

What makes X-rays potentially dangerous? According to Warshofsky, medical X-rays are packed with tremendous energy, and the beams rip like lightning bolts through the delicate walls of cells, altering their metabolism, changing their character and often destroying them. If sufficient cells of a particular type are struck, the results are disastrous. Still another hazard, mentioned by Jack Anderson in his column, is the fact that 30% of all new X-ray equipment is defective and emits too much radiation, as reported by Food and Drug Administration inspectors. According to one FDA official, "Many doctors with their own X-ray machines recommend tests for their patients because it means more money."

What can we do to protect ourselves from these hazards? There is a mini-booklet called HHS Publication (FDA) 80-8088 which offers a list of valuable advice:

1. Ask How It Will Help
2. Don't Refuse An X-Ray
3. Don't Insist on an X-Ray
4. Tell the Doctor if You are or Think You Are Pregnant
5. Keep Up on New Mammography Information
6. Ask If a Gonad Shield Can Be Used
7. Keep an X-Ray Record Card

Each of the above captions are detailed; also included is a handy X-ray record card. Send for your free copy by writing to:

The U.S. Dept of Health and Human Services
Food & Drug Administration
Bureau of Radiological Health (HFX-28)
Rockville, Maryland 20857

It is extremely important that we never hesitate about asking our doctor or dentist whether the X-rays suggested are absolutely necessary. If they insist, and you still think it is not needed, refuse to comply with their request, or if you are doubtful, you might seek a second opinion. Only by asserting our rights will we eventually eliminate the dangers of excessive X-raying.

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Sample of X-Ray Record Card

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9
Government Protection – 
Reality or Myth?

By Ruth Sackman

"We're heading for a chemical doomsday. We're at the beginning of an appreciation that man has created a set of out-of-control technological monsters.'

Dr. Samuel Epstein

Warnings are proliferating about the dangers of chemical pollution of our food, water and air, but the powers with the authority to control the problem seem to either have their heads in the sand or are deliberately ignoring the peril; because of the detrimental effect government control may have on the chemical industry. How long a confrontation about the risks can be avoided seems to be limited.

Books are being written and organizations forming because of widespread suffering from the hazards of our government's policy (or should I say lack of policy?). The World Health Organization claimed that about 80% of cancer is environmentally induced; this is one of FACT's most basic concerns. Rachel Carson's book The Silent Spring, warned about chemical spraying which was endangering our wildlife; Paul Brodeur's book, The Zapping of America, documents the dangers of microwave; Dr. Samuel Epstein's book, The Politics of Cancer, takes the government to task for their neglect; John N. Ott's book Radiation, Light & Health, deals with the lack of understanding of the effect of radiation and light in health matters; Love Canal by Lois Gibbs charges government neglect. There are numerous other books and organizations attempting to alert the public in order to stir the proper federal agencies to do their job of protecting the public. In spite of this, our government consumer protection agencies continue to conduct their affairs as usual, ignoring all the overwhelming evidence that demonstrates that we are heading for a health disaster. The usual comment is that if we listen to the environmentalists, we'll have to give up everything. I say if we don't listen, we'll have to give up everything, including our lives.

The Center for Disease Control's (CDC) conclusion that AIDS is a virus has the entire country in a state of hysteria. Disease is not contagious as a rule if the body is healthy. Is it possible that the human population is too debilitated to fight off disease because the chemical pollution is destroying host resistance? After all, AIDS is an immune deficiency disease.

At the present time, our government is adding two new problems to the pollution of our environment: air, food and water.

1. The Environmental Protection Agency (EPA) (some people refer to it as the Environmental Pollution Agency) has raised the maximum contaminant level of fluoride added to drinking water to 4ppm (4 parts per million). The maximum legal level is now 2.4 ppm and scientists, doctors, patients, and others are already finding that the toxicity at 1ppm is causing severe health problems. In spite of competent and documented testimony that 1ppm is jeopardizing the people's health, EPA is seriously considering the change and will accomplish it unless the public urges their representatives in Congress to stop the EPA from this frightening decision.

2. The additional health hazard is the Food and Drug Administration's approval of the irradiation of food.

Their claim that it is not radioactive doesn't automatically mean that the treatment is safe. Is radioactivity the only concern of a government consumer protection agency responsible for protecting the American people? What about molecular changes? Is the food as wholesome as nature intended for the maintenance of health? These are unanswered questions.

John Gofman, M.D., professor emeritus of medical physics at the University of California at Berkeley, a long-time opponent of the indiscriminate use of X-rays, contends that the FDA is misleading consumers by claiming irradiation is safe. He said, "I was very upset at the Secretary of Health and Human Services and the FDA coming out and saying it is safe. They don't know that. All they know are the short-term effects. They should tell the truth. We don't know the long-term effects. I don't think it is a good policy to lie."

Dr. Gofman feels that irradiation cannot be considered safe unless a controlled long-term study is done on humans. And since "that will never happen, let the buyer beware," he concluded.

Irradiation of food produces radiolytic by-products. These are carbonyls, epoxides and aflatoxins. Aflatoxins are a known carcinogen. Samuel Epstein, M.D., professor of occupational and environmental health at the University of Illinois Medical Center and author of The Politics of cancer, calls the irradiation of food "the worst form of Russian Roulette. It is like having an experiment thrust upon the American people and it is a totally unreasonable experiment." Dr. Epstein also reported that irradiation of food may diminish levels of fatty acids and vitamins A, B, C
and E, depending on the dose and the type of food. It is questionable whether the human system can continue to tolerate the chemicalization, adulteration and irradiation of its food supply without manifesting serious physical disorders.

While the environmentally conscious people are striving to reduce health hazards, our government protection agencies are serving up their destructive programs faster than we can organize opposition. Is this hectic activity intentionally designed to burden the opposition beyond their ability to fight? Well, it does take effort. And many people are very busy. But if you recognize that you are the victim of the agency's policy, the time and effort applied now may save you from considerable more effort in working to repair your health later, providing the damage is not beyond repair.

Make your voice heard. Your congressman represents you in Washington. He cannot represent you unless he knows what you want.

If you don't know who represents your district, call the League of Women Voters, your library or your local political organization. They will have the information for you. Write and/or call NOW! Simply insist that you want all chemicals that are detrimental or just suspicious restricted unless proven otherwise. Be specific about your opposition to an increase in the fluoride in your drinking water and the irradiation of your precious food. After all these are essential for survival. Make sure they are safe.

If you want to express your disagreement with the Food and Drug Administration, the Center for Disease Control and the Environmental Protection Agency, write to your congressman and senators. The addresses are:

Congressman
U.S. House of Representatives
Washington, D.C. 20515

Senator
U.S. Senate
Washington, D.C. 20510

Recipe:
Lactic Acid Food

"Preventing cancer means, according to the results of my research, seeing to it that there is a regulation of the lactic acid metabolism in the body cells; that is it means influencing the metabolism through controlled nutrition with lactic acid fermentation products so that the physiological lactic acid, the growth and cell regeneration substance of all plant and animal cells, never becomes a pathologically overabundant substance."

The above quote is from the English translation of the book, Checkmate to Cancer, by Johannes Kuhl, M.D., who found that lactic acid foods destroyed harmful intestinal bacteria and improved digestion for the better assimilation of nutrients. He emphasized the use of lactic acid foods for his cancer patients and achieved excellent results.

Dr. Ann Wigmore has been a proponent of rejuvelac, a pleasant, slightly tart, fermented drink. It is always served at the Hippocrates Health Institute in Boston. Following is the recipe for approximately 3 cups:

1 cup of wheat berries
(organic soft white pastry wheat)
3 cups of water
A wide mouth container

1. Wash the seeds by rinsing well in tap water. Scrub seeds with the hands to remove any outer residue. Allow dead seeds to float to top of container. Skim them off and discard — they will not promote fermentation.

2. Soak the wheat berries the first time for 48 hours.
3. After 48 hours, pour off your rejuvelac. Use that for the day. It need not be refrigerated but will keep for several days if it is.

4. Pour another 2 cups of water into the jar. Allow water to ferment only 24 hours before pouring off.

5. Repeat 24 hour cycles for 3 days, so wheat berries are soaked a total of 3 times.

The recipe for rejuvelac was reprinted from the book, Recipes for Longer Life, by Dr. Ann Wigmore. It is available from the FACT book list.

FACT GRATEFULLY ACKNOWLEDGES THE CONTRIBUTIONS MADE IN HONOR OF THE MARRIAGE OF
FRIEDA FRIEDKIN and SOL KRAMER
Letters

Ruth — Keep up the good work. J.W.

Dear Mrs. Sackman:
Thank you for everything. You sure are wonderful! I am including $3.50 for the packet. Please send to the above address. C.B.

Dearest Mrs. Sackman,
It's always nice talking to you as we have been doing so many years. You always understand and are always there when needed. You are upbuilding, encouraging, loving and kind. It all helps when one has been so sick, as I have been.
With all my faith and love in my God, it helped to bring me where I am today. Thank you, my dear friend, helper and director. What more can one say when one has been so sick and confused as I was in the past. My husband and family are grateful also.
D.S.

Dear Ruth,
Enclosed is my contribution of $25.00. With my much reduced income and increasing expenses, I'm hardly in a position for giving donations. I'm making just one exception this year, and that's for your marvelous and greatly needed organization.
When able to — I will happily contribute more. I'm very grateful to you for all the wonderful help, advice and information you've been giving me for nearly 3½ years now. Fondly, R.S.

Dear Ruth,
Words fail to express my gratitude for the help and support you have given us over the years that Michele had cancer. Most cordially, T.B.

Ruth, So glad to be a continued member and supporter of all your hard efforts. I am doing well and look forward to this year's convention again. Bless you as always. M.V.

FACT, Thank you for your wonderful work.
L.G.K.

I so enjoy Cancer Forum, and I have been wondering how to renew my subscription. Thanks for alerting me. E.T.

Dear Ruth. Please accept our thanks for all your help. This small check is to cover the cost of the reading material you sent. L.M.

Proper Exercise

No one should question the value of exercise, or better still, the value of keeping the muscles toned and limber, but the present trend toward strenuous physical exercise which was meant primarily to lose weight, is not suitable for the cancer patient. To try to counteract the excessive hype about aerobics or jogging is tantamount to accusing God of wrongdoing. Well, scientific evidence is beginning to appear to substantiate our concern about cancer patients expending energy in exhaustive exercise instead of using energy for healing.

Last February at an international meeting on cancer sponsored by the University of California and the National Research Foundation, it was reported that mice and guinea pigs forced to exercise on tiny treadmills suffered cell and tissue damage. Physical exercise that generated sudden bursts of energy generated agents linked to cancer and aging.

Dr. Lester Packer, professor of physiology and anatomy and director of the Membrane Bioenergetics Group at the University of California at Berkeley, said the danger arises from violently reactive chemicals which are normally present in the body, air and food, but are over-produced and run amok during jogging, jumping and other vigorous activity. The culprits are free radicals. “A free radical is a molecule which has an unpaired electron and is, therefore, extremely reactive and tries to pair with other molecules,” claims Dr. Carmia Borek, professor of pathology and radiology at Columbia University's College of Physicians and Surgeons of New York City.

Free radicals, in their search for partners, can damage genetic material, DNA, membranes, proteins and inactivate or disrupt the normal function of cells.

Instead of jogging, aerobics, jumping or other strenuous exercise, try walking, swimming, yoga or isometrics (these appear on the following page). These are moderate, gentle, but effective techniques to maintain good muscle tone and keep the body limber.

Exhaustive exercise violates the natural harmony of the body by shifting its vitality into one area of need and depriving adequate service to the rest of the system. Moderation in lifestyle, diet and other body activity produces a more healthful response from the body. The body has its own pace and natural rhythm. Cooperation with these patterns achieves more effective results than pushing the body to the limit of its endurance.
ISOMETRICS

1. Place fingertips together. Take deep breath and hold 3 seconds while pushing fingertips together. Relax. Repeat.

2. Hook fingers together. Take deep breath and hold 3 seconds while pulling hands apart. Reverse hand positions and repeat.

3. Press arms apart with hands while holding breath as before.

4. Pull arms together while holding breath 3 seconds.

5. While sitting, push knees together with hands while pushing knees apart, also holding breath.

6. While sitting, push knees apart with hands while bringing thighs together, also holding breath.

7. With knee, push clasped hands down while pulling knee up with hands while holding breath. Repeat with other leg.

8. While bringing thigh up, push knee down with hands, holding breath. Repeat with other leg.

9. Lie on back on floor. Place feet (without shoes) against wall and push while holding breath for 3 seconds Relax. Repeat.

POSTURE EXERCISES

1. Place hands on back of chair. Take a deep breath and hold. Touch floor with right toes 6" behind you. Turn head and attempt to see right foot from over left shoulder. Return to face front, both feet together. Repeat on opposite side.

2a. Stand erect (2a). Inhale deeply, raising shoulders to ears (2b). Hold breath while rotating shoulders to the rear until shoulder blades touch, or nearly touch (2c). Gently inhale and let shoulders relax into a normal position (2d).
Annual Cancer/Nutrition Convention of The Foundation for Alternative Cancer Therapies

Aly, Karl Otto, M.D., Director of a Nutritional Clinic in Sweden
  Better Nutrition for Better Health
  Tallmogården Nutritional Program
  Waerland Dietary System
Berk, Edward, Herbalist
  Rebuilding the Immune System
  Botanicals for the Restoration of Health
B拉斯, Richard, M.D.
  Reich Therapy
Goldberg, Jane, Ph.D., Psychoanalyst
  How Stress Alters Normal Body Function
  Psychological Contributions to Cancer Contraction
Hamilton, Luelle, D.O.
  Skeletal Integrity
  Osteopathy. A Tool for Well-being
Hochberg, Arthur, Ph.D.
  Stress Can Cause Cancer and Undermine Treatment
Irons, V.E.
  Colon Management
  The Colon-Mirror of Your Health
Jensen, Bernard, Ph.D., D.C.
  Rejuvenating the Body
  Tissue Cleansing Through Bowel Management and Nutrition
  Moving the Whole Body to Health
Lansky, Philip, M.D.
  Clinical Psychoneuro-Immunology
Reich, Eva, M.D.
  The Cancer Biopathy
Rodriguez, Jose, D.C., Kinesiologist
  Balancing the Endocrine System
Roy, Leo, M.D., N.D.
  The Art of Patient Management
  Enzymes: Life's Miracle Workers
  Individualized Nutrition for the Cancer Patient
  The Individuality of Diagnosis and Treatment
Sackman, Ruth
  Cancer Causes and Prevention
  Symptoms Associated with the Biological Restoration of Health
Schatz, Albert, Ph.D.
  Fluoridation: The Great Brain Robbery
Yiamouyiannis, John, Ph.D.
  The Link Between Fluoride and Cancer
Lee, John R., M.D.
  Connection Between Fluoride Toxicity and Cancer

Case Histories
Betty Fowler (skin cancer)
Walter Carter (pancreatic cancer)
Pat Judson (colon cancer)
Richard Mott (lung cancer)
Hy Radin (cancer of the spine)
Michael Whitehill (thymoma)
Kay Windes (breast cancer)
Daniel Friedkin (embryonal)
Ruth Williams (melanoma)
Doris Sokosh (breast cancer)
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