

CANCER



STEP OUTSIDE THE BOX

Third Edition

TY M. BOLLINGER



Infinity 510² Partners

WHAT OTHERS ARE SAYING ABOUT CANCER – STEP OUTSIDE THE BOX

“This book stands out because it is so compelling and enjoyable to read.”

Frank Cooper, Author of Cholesterol & The French Paradox, Australia

“... an excellent book, well written and researched, clear and concise explanations on how alternative cancer cures work. A must for anyone considering alternative cures and confused over what to choose and why.”

Dr. K.A. Halstead, MD, London, England, UK

“In 1971 President Richard Nixon declared war on cancer. It has been 36 years. We have got to step outside the box.” *Todd L. Powell, Texas, USA*

“Greatest medical and political book I’ve seen in last 20 years.”

Alena Valova, Alberta, Canada

“This book literally shouts out the truth, holding nothing back, on the subject of cancer and cancer treatments.” *Jane Blewer, South Carolina, USA*

“This (book) is many times over worth the price because... you get cell & cancer biochemistry 101 ... history of (the) medical establishment ... alternative treatments ... and much more.” *Judith Marg, Oklahoma, USA*

“It is a fascinating, deeply moving combination of spiritual and technical thinking, all very relevant and blended very well ... as I read, I marvel at the magnitude of the task you have completed.”

Dr. David Gregg, California, USA

“Outstanding! This book stands out from any other book I have read.”

Dave Petrie, South Africa

“This book will inspire and restore hope to doctors and patients alike who are willing to look beyond the status quo to see that there are many successful alternative treatments available today to truly fight ‘the war on cancer’ ... and

Win!” *K.L. Caldwell, Missouri, USA*

“Let me thank you from the core of my soul for writing this well documented book and getting this information out to the public in a very understandable way.”

Dr. Allyn Brizel, MD, Florida, USA

“I loved this book and could not put it down!” *Liz Itter, Tempe, Arizona, USA*

“... a must read for anyone who has cancer... without a doubt the most comprehensive book on cancer ever written. It should be known as ‘The Bible For People With Cancer’.” *Jerry L. Bergman, Fairhope, Alabama, USA*

“More than a cancer cure book. It is a breath of fresh air in a screwed-up medical system.” *Dean, Chicago, Illinois, USA*

“Ty Bollinger’s book is one of the bravest critiques and commentaries I have read on the discouraging state of affairs for cancer treatment. His is a voice of hope.”
Dorla Arksey, Author of The Garden of Being, USA

“I healed my cancer ... by alternative methods ... without chemo or radiation or surgery, and did a lot of research. Recently I stumbled across Ty’s book and wish I had done so a year earlier! I can’t remember the amount of books I’ve read now on the subject or the countless studies I’ve poured over but I have yet to read such an informative, well written and incredibly researched piece of literature on the subject ... I cannot recommend it highly enough.”
D. Bell, Cancer Survivor in Australia

“This book is amazing, really easy to read, and makes you step up to the mark and take notice of what you want to do with your choices regarding the outcome of your cancer.” *Cheryn Maxwell, Australia*

“You can’t help but feel the genuine desire the author has to provide the readers with valuable information that might normally be unavailable to many readers. Great book!” *Richard Belliveau, Texas, USA*

“I must say, as a former RN on an Oncology Unit.....this is a great find. Stepping outside the box regarding cancer is your only hope.
READ THIS BOOK.” *B.C., Pennsylvania, USA*

“I have read about 10 books about alternative cures for cancer. This book is superior in several ways... Personally an alternative cancer treatment has worked for me. This is an unusual book, this is a book everyone should read.” *Paul Leveille, California, USA*

“I have read many books on various illnesses and their causes, but this one beats them all by far.” *Claudine M. Gregg, Alaska, USA*

“Every doctor should read this book... This is a great book that contains a wealth of information. But it’s only for those who can think for themselves. Thank you Ty and watch your back now.” *V. Kravets, Pennsylvania, USA*

“Since being diagnosed with prostate cancer 18 months ago, I have studied alternative measures against cancer intensely. Bollinger’s superb book is the best source I have found on this subject.” *John Memory, North Carolina, USA*

“My wife and I have enjoyed this book so much that we bought 10 more to give as gifts for Christmas this year.” *Brett Quantrille, Louisiana, USA*

“I bought this for my ex-wife who had/has pancreatic cancer, and been told to ‘go home and put your affairs in order.’ She has found this book to be a constant source of useful information, and it is at least partly to thank for her amazing recovery and continuing good health. Highly recommended.”

Charles W. Dart, Jersey, Channel Islands

“It is by far the best book in my library.” *Danielle Yerardi, Arizona, USA*

“This book is amazing. You would have to read well over 100 hand-picked books on this subject to get the information contained in this book ... The author made it simple enough for an elementary child to understand... If you are like me you will have a hard time putting the book down.”

Sherry, Coopersberg, Pennsylvania, USA

“There are many of those medical texts on the subject of cancer, but there are very few books that have the courage to take a new direction like this one.”

William Hockensmith, Texas, USA

“This book truly is a reference manual to better health and a cancer free life. Cancer is curable and reversible and this book shows you how. The author has done a great job of filtering out all the junk on the internet leaving you with the very best.” *Simon Jackson, Invercargill, New Zealand*

“The recommendations in this book have helped my brother-in-law thus far in his fight with colon cancer. He was diagnosed at Stage 4 ... and given 3-6 months. The colon cancer protocol ... helped reduce his tumor size 50% in the first 3 weeks he used it. Very thorough and well- researched.” *D. Hulslander, Texas, USA*

“Wow! This book is a real eye opener! Some of what I read ... was enough to convince even my skeptical husband. I found this book easy to read even though Mr. Bollinger used some medical/biological terminology - even my teenagers are able to understand his writing.” *Jannie Bahrs, New Mexico, USA*

“... it was easy to read and I didn’t need a professor or a scientist to translate it for me. Ty is right on target with his description of the current state of affairs with the Medical establishment and Big Pharma, and their desire to keep patients as customers rather than cure them.” *Jessica Jordan, Nebraska, USA*

“This is an unbelievable book - which opens your eyes to the brainwashing we have all been subject to. Read the book it could be a life saver.”

Mrs. S.L. Coulthard, Norwich, United Kingdom

“Time will surely prove Mr. Bollinger’s important contribution to mankind via his book, Cancer: Step Outside the Box.” *B. McCoy, New Mexico, USA*

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STEP OUTSIDE THE BOX

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Ty M. Bollinger

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The cover contains a painting entitled “Chemotherapy Injection,” which was painted by Robert Pope, a cancer victim who died in January 1992. I have included it on the cover since it perfectly captures the essence of the conventional “cancer box.” It is used with the express permission of the Robert Pope Foundation.

To order more copies of this book,
please visit the following website:

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Made in the USA

ISBN 0-9788065-0-6

Before you read this book, I must give you the following FDA mandated warning and disclaimer:

I am not a doctor. This book is for educational purposes only. It is not intended as a substitute for the diagnosis, treatment, or advice of a qualified, licensed medical professional. The facts presented in the following pages are offered as information only, **not medical advice**, and in **no way** should anyone infer that I am *practicing medicine*.

A conscious effort has been made to only present information that is both accurate and truthful. However, I assume no responsibility for inaccuracies in my source materials, nor do I assume responsibility for how this material is used. This is not a comprehensive book, thus it does not contain information on all alternative cancer treatments, but rather those treatment protocols which I have deemed the most important and most effective.

My statements regarding alternative treatments for cancer have not been evaluated by the FDA.

DEDICATION

This book is dedicated to my wonderful wife, Charlene, who is my “Princess” and my best friend. She is my “dream girl” and bride of thirteen years, the mother of my three children (*Brianna, Bryce, and Tabitha*). She truly is my inspiration. Without her, I would be nothing. She is a gift from God, the most shining example of His grace in my life, and my most passionate encourager. She truly is the “*wind beneath my wings.*” Without her support and belief in me, I would never have written this book. She not only supported me and encouraged me, but she also edited each chapter of the book and assisted me with the creation of the cover. ***Thank you Princess, for all that you are, for all that you do, and for our three beautiful children!***



At our wedding on December 23, 1995



Brianna, Charlene, Tabitha, and Bryce – taken on December 23, 2006 (our 11th anniversary) at the Hyatt Regency in downtown Dallas, Texas



In February 2008 at the wedding of Pete & Genevieve de Deugd in Palmerston North, New Zealand

ACKNOWLEDGEMENTS

I want to give a special thanks to Webster Kehr, my friend and comrade in the fight for truth in the cancer war. Webster has compiled the most comprehensive “alternative” cancer website in the world: www.cancertutor.com. Without his research, expertise, assistance, and friendship, this book would only have been a pipe dream and would never have come to fruition. Webster is not only brilliant, but he truly cares about people. **Thank you Webster!**

Special thanks also goes to my good friend, Dr. Darrell Wolfe, for his pioneering work in the areas of cleansing and nutrition. Dr. Wolfe recently retired, but prior to this, he had devoted over a quarter century to helping patients cure their disease. His booklets, Spoiled Rotten, The Fungus Within Us, and Reclaim Your Inner Terrain, were especially helpful to me in the writing of this book. Dr. Wolfe is a very close friend and an exemplary human being. **Darrell, thank you!**

Thanks to Dr. David Gregg for his insights into the causes of cancer, especially the biochemical processes which he has hypothesized and his theories on DMSO and cesium chloride. I have learned much from Dr. Gregg’s work.

Thanks to Bill Henderson, author of Cure Your Cancer, for his research, support, encouragement, and for his sincere care and concern for cancer patients. Bill is an amazing man and truly loves helping people. Bill’s website is www.beating-cancer-gently.com.

Thanks to Tanya Harter Pierce for her amazing cancer research, especially with Protocol™, and for her amazing book, Outsmart Your Cancer. Tanya’s website is www.outsmartyourcancer.com.

Thanks to Dr. Saul Pressman for his assistance with this third edition of the book, his contribution to the ozone section, and his insights into the hypoxia theory on cancer origins.

Thanks to Dr. Robert Young, especially for his book Sick and Tired - Reclaim Your Inner Terrain, a phenomenal book which was a priceless resource to me.

Thanks to Mike Adams, “the Health Ranger,” who writes incredible health and wellness articles for www.naturalnews.com. His research, books, and articles are fantastic; he is a true leader in the fight for health freedom. With his permission, I have sprinkled numerous “Counterthink” cartoons throughout the book. **Thanks Mike!**

I also want to acknowledge the many “mavericks” of the medical world that did **not** settle for the status quo in cancer treatments, but dedicated themselves to finding natural ways to effectively fight cancer. The courage, innovation, and dedication of these doctors, researchers, and authors have saved the lives of thousands of cancer patients. And it is only because of their groundbreaking work that a book like this (*by a “non-doctor” like myself*) is possible.

To my brother, Ron, and sister, Cherith, I want you both to know that I love you. I know it’s been hard losing mom and dad, but I am thankful that we all have such fond memories of both of them.

To my 3 kiddos, Brianna, Bryce, and Tabitha, “Daddy loves you!”



Bryce, Tabitha, and Brianna – taken in November 2008

IN MEMORY OF

This book is in memory of my mom, Jerry Jean Bollinger Taylor, and my dad, Charles Graham Bollinger. Mom and dad were the best parents I could have ever asked for, and they both loved me unconditionally. They were always there to support me, to love me, and to point me to the Lord.

In different ways, they were each my hero. When I look back on my life, I can honestly say that I do not have a single bad memory of mom and dad. Their smiles were contagious, and so was their zest for life. Now that they are both gone, there are two holes in my heart which will never be filled. *But I will see them both again in Heaven.* That is my hope.



The last picture of Mom and Dad – taken in 1995

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FOREWORD

One day I came home from work and my wife happened to be in one of the bedrooms. I walked into the bedroom and she looked at me and said: “I went to the doctor today and he said I have diabetes.” As near as I can remember, these are the exact words I said to her: “So what? The cure for type 2 diabetes is on my website, just go to my website.”

I then walked out of the room without another word being spoken. A couple of hours later I concluded I had been a bit brash, so I went to the health food store and bought the things she needed that I could buy locally, then I ordered the rest from the Internet. Within 2 months she was able to quit monitoring her blood glucose. The cure is found at www.cancertutor.com/Diabetes/Diabetes_Type_II.htm.

Had my wife told me her doctor told her she had breast cancer or pancreatic cancer or just about any other kind of cancer, my response to her would have been identical, except for substituting whatever kind of cancer she had for the term “type 2 diabetes.” My website is similar to Cancer – Step Outside the Box, in that it is designed to point people in the right direction to save them months of doing their own research. Curing newly diagnosed cancer is easy; however, there are a few kinds of cancer (like squamous cell carcinoma) for which you need to pick the correct treatment the first time or you may not get a second chance.

A cancer cell is described as being “undifferentiated.” What this means is that a cancer cell has no useful function. For example, a group of cancer cells cannot form muscle tissue, nor can a cancer cell become a functional part of muscle tissue. A cancer cell cannot become a functional part of a heart muscle. It cannot perform a function as part of the liver. A cancer cell can do nothing that is

constructive. It just sits there. A cancer cell is like a blob of oil – you cannot integrate it into the frame of an automobile while it is still a blob of oil.

In a similar way a cancer cell cannot become part of tumor tissue, since tumor tissue must be composed entirely of healthy cells. The cancer cells just sit inside the tumor tissue, doing nothing except multiplying and refusing to die. Biopsies essentially are looking for cancer cells that are just sitting there. Because the majority of the cells in a tumor are healthy cells (*all of the functional cells are healthy cells*), there are not enough cancer cells inside a tumor to kill a person. In other words, no person has ever died from the cancer cells inside a tumor. This is because there cannot be enough cancer cells in a tumor to kill a person. Likewise, no one ever died from the cancer cells inside of the prostate gland. Benign tumors have grown to hundreds of pounds and still not killed the patient.

What kills cancer patients is the **spreading** of their cancer cells. When the cancer spreads enough, there are enough cancer cells to kill a person. A large number of cancer cells will literally suck the life out of a cancer patient by stealing glucose and nutrients from healthy cells by creating toxins like lactic acid. But in order to kill a person, the spreading has to go far beyond any tumor (*there are rare exceptions to this rule, such as when a tumor is blocking the flow of vital fluids*). Yet, in spite of these facts, oncologists continue talk to patients about their tumors.

This quote, by the late Dr. Philip Binzel, M.D., explains what I am talking about.

“When a patient is found to have a tumor, the only thing the doctor discusses with that patient is what he intends to do about the tumor. If a patient with a tumor is receiving radiation or chemotherapy, the only question that is asked is, ‘How is the tumor doing?’ No one ever asks how the patient is doing. In my medical training, I remember well seeing patients who were getting radiation and/or chemotherapy. The tumor would get smaller and smaller, but the patient would be getting sicker and sicker. At autopsy we would hear, ‘Isn’t that marvelous! The tumor is gone!’ Yes, it was, but so was the

patient. **How many millions of times are we going to have to repeat these scenarios before we realize that we are treating the wrong thing?**

*In primary cancer, with only a few exceptions, the tumor is neither health-endangering nor life-threatening. I am going to repeat that statement. In primary cancer, with few exceptions, the tumor is neither health-endangering nor life-threatening. **What is health-endangering and life-threatening is the spread of that disease through the rest of the body.** There is nothing in surgery that will prevent the spread of cancer. There is nothing in radiation that will prevent the spread of the disease. There is nothing in chemotherapy that will prevent the spread of the disease. How do we know? Just look at the statistics! There is a statistic known as ‘survival time.’ Survival time is defined as that interval of time between when the diagnosis of cancer is first made in a given patient and when that patient dies from his disease.*

*In the past fifty years, tremendous progress has been made in the early diagnosis of cancer. In that period of time, tremendous progress had been made in the surgical ability to remove tumors. Tremendous progress has been made in the use of radiation and chemotherapy in their ability to shrink or destroy tumors. **But, the survival time of the cancer patient today is no greater than it was fifty years ago.** What does this mean? It obviously means that we are treating the wrong thing!” – Dr. Philip Binzel, M.D., Alive and Well, Chapter 14*

In a nutshell, Dr. Binzel is saying is that nothing in orthodox medicine stops the spread of the cancer. You might think that chemotherapy is designed to stop the spread of cancer. Chemotherapy does not target cancer cells. It kills fast growing cells, whether cancerous or non-cancerous. Some cancer cells are not fast growing, thus chemotherapy may not kill them. Some cancer cells develop a resistance to synthetic drugs, so chemotherapy cannot kill them, etc.

The bottom line is that if a person took enough chemotherapy to kill all of their cancer cells, the patient would die from the toxicity of chemotherapy long before the cancer cells would all be killed. **Chemotherapy can only slow down the cancer; it cannot stop it from spreading and killing the patient.** Chemotherapy puts people in “remission,” but in almost all cases the patient will come out of remission and die. Many cancer patients don’t live long enough to go into remission, others go into remission several times.

Surgery certainly does not stop cancer that has already spread because in almost every case the cancer has spread far beyond what a surgeon can cut out. Radiation is like a rifle. Can you put out a carpet fire (*i.e. a spreading cancer*) with a rifle? The only thing orthodox medicine can do is shrink tumors and slow down the cancer and temporarily put patients in remission; orthodox medicine cannot stop the spreading of cancer – **PERIOD!!!**

What this means is that the Food and Drug Administration (FDA) has **never** approved a chemotherapy drug that can target cancer cells or stop the spread of cancer. Every chemotherapy drug they have ever approved is virtually worthless or does more harm than good. Furthermore, the American Medical Association (AMA, *which is nothing but a labor union*) has **never** approved a procedure that can stop the spread of cancer.

No medical doctor (*who uses the “Big 3”*) has ever administered a synthetic drug or done a medical procedure that stopped the spread of cancer. That is not what they do. What they do is slow down the cancer, in some cases. You might ask: do they want to stop the spread of cancer and cure the patient? While individual doctors may want to cure their patients, as far as an industry is concerned, the evidence is overwhelming that the answer to that question is **“NO”!!** This book, Cancer – Step Outside the Box, will discuss case after case of natural cancer treatments (*i.e. alternative cancer treatments*), and even some orthodox cancer treatments, that were shut down by the authorities (*usually the AMA, FDA or FTC*) **because** they were too effective at curing cancer!!

There is a pattern in medicine that effective cancer treatments are shut down from public view and highly **ineffective** synthetic drugs

(they are profitable because they can be patented) are routinely approved by the FDA. It is a scam the likes of which the world has never before seen. Future doctors will look at this generation of “doctors” in total disgust. They have had many opportunities to cure cancer, but rather than cure cancer, they bury the treatment and make it illegal to use.

The only logical motto to assign to both Big Pharma (the pharmaceutical industry) and Big Medicine (the AMA) is this: **“It is far, far more profitable to slow down the spread of cancer than to stop the spread of cancer. Everything that stops the spread of cancer MUST be shut down.”**

The long term goal of the quid pro quo marriage made in hell between the FDA, AMA and Big Pharma (i.e. the core of the “Cancer Industry”), is to make cancer into a chronic disease like diabetes, whereby the patient becomes a long-term profit center. Just look at the newspapers. Almost every week some new drug is approved by the FDA that extends the life of cancer patients, compared to prior worthless drugs. That is exactly what they want to do. You will never see a cure for a cancer unless it is an extremely rare type of cancer; such that the public relations propaganda is of more financial benefit to the Cancer Industry than the money lost to the cure. You will **never** see a cure for breast cancer, for example.

The child of the marriage made in hell is the American Cancer Society propaganda machine that is tasked to make orthodox cancer treatments look far, far more effective than they really are. They are the makeup artists for the monster. You probably think the true cure rate of orthodox medicine is 40% to 50% and growing rapidly. Nope. It has been 3% for the last 80 years and it isn't going anywhere.

Are there any natural cancer treatments (i.e. *alternative cancer treatments*), meaning the use of molecules from Mother Nature, that have been shown to target cancer cells and stop the spread of cancer and cure a patient? You probably think the answer is ‘no’. That would be the wrong answer. There are dozens of alternative cancer treatments that can stop the spread of cancer and even cure

the cancer completely. **In this excellent book, Ty Bollinger discusses the most proven of these treatments.**

However, as you might suspect, the FDA has ***never*** approved one of these cancer treatments because the drug companies have never submitted one of them to the FDA. This is partly because Big Pharma cannot patent natural molecules (*and thus make their obscene profits*), and it is partly because the AMA doesn't want cancer to be cured. The AMA does not allow medical doctors to use effective cancer treatments. Since these treatments have not been submitted to the FDA by the pharmaceutical industry, the FDA labels them as “unproven,” no matter how much scientific evidence there is for the treatment.

That is why accountants, housewives, farmers, engineers, etc. are leading the battle against the Cancer Industry. But these people have absolutely zero clout with the media. By the way, the FDA, National Cancer Institute (NCI), National Institutes of Health (NIH), ad nauseum, are **not** the angels in this equation. They too have sold their souls and know exactly what is going on.

Mother Nature's molecules, as a general rule, **ALWAYS** target cancer cells or do no harm to normal cells. Thus, Mother Nature's molecules can be used in much, much higher doses than Big Pharma's molecules. That is why Mother Nature has a true cure rate that is **thirty times higher than orthodox medicine** for recently diagnosed patients!!

Mother Nature (i.e. God) knows a lot more about cancer than the pharmaceutical industry chemists. More importantly, Mother Nature has a lot more integrity than the executives of the pharmaceutical companies. Judgment Day will take care of them and their brothers in the tobacco industry, federal government, etc., forever, but that is probably not your immediate concern. Your immediate concern is that Mother Nature knows how to target cancer cells and stop the spreading of cancer.

So why haven't you been brainwashed into believing in alternative medicine? Why haven't you heard these things a thousand times on television or radio or in the major magazines? ***Because if they told***

you these things, the pharmaceutical industry would pull all of their advertising money and give that advertising money to a competing station or magazine.

Also, to a large degree the same people who make huge profits supplying and working with orthodox medicine also own the large television and radio networks. For example, General Electric, which makes huge profits from supplying hospitals with expensive equipment, and by selling prescription drugs, etc. owns the NBC network and at least 30 major NBC affiliates. General Electric is a member of the Cancer Industry and they own NBC!

What you know about cancer has been carefully designed and crafted by the pharmaceutical industry propaganda artists to keep you in the dark about the vast superiority of Mother Nature at treating cancer. Unfortunately, some of the people who are on the natural side of the street (i.e. *the alternative medicine people*) do not have any more integrity than the tobacco companies and pharmaceutical companies. The good news is that this book, Cancer – Step Outside the Box, will set the record straight. It will tell you about the alternative cancer treatments that really work and in many cases the vendors or clinics that will assist you in using the treatments. However, this book is just as important for people who don't have cancer as it is for people who do have cancer. Consider these factual statistics:

- A true cure rate of 90% or more can easily be achieved by cancer patients who avoid orthodox medicine, go with alternative medicine first, and do their homework
- The true cure rate of orthodox medicine is 3% or less
- 95% of cancer patients who go with alternative cancer treatments have previously had the full orthodox treatment and have been sent home to die, meaning alternative medicine is handed a large number of cancer patients already in critical condition
- For those who wait to go with alternative cancer treatments until after they have been sent home to die, only a handful of the 300+ alternative cancer treatments are strong enough to give them a chance of survival

- But even for those rare people who do find one of those potent treatments (e.g. those who read this book), at best they only have a chance of survival of about 50%

In other words, if you go with alternative medicine first, your chance of survival is 90% or more, if you do your homework. If you go with orthodox medicine first, and then alternative medicine second, you will have years of suffering and if you are lucky you will then have a 50% chance of survival.

As you can see, books like Cancer – Step Outside the Box are critical to read. This book may save you months of research time and point you in the exact direction you need to go.



- R. Webster Kehr

www.cancertutor.com

www.new-cancer-treatments.org



Graham Bollinger (my dad)



Jerry Bollinger Taylor (my mom)



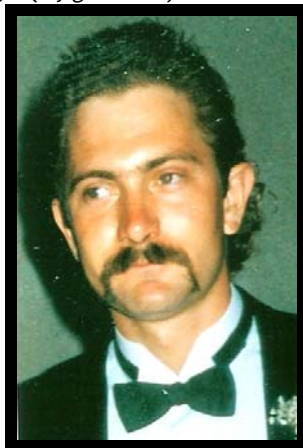
Conal Bollinger (my granddad)



Helen Cade (my grandma)



D.E. McCoy (my granddad)



Glenn McCoy (my cousin)



Joel Bollinger (my uncle)



STEP OUTSIDE THE BOX

INTRODUCTION

My name is Ty Bollinger. One hundred years ago, it was estimated that only **one out of eighty** Americans was diagnosed with cancer. Today, approximately **one in three** Americans will be diagnosed with cancer during their lifetime. It is estimated that by the year 2020, **one in two** Americans will have the same diagnosis. Cancer fatalities account for approximately twelve percent of all deaths worldwide each year. Across the globe, over ten million people are diagnosed with cancer annually and almost seven million die from cancer. According to the World Health Organization, global cancer rates could increase by fifty percent in the next fifteen years. The USA ranks in the top three countries with the highest cancer rate in both men and women. Sounds like a “**cancer epidemic**,” doesn’t it?

Most families have been touched by cancer. My family is no exception.

- In July 1996, my dad, Graham Bollinger, died of cancer.
- In November 1996, my granddad, Conal Bollinger, died of cancer.
- In May 1997, my cousin, Glenn McCoy, died of cancer.
- In July 1997, my uncle, Joel Bollinger, died of cancer.
- In February 1999, my grandmom, Helen Cade, died of cancer.
- In August 1999, my granddad, D.E. McCoy, died of cancer.
- In February 2004, my mom, Jerry Bollinger Taylor, died of cancer.

As you can easily see, my family has been devastated by cancer.

The first section of this book is in honor of my mom and dad, as I attempt to tell the stories of their last days, their separate battles with cancer, and the way that they both inspired and touched all of the people who visited them. During the weeks just before my dad died in 1996, I began my “cancer journey.” What I have learned on my journey has truly amazed me. Not only have I learned about the

incredible effectiveness of many alternative cancer treatments and the remarkable recoveries of literally thousands of supposedly terminal cancer patients, but I have also learned about the medical industry's suppression of these treatments and persecution of the courageous and innovative medical mavericks that have stepped "**outside the box**" and developed these treatments. I have learned about the politics of cancer and the greed of the pharmaceutical companies. I have learned about the war between proponents of conventional and alternative cancer treatments. Sadly, I have learned that both dad and mom would probably be alive today if knowledge of these alternative cancer treatments had been made available to the public.

One interesting thing I have learned is that alternative cancer treatments involve much, much more than just taking a quick trip to the local health food store and buying a few bottles of vitamins and minerals. The science behind alternative cancer treatments is truly remarkable. The specific mechanisms by which certain protocols fight cancer are amazing. As a matter of fact, several alternative cancer treatments have been developed by Nobel Prize winners.

At the time of the writing of the third edition of this book (2009), if you google "cancer," you'll get over 240,000,000 hits. Saying that there's a "*lot of information out there*" is like saying that the ocean is "**a little bit wet.**" This amount of information can easily overwhelm someone who is just beginning to research cancer. It is at this point that people can soon become lost in the cancer "jungle." At such a critical time in your life, just who do you trust? Many websites sell all sorts of pills and potions. Some websites like quackwatch.com do nothing more than criticize alternative cancer treatments, while their willful and hypocritical inattention to accuracy is a disgrace. Other sites are overly technical and are virtually impossible to comprehend. How can you sort through it all? *Who's right? Who's wrong?* It's easy to become overloaded, and say "*forget it – this is impossible – I won't even bother.*"

When Sam Houston was battling Santa Anna in the 1830s and retreating daily, legend has it that he said, "*It's time to draw a line in the sand.*" To which a cowhand serving under him said, "*Well Captain, you've got plenty of sand to choose from.*" With so much

readily accessible information on cancer and cancer treatments, choosing where to draw the line in the sand is harder than ever. It is my hope that Cancer – Step Outside the Box will be your “*line in the sand*” since it clearly and succinctly explains the facts and deceptions about cancer and cancer treatments.

Most people have neither the money nor the time to buy and read the numerous books that have been published on the medical, financial, and political aspects of cancer. I am optimistic that this book will serve as a concise, yet comprehensive, source of information on the intricate and reprehensible politics of cancer and help readers make informed decisions about nutrition, cancer prevention, and alternative cancer treatment protocols.

I am a CPA. When I was getting my Masters degree in Taxation at Baylor University, one of the many valuable skills I developed was the ability to thoroughly research an extremely complex subject, come to a conclusion based upon the specific facts and circumstances, and then summarize my findings in a concise memorandum. “*Deciphering*” the Internal Revenue Code into layman’s terms is no easy task, but I believe that this ability has enabled me to summarize and organize vast amounts of cancer research and to ultimately write this book.

In the accounting profession, we prepare financial statements for our clients. One type of financial statement is referred to as a “*compilation*,” which is basically nothing more than *compiling* numbers provided by our clients. In other words, we take their information and present it in a format which is easily recognizable and understandable. In a very real sense, this book is nothing more than a compilation of information I have learned from reading dozens of books and visiting thousands of websites.

By no means is this book a scholarly work. I decided to write this book in layman’s terms, with a minimum of medical jargon and without long lists of references. Now, don’t get me wrong, I do cite numerous studies, I do have numerous scientific references, and I do quote numerous experts. But, I have tried to keep these references “*sprinkled*” throughout the book in situations where

they are important and relevant. There is a glossary at the end of the book to assist you, as well as an index.

Honestly, there are dozens of outstanding books on the subjects of cancer, nutrition, and treatment protocols, but far too many of them are mired down in voluminous amounts of medical jargon and technical details, thus they are either too difficult to understand or just too boring to read. Many of these books leave you with more questions than answers. You begin reading confused and when you finish reading, you're even more confused. Others write in a type of "cryptic gobbledygook" that can only be deciphered by other doctors, scientists, and academicians.

Unlike Emeril Lagasse, who likes to "kick it up a notch," my goal was to "bring it down a notch" and enable you to actually comprehend complex medical information as it regards to cancer, nutrition, and overall health. However, this book does contain much terminology which builds upon earlier definitions, so I strongly suggest that you read it from start to finish, without skipping sections. I hope and pray that you find this information useful in your pursuit to prevent, fight, and/or cure your cancer. May the Lord use it as a stepping stone for you to either regain or maintain your health. If you are willing to be open-minded and step "outside the box," I think you will benefit from the book.

God Bless!



Ty M. Bollinger
Author

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STEP OUTSIDE THE BOX

MOM & DAD

MOM AND DAD WERE THE BEST PARENTS I COULD HAVE EVER ASKED FOR, AND THEY BOTH LOVED ME UNCONDITIONALLY. IN DIFFERENT WAYS, THEY WERE EACH MY HERO. NOW THAT THEY ARE BOTH GONE, THERE ARE 2 HOLES IN MY HEART WHICH WILL NEVER BE FILLED. BUT I WILL SEE THEM BOTH AGAIN IN HEAVEN. THAT IS MY HOPE.

CHARLES GRAHAM BOLLINGER

*A*round 5 PM on July 1, 1996, Charlene and I stopped by Subway and got a few sandwiches, then we headed over to mom and dad's house in Northwest San Antonio. My dad, Graham, had been having abdominal pains for a few weeks. He had gone to the doctor and they thought it may be a parasite in his stomach, perhaps cyclospora, which is promulgated through bad strawberries. Little did we know that this would be the last time we would all eat together. After dinner, dad and I were upstairs talking about what may be the cause of dad's stomach pain when, out of the blue, he said "***I sure hope I don't have cancer.***" I responded, "Oh, don't worry Dad, I'm sure it's nothing major... you're only 52 years old."

Later in the evening, we were all upstairs visiting. Charlene and I were getting ready to go to the gym and work out. All of a sudden, dad doubled over in pain, grasping his abdomen. It was a pain which none of us had ever seen before. Dad was 6'2" and about 220 pounds, and he was tough. But the pain overwhelmed him and we began to worry...really worry. Mom's face was filled with fear as she told her husband of almost thirty years that he needed to go to

the hospital. He said that he would be alright and tried to go downstairs. I had to support him while he struggled down to the living room. Once downstairs, it was evident that dad was not getting any better, and I told dad that we needed to get to the hospital ASAP. Dad agreed.



Physically, dad was a picture of health, so we thought. He didn't drink alcohol, didn't smoke, and exercised regularly. Spiritually, he was **a giant**. He walked with Jesus the way few ever have, and his priorities were well defined: 1) God, 2) Wife, 3) Children & Parents, and 4) everything else. Since dad never engaged in behavior which would typically cause any serious medical condition, we were sure it must be a minor thing. Off to the hospital we went.

On the way, it was evident that dad was in excruciating pain, but his only words were words of apology for the inconvenience he was causing the rest of the family. He said over and over what good nurses he had as Charlene stroked his hair and mom cooled his forehead with a wet rag. His thoughts were, as always, focused on others rather than himself. Around 7 PM, we arrived at the hospital. Dad was admitted immediately and the doctors began to run a series of tests to diagnose the problem. I called my brother Ron and told him to come to the hospital. We decided not to call my sister, Cherith, who was in college at Hardin-Simmons University in Abilene, until more was known.

By 9 o'clock, the doctors had preliminarily assessed the problem to be gallstones, with the operation to remove them scheduled for the next morning. With everything seemingly alright, Charlene and I had to leave to clean a couple of small office buildings for our janitorial service. We planned on coming back to the hospital to check on everything when we finished... probably around midnight.

As we arrived back at the hospital just before midnight, much to our surprise, mom told us that they had already taken dad into surgery. Perhaps the gallstones were worse than originally anticipated. I called Cherith and told her that dad was in surgery for gallstones, but not to worry. Everything was going to be fine.

One o'clock, two o'clock in the morning... still no word from the doctors. After 3 hours of surgery, it was apparent that the problem was a bit more serious than originally perceived. Three o'clock AM and we were really worried. Finally, about 3:30 AM, the surgeon met all of us in the waiting room - Ron, Charlene, mom, and me. I'll never forget the look on his face when he came out of the operating room. It was one of both shock and hopelessness. Shaking his head in despair, the first words he said were "**It's just so advanced... and he's so young. It's cancer.**" Mom almost collapsed and began to weep uncontrollably. We all began to weep. How could this be? It was just supposed to be a gallstone operation! Ron ran out of the room in tears. We all comforted each other with hugs and words of hope. I called Cherith again to tell her the bad news. It was 4 AM.

The doctors had to remove about 1/3 of dad's colon and a large part of his stomach as well. They had cut an 8 inch incision running vertically down his stomach. The cancer had metastasized to his lymph nodes and pretty much all over his abdominal region. We went home to get a couple of hours of sleep and returned to the hospital around 11 o'clock Tuesday morning.

The doctors told us not to mention the cancer yet to dad, so with all the cheer we could muster, we entered his hospital room. He looked tired and confused. He didn't know what had happened to him, remembering only coming to the hospital the night before. We all encouraged him that everything was going to be OK and that he just needed to get some rest.

One of dad's nurses was a fine Christian man named Jeff Ronk. We attended church with Jeff, and he helped calm our fears and assured us that dad was in good hands and that he would personally make sure that he received the highest degree of care. What a blessing for God to have placed Jeff in this situation.

Several members of our church began to arrive at the hospital. Dad and mom had attended Believer’s Fellowship since they moved to San Antonio about 8 years prior, and the church members were like family to them. Around 1 PM, I remember that Charlene and I were leaving the hospital to get some sleep during the afternoon hours when we saw Jim Bryant, an elder in our church, drive up and park. As we began to inform him of dad’s condition, all I could say was **“Dad has cancer... it’s real bad”** as we all began to cry and hugged each other.

That afternoon, we tried to get some sleep, but it was difficult. Charlene and I didn’t have any children at that time, and all I could think was that dad wouldn’t be around to see his future grandchildren. Charlene and I had only been married six months earlier. All I could do was softly sob as I lay there.

When we arrived back at the hospital, we were amazed at the number of people who were there to see dad. He was a man who loved to chat, was always friendly, and made others feel important because he would take the time to listen to them. He lived for Jesus and did his best to treat others the way Jesus would have treated them. The waiting room was full of people and food – fruit cakes and cookies, sodas and sandwiches, apples and bananas. Some looked despondent while others seemed joyous to be able to serve the family.

Dad still didn’t know that he had cancer, and we didn’t want to tell him. But I didn’t feel right about dad being in the dark, so I asked the doctor if I could tell dad the truth. The doctor said that was a good idea. I had never been in a situation like that before and I wasn’t sure what to say to dad, but I knew that the words would be there when I needed them. I knew that I needed to be strong for my family and my dad, so I entered dad’s room and held his hand. **“Dad...do you know what has happened?”** I asked. Dad shook his head from side to side. **“They found cancer in your stomach last night and took it out.”**

I expected dad to look shocked, but he didn’t look surprised. As a matter of fact, he looked like he suspected it and was relieved to know the truth. Being an intelligent man, he probably could tell that

something must be fishy since half the church had been there to visit that day. “*It’s going to be OK, dad. They got all the cancer and you just need to rest and recover.*” Although the doctors indicated that they definitely did not get all the cancer, I figured that this little fib wouldn’t hurt anything and may help his spirit and mental state.

Dad stayed in recovery for the entire day as reality began to set in with the family. He had actually had a four hour surgery for stomach cancer! It was almost as if we were watching ourselves on TV, not at all reality, bewildered by the twisted turn of events in the past 24 hours. Imagine the transition from thinking that dad had a mere parasite to the stark reality that he actually was being devoured by cancer. It was as if someone was playing a practical joke and things were going to be normal soon... ***but this was no joke.***

Why had this happened? We just didn’t understand. Dad was a healthy man of only 52 years. He exercised regularly, watched what he ate, and had no vices. He didn’t smoke or drink, and had only taken a few aspirin in his entire life. This didn’t seem fair. People like dad weren’t supposed to get cancer. Cancer was for people who were careless about what they put in their body... not someone like my dad.

The doctors discharged dad from the hospital on Friday, July 12th. I had begun researching alternative cancer treatments and was very interested in taking dad to the Bio-Medical Center (*formerly the Hoxsey Clinic*) in Tijuana, Mexico. I also had read about the healing properties in fresh carrot and beet juice, so I went to the whole foods store to get some organic vegetables.

While confined to his bed at home, dad had written a letter to the church stating that he, like the apostle Paul, didn’t know if he would live or die, but wanted to trust God and give Him the glory no matter what. Dad’s exact words were, “***To live is Christ, and to die is gain.***” We took it to church on Sunday and gave it to our pastor, Bruce Blakey. He read it to the congregation – many of them were in tears.

Tuesday afternoon was spent together at dad and mom’s house. Dad and I had listened to a sermon as he rested. Charlene and mom

took some time to get mom's nails and hair done. I was optimistic about the possibility of dad traveling to Tijuana, Mexico to visit the Bio-Medical Center. Their alternative cancer treatments had achieved phenomenal results, and I was sure that they could help dad. I made several calls and spoke to the doctors at the clinic. Tentative plans for the middle of August were set and I was already thinking about the possibility of a full recovery for my dad.

If dad could just recover from the surgery, he could begin the herbal remedies that were available at the Bio-Medical Center. But that was a big "IF." As he lay napping, I began to realize just how much my dad meant to me. I began to cry softly as I realized that it was a very real possibility that he actually might not recover, but I held back the tears when I saw mom and Charlene pull into the driveway.

They both looked radiant as they emerged from the car as they laughed and chatted. It was nice for me to see them smile, as the past two weeks had been filled with so much sadness. As dad slept, we discussed the plans to take him to Mexico once he was physically able. We all agreed that if dad were to recover from surgery soon, there was an excellent chance that the Bio-Medical Center would be able to cure the cancer naturally. It was our only hope...it was our fervent prayer...

Charlene and I left about 5 PM to take care of the janitorial business. We finished around 11 PM and upon arrival back at our apartment, I saw that there were 12 messages on the answering machine. I felt an immediate knot in my stomach as I realized that something bad must have happened to dad. As we listened to the messages, our hearts began to race faster and faster. The first message was my brother Ron telling us that around 7 PM, dad had begun to bleed out of his nose and rectum and mom had called an ambulance. He was back in the emergency room. The stitches from the first surgery had not held, and he was bleeding internally.

The next morning, Wednesday, at around 8 AM, we were able to see dad for the first time since he was re-admitted to the hospital. His face was swollen so badly from the blood transfusions that he was almost unrecognizable. I'll never forget mom and Charlene as they emerged from his hospital room after seeing him. At first

glance from someone who didn't know dad, he looked bad, **real, real** bad. Not a pretty sight, if you know what I mean. Even his voice didn't sound like him at all. As Charlene went in to visit with mom by his side, she said she got to feed him ice chips.

Of course, dad was pleasant and smiling with a thankful heart for the ice. Just then, Charlene in her heart knew she was beholding one of the most beautiful men in the world. Before she could even speak it, mom said, **“He's beautiful, isn't he?”** Charlene emphatically said, **“Yes!”** with a big smile. They both saw dad's inner beauty. As I went into his hospital room, the first thing he wanted to talk about was his life insurance policy. He said, **“Ty, take care of your mother,”** as I began to cry. I knew that dad knew he didn't have much time left.

That Friday, I was in dad's hospital room with John Gordon, an elder at our church. Over the past 3 days, he had an astonishing 18 pints of blood transfused. They just couldn't stop the internal bleeding. He was on a morphine drip and was coming in and out of consciousness. When someone is under that much sedation, you really get a true picture of their heart, as they really have no control over what they say. And it was confirmed that dad's heart belonged to the Lord.

I remember at one point that dad woke up, looked up at me and said slowly as he had an oxygen mask over his face and being filled with morphine, **“I love you Ty.”** Then, he looked across the room and saw John Gordon, and said **“Hello, brother John.”** As he wasn't able to have any water or even ice chips at this point, he said, **“I sure am thirsty. I sure could use a cold glass of water. But I sure am thankful I have the ‘Rivers of Living Waters’.”** Then, he let go of our hands and said, **“Sleep.”** And immediately, he was back asleep.

Later that evening, we spoke to the doctor who informed us that dad's kidneys were shutting down and that we needed to make a decision as to whether or not to place him on life support. Based upon dad's specific request, we told the doctor that we were not interested in that option. I remember staying up most of the night, faced with the stark reality that my dad was going to die soon.

The next day, grandmom and granddad came down from Dallas to see dad one last time. Sunday morning, Charlene and I traveled with Ron and Uncle Tim to Ingram, Texas to purchase a gravesite and a tombstone. We took dad's car, and during the hour drive up to Ingram, we listened to one of his cassette tapes. I remember hearing one of his favorite songs and beginning to weep as I reminisced about dad playing the song over and over.

That evening, dad met with the entire family and spoke directly to each person, telling all of us that he loved us and that he had no regrets. God's grace was shining through dad, and he was a pillar of strength. After we met with dad, the doctors said that his heart had sped up to around 180 beats per minute, and that it was only a matter of hours until he was gone.

On Monday afternoon, dad went into a coma. He never recovered. On Thursday, July 25, 1996 at 7:10 AM, Charlene and mom and I watched him take his last breath. ***Dad went to be with his Savior, Jesus Christ.***

You can rest assured that in his final weeks and days, my dad reflected on his life and on the love that he had for each and every member of his family. And when his time came, the angels came to take him to that wonderful place where God dwells and where he will spend eternity. He is now with his Lord and Savior, Jesus Christ, learning and worshipping Him. It has now been almost 13 years since he died, but in "heaven time" it is as if he just arrived. In the words of that great hymn, Amazing Grace, "***When we've been there ten thousand years, bright shining as the sun, we've no less days to sing God's praise, than when we first begun.***"

JERRY JEAN BOLLINGER TAYLOR

Dad's death devastated mom. They had been married 30 years and she was now alone for the first time in three decades. She cried constantly and seemed unhappy with life. Mom had always been the type person to light up the room when she entered, but without dad, she must have felt empty and hopeless. Charlene and I spent countless hours with mom, especially during the first year after dad died, trying to console her and attempting to distract her from her deep sorrow.

In November of 2001, mom got engaged to Jack Taylor. We never thought she would re-marry. But we underestimated God. Jack Taylor was the preacher who had married mom and dad some 30 years prior, and he had recently lost his wife to cancer. Mom and Jack fell in love and were to be married in May of 2002. We were thrilled that mom had something to live for and someone to love her.

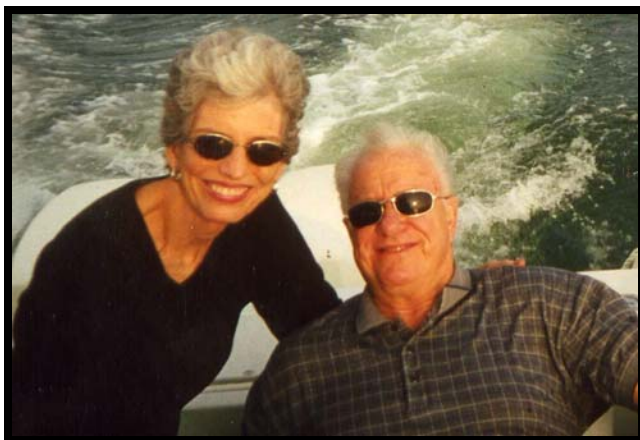
In January of 2002, I flew from Pittsburgh to San Antonio to be with my mom during surgery. Two months prior, in October 2001, the doctors had discovered a small cancerous tumor in mom's stomach and she was to have it removed. This was a common surgery and there was nothing to worry about. So we thought. . .

Thirty minutes into surgery, Dr. Caldarola came out of the surgery room in tears. You see, mom taught 5th grade at Castle Hills First Baptist School in San Antonio, and she had taught all of Dr. Caldarola's kiddos. His wife was the school nurse. They all loved mom. Dr. Caldarola said that her entire stomach was riddled with cancer, and the only options were to sew her up or to take out her entire stomach (*a total gastrectomy*). I asked him, **“If this were your mother, what would you do?”** He said that he would remove her stomach. I then said, **“Go for it.”** That was our decision.

Jack Taylor is a phenomenal man. The next morning, after mom had a total gastrectomy and with the doctors bleak about the possibility of her surviving more than a few months, mom was adamant about not marrying Jack and putting him through this again, since he had recently lost his first wife, Barbara, to cancer. But Jack told her that he was still going to marry her and that he would take care of her. How many other men would have been that committed to their fiancé? Especially after they had just lost their wife to cancer? As I said, ***Jack Taylor is a phenomenal man of God!***

Well, they ***did*** get married in May of 2002, just as Jack had promised mom. You see, Jack is an evangelist, and they traveled the world, spreading the Gospel of Jesus as well as their story of falling in love again. Mom had so much fun traveling the world with Jack. She would laugh proudly as she often told us that she was the “Vice

President” of Dimensions Ministries. Her last few months were difficult as she was in constant pain, as the cancer ravaged her body, and she eventually had a massive stroke. But Jack Taylor, God bless his soul, stood by her side the entire time. **I cannot say enough good things about him.** Mom and Jack had nearly two wonderful years together before she went home to be with the Lord on February 15, 2004.



Mom and Jack – taken in 2003

Here is mom’s memorial tribute, written by my wife, Charlene:

Jerry Jean Bollinger Taylor, age 62, went to be with the Lord Jesus on February 15, 2004. She was born on July 5, 1941 in Artesia, New Mexico to Helen and David Ernest McCoy. She now joins her first husband, Charles Graham Bollinger, her sweet mother, Helen Cade, and her father, D.E. McCoy, who are absent from the body and present with the Lord. Although we are all so thankful and happy that she is with our Savior Jesus, we will miss her greatly. She has been a lighthouse for all of us – the hands and feet of Jesus. She gave us wisdom and kindness, love and acceptance, pure goodness and beauty beyond mere words. She poured herself out every moment she lived in service to Jesus, her family, and many dear friends.

Her beautiful radiant smile would always light up the room wherever she was. All who knew her were blessed and encouraged by her. She wanted most of all to bring glory to God’s name, no matter the cost to herself. The weaker she became physically, the more the Lord gave her His joy and strength. One the last Bible

verses the Lord impressed on her heart was Nehemiah 8:10: “*The joy of the Lord is my strength.*” His grace once again proved to be all sufficient. She died as she lived, praising our Savior Jesus.

Jerry Jean became a Christian at the tender age of seven. She attended Hardin-Simmons University where she was voted Princess on the Homecoming Court and President of the Cowgirls service organization her senior year. What a beauty! She was a youth leader at First Baptist Church of Dallas, where she met and married her sweetheart Charles Graham Bollinger. Together they raised a family and brought glory to the Lord in all that they did. She taught various ladies Bible studies through the years and helped people learn about salvation through Jesus Christ and the Christian faith. She also taught English, History, and Reading at various Christian schools.

From 1987 to 2001, she taught the 5th and 6th grades at Castle Hills First Baptist School. She lost her sweet first husband to cancer in July of 1996. It was a sad time for all. We never thought she could ever remarry. She was too happily married to Graham. But we all underestimated our Lord. On May 4, 2002, she married her “*Resurrection Man*” Jack Taylor and lived almost two glorious years together traveling the country getting to tell everyone about Jesus - their first love. She was not only proud to be Jack’s wife, but also proud and beaming to stand beside him in his ministry for the Lord as Vice President of Dimensions Ministries. Her beloved husband, Jack, is the founder and President. On January 19, Jerry suffered a massive stroke while on a cruise on the South Pacific. She spent two weeks in the hospital at Papeete, Tahiti before being brought to San Antonio on February 5, 2004.

She is survived by her husband, Jack Taylor; children, Ty and Charlene Bollinger, Ron Bollinger, Cherith and Dru Moore, Tim Taylor and Michelle, Tammy Snell and Bill; grandchildren, Brianna and Bryce Bollinger, Baby Moore - due in July, Blake and Brice Taylor, Kimber Snell, Tim Snell, Chris Snell and Clayton Snell; mother-in-law, Newell Bollinger; brothers, Tim McCoy and Susan, Ron McCoy and Cathy, John Cade and Patti; sister, Ernestine Clark and Lloyd; and numerous nieces, nephews, aunts, uncles, and cousins.

If she could speak to you today, she would say: *“Look to Me (Jesus), and be ye saved, all the ends of the earth”* (Isaiah 45:22). She would want to see you repent and believe and receive eternal life with the Father in heaven through Jesus our only Savior and God. *“You will seek Me and find Me when you search for Me with all of your heart.”* (Jeremiah 29:19) *“Ask, and it will be given to you; seek, and you will find; knock, and it will be opened to you.”* (Matthew 7:7) She would say that Jesus will not be found anywhere but the Bible. Search the Scriptures, taste and see that the Lord is good! She wants to see you there with her in heaven. Are you ready?

Her hope is built on nothing less than Jesus blood and righteousness. She’ll dare not trust the sweetest frame, but wholly lean on Jesus name. *“Go therefore and make disciples of all the nations, baptizing them in the name of the Father and the Son and the Holy Spirit, teaching them to observe all that I commanded you; and lo, I am with you always, even to the end of the age.”* (Matthew 28:19-20)



Charlene and mom at our wedding

PART 1

BIG MEDICINE

BIG PHARMA

BIG PROFITS

&

THE “BIG 3”



STEP OUTSIDE THE BOX

CHAPTER 1

THE CANCER INDUSTRY

“ANY DOCTOR IN THE UNITED STATES WHO CURES CANCER USING ALTERNATIVE METHODS WILL BE DESTROYED. YOU CANNOT NAME ME A DOCTOR DOING WELL WITH CANCER USING ALTERNATIVE THERAPIES THAT IS NOT UNDER ATTACK. AND I KNOW THESE PEOPLE; I’VE INTERVIEWED THEM.” -DR. GARY NULL

BRACE YOURSELF

What you are about to read will probably challenge everything you have heard since you were born. From the crib, we have been taught to blindly believe everything we read in the papers and on the internet, what we hear on the radio, and what we watch on TV. As a result, America is chock full of “sheeple” (i.e. *people who are meek like sheep, easily persuaded, intellectually dependent, and tend to follow the crowd*). To be honest, there are many “sheeple” in my own family.

In this book, I am going to ask you to step outside “the box” and actually think for yourself. I am going to ask you to get past the “no way” factor which is common to most Americans. Tanya Harter Pierce, author of Outsmart Your Cancer, calls this the “disbelief factor.” When I first began to learn about successful alternative cancer treatments almost a decade ago and would share the knowledge with others, their common response was “NO WAY!” You see, the “no way” factor is based on the misperception that if alternative cancer treatments really worked, then there is “no way”

that oncologists everywhere would still be using conventional treatments. What most of us don't realize is that most oncologists also suffer from the "no way" factor since they believe that if alternative cancer treatments were effective, then there is simply "no way" that they would have graduated from medical school without hearing about them. Unfortunately, medical schools are largely funded by large pharmaceutical companies who have a vested interest in conventional treatments, since the main goal of all publicly traded companies (*yes, even the pharmaceutical companies*) is increasing shareholder profits.

The information in this book will likely shock you. At times, your natural reaction will be skepticism, doubt, and disbelief. I completely understand those reactions, as I have had them myself. But if you are able to step outside "the box" for just a few hours while you read this book, I know you will be glad that you did. As a matter of fact, it may just save your life or the life of a loved one!

CONSPIRACY & THE CANCER INDUSTRY

As the saying goes, "*just because you're paranoid doesn't mean that they're not out to get you.*" The truth is that conspiracy theories abound, and there are just as many websites on the internet to debunk them. Some of these conspiracy theories are nonsense, some of them are plausible, and some of them are quite likely the truth. Folks, from what I can see, the "cancer conspiracy" is alive and well.

But this is nothing new. In the introduction to his book [The Healing of Cancer](#), Barry Lynes documents that this conspiracy has existed for over half a century: "*In 1953, a U.S. Senate Investigation reported that a conspiracy existed to suppress effective cancer treatments. The Senator in charge of the investigation conveniently died. The investigation was halted. It was neither the first nor the last of a number of strange deaths involving people in positions to do damage to those running the nation's cancer program.*" Mr. Lynes continues, "*For many years, the American Medical Association (AMA) and the American Cancer Society (ACS) coordinated their 'hit' lists of innovative cancer researchers who were to be ostracized.*" He quotes

one investigative reporter as referring to the AMA and the ACS as a “network of vigilantes prepared to pounce on anyone who promotes a cancer therapy that runs against their substantial prejudices and profits.”

I used to believe that the “cancer conspiracy” was an unintentional result of the love of money and that there were really no malicious intentions at its root. As a general rule, I still believe this holds true, but the two examples that follow are very disturbing.

In 1931, Cornelius Rhoads, a pathologist from the Rockefeller Institute for Medical Research, purposely infected human test subjects in Puerto Rico with cancer cells, and thirteen of them died. Despite the fact that Rhoads gave a written testimony stating he believed all Puerto Ricans should be killed, he later established the U.S. Army Biological Warfare facilities in Maryland, Utah and Panama, and was named to the U.S. Atomic Energy Commission, where he began a series of radiation exposure experiments on American soldiers and civilian hospital patients.

Then, in 1963, Chester M. Southam (*who injected Ohio State Prison inmates with live cancer cells in 1952*) performed the same procedure on twenty-two senile, African-American female patients at the Brooklyn Jewish Chronic Disease Hospital in order to watch their immunological response. He told the patients that they were receiving “some cells,” but conveniently left out the fact that they were cancer cells. Ironically, Southam eventually became president of the American Cancer Society.

Please note, the above are not merely isolated occurrences. There are hundreds more similar stories over the past century. Does this necessarily mean that **all** of the people who work in the medical field and the cancer research field are participating in human experimentation or are consciously part of a conspiracy to hold back a cure for cancer? **Of course not.** That notion is patently absurd. Most doctors, nurses, and health care professionals truly care about people and are doing what they honestly believe is best for their patients. As a matter of fact, almost everyone (*including medical professionals*) has been touched by cancer.

In his 1975 audio cassette, *The Politics of Cancer*, G. Edward Griffin explains “let’s face it, these people die from cancer like everybody else...it’s obvious that these people are not consciously holding back a control [cure] for cancer. It does mean, however, that the [pharmaceutical-chemical] cartel’s medical monopoly has created a climate of bias in our educational system, in which scientific truth often is sacrificed to vested interests... if the money is coming from drug companies, or indirectly from drug companies, the impetus is in the direction of drug research. That doesn’t mean somebody blew the whistle and said ‘hey, don’t research nutrition!’ It just means that nobody is financing nutrition research. So it is a bias where scientific truth often is obscured by vested interest.”

In this book, you will learn that the “Emperor” that parades itself as the current Medical Establishment concerning cancer treatment, has no clothes!! I will demonstrate that for the past century, there has been a conspiracy to do the following:

- **Suppress** alternative cancer treatments and *persecute* those who advocate such treatments
- **Brainwash** the public to believe that chemotherapy, radiation, and surgery (the “Big 3”) are the only options to treat cancer
- **Advertise and sell** traditional cancer treatments such as the “Big 3,” since the goal of the “Cancer Industry” is to make money.

First of all, let me define some basic terminology, nicknames, and slangs. “Big Medicine” is comprised of the National Cancer Institute (NCI), the American Cancer Society (ACS), and the American Medical Association (AMA). The ACS and NCI can be pictured as the varsity cheerleaders for the pharmaceutical giants, herein referred to as “Big Pharma,” while the AMA is nothing more than the doctor’s labor union.

The network of corporate polluters, Big Pharma, Big Medicine, the FDA (*aka the “cancer cops”*), industry front groups, and political lobbying groups comprise the “Cancer Industry,” whose goal is to maintain the status quo and keep the public unaware of alternative cancer treatments, thus insuring shareholder profits for Big Pharma. I cannot take credit for the terms used above. “Big Medicine,” “Big

Pharma,” and “Cancer Industry” were all coined long ago by other authors.

In order to put things in perspective, let me tell you a little bit about the roots of Big Medicine and Big Pharma. Let’s put on our history caps and go all the way back to the year 1910 and learn about John D. Rockefeller and the Flexner Report. I’ll bet you’ve never heard of this report, have you? You see, Rockefeller’s goal was to dominate the oil, chemical, and pharmaceutical markets, so his company (*Standard Oil of New Jersey*) purchased a controlling interest in a huge German drug/chemical company called I.G. Farben.

On a side note, I.G. Farben was the single largest donor to the election campaign of Adolph Hitler. One year before Hitler seized power, I.G. Farben donated 400,000 marks to Hitler, his Nazi party, and his private army (*the “SS”*). Accordingly, after Hitler’s seizure of power, I.G. Farben was the single largest profiteer of the German conquest of the world during World War II. While millions of Jews were being slaughtered, I.G. Farben was profiting.

I.G. Auschwitz, a 100% subsidiary of I.G. Farben, was the largest industrial complex of the world for manufacturing synthetic gasoline and rubber for the conquest of Europe. I.G. Auschwitz used the concentration camp prisoners as “*slave labor*” in their factory. But there was no “*retirement plan*” for the prisoners of I.G. Auschwitz. Those who were too frail or too ill to work were selected at the main gate of the I.G. Auschwitz factory and sent to the gas chambers. Even the chemical gas Zyklon-B used for the annihilation of millions of innocent people resulted from I.G. Farben’s drawing boards and factories.

In 1941, Otto Armbrust (*the I.G. Farben board member responsible for the Auschwitz project*), stated to his colleagues, “*our new friendship with the SS is a blessing. We have determined all measures integrating the concentration camps to benefit our company.*” The I.G. Farben cartel used the victims of the concentration camps as human guinea pigs. Tens of thousands of them died during human experiments such as the testing of new and unknown vaccinations. All in all, over 300,000 prisoners passed through the I.G. Auschwitz facility. Over 25,000 were worked to death, while countless others were

murdered in the gas chambers or by human experimentation. I don't know about you, but this makes me sick!

COUNTERTHINK



FACT: THE MASS DRUGGING OF HUMANS WITH SYNTHETIC CHEMICALS WAS MASTERMINDED IN NAZI GERMANY.

Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

You would think that after the end of the war, due to their participation in the murder of millions of people at Auschwitz, I.G. Farben board members would have been “blackballed” by U.S. pharmaceutical companies. *Think again.* Ever heard of Bayer Corporation ... you know...they make Bayer Aspirin? In 1956, Bayer appointed Fritz ter Meer, I.G. Farben board member and convicted

war criminal from the Nuremberg trials, as Chairman of its board. (Joseph Borkin, The Crime and Punishment of I.G. Farben).

But I digress. Let's go back to 1910 and back to our history lesson on the Flexner Report. In order to build his drug cartel, Rockefeller needed to “re-educate” the medical profession to **prescribe more pharmaceutical drugs**, so he hired Abraham Flexner to travel the country and assess the success of U.S. medical schools. In reality, there was very little “assessing” going on by Flexner; the results of his study were predetermined. Eventually, Flexner submitted a report to The Carnegie Foundation entitled “*Medical Education in the United States and Canada.*” Not surprisingly, the gist of the report was that it was far too easy to start a medical school and that most medical schools were not teaching sound medicine (i.e. *they weren't pushing enough drugs*).

Flexner reported that it was necessary to install a “*doorkeeper*” to determine which medical schools were allowed through the door and which ones must remain outside. The report was presented to Congress, and they swallowed it hook, line, and sinker. As we see quite often, politicians are quite willing to enact laws that rob us of our constitutional freedoms under the banner of “*public protection.*” Thus, the AMA became the new doorkeeper and was empowered to determine which medical schools were properly following the standards of conventional medicine and which ones were not. Contrary to popular notion, the AMA is not a governmental entity. It is a private organization which began in 1847, and it is basically the “*physicians' union.*” The only difference between the AMA and the steelworkers' union is that the AMA members wear white collars, while the steelworkers wear blue collars.

You see, the predetermined purpose of the Flexner Report was to label doctors who didn't prescribe drugs as “*charlatans*” and “*quacks.*” Medical schools that offered courses in quackery (*natural therapies and homeopathy*) were told to either drop these courses from their curriculum or lose their accreditation. Is it any wonder that the total number of accredited medical schools in the U.S. was cut in half between 1910 and 1944? The end result of the Flexner

Report was that all accredited medical schools became heavily oriented toward drugs and drug research.

Rockefeller’s plan was a smashing success, and conflicts of interest between Big Pharma and Big Medicine continue to this day. In his book, Cancer-Gate: How to Win The Losing Cancer War, Dr. Samuel Epstein demonstrates that over the past century, the ACS, NCI, and AMA have all become corroded with major institutional and personal conflicts of interest with Big Pharma. As candidly admitted by a recent NCI director, the NCI has become a “*government pharmaceutical company.*” These close ties to Big Pharma have transformed Big Medicine into cheerleaders for special interests rather than stewards of the public interest. Epstein also chronicles how, for monetary reasons, Big Medicine is suppressing mountains of information about environmental causes of cancer rather than making this information available to the public.

In his book The Politics of Cancer Revisited, Dr. Epstein states that “*the cancer establishment has also failed to provide the public, particularly African American and underprivileged ethnic groups, with their disproportionately higher cancer incidence rates, with information on avoidable carcinogenic exposures, thus depriving them of their right-to-know and effectively preventing them from taking action to protect themselves – a flagrant denial of environmental justice.*” But why is the Cancer Industry silent? It’s simple economics, folks. More cancer equals more sales of chemotherapy drugs, more radiation, and more surgery.

You see, money, rather than moral ethics, is the deciding factor for the Cancer Industry. To be honest, their goal is to provide temporary relief by treating the **symptoms** of cancer with drugs, while never addressing the **cause** of the cancer. This insures regular visits to the doctor’s office and requires the patient to routinely return to the pharmacy to refill his prescriptions. This is what the game is all about folks, plain and simple. Big Pharma is nothing more than a conglomeration of companies who are glorified drug pushers. Deny it or deal with it. Stick your head back in the sand if necessary. Think happy thoughts. Or keep reading and keep an open mind. It’s **your choice**.

I have one request: please don't disregard the facts contained in this book just because your doctor never mentioned them to you, or because some of them are hard to believe, or because the alternative cancer treatments have been labeled "quackery" or "nonsense" by Big Medicine, or because many of them are diametrically opposed to the propaganda you hear on the nightly news. Please try to step "*outside the box*" and open your mind to the possibility that you have been lied to and that there are much better treatments than the "Big 3" (*chemo, radiation, & surgery*) to treat cancer. The late Dr. Robert Atkins put it best: "*There is not one, but many cures for cancer available. But they are all being systematically suppressed by the ACS, the NCI and the major oncology centers. They have too much of an interest in the status quo.*"

THE CANCER WAR

The "War on Cancer" was officially declared by the Cancer Industry and the Federal Government in 1971, and enthusiastically signed into law by President Richard Nixon. Over the past almost four decades, it has in reality become a quagmire, a "medical Vietnam," an endless, calculated "no-win" war on cancer, since countless billions of dollars are being made each year by its perpetuation. Since 1971, over **\$2,000,000,000,000** (*that's two trillion dollars*) has been spent on conventional cancer research and treatments. Nevertheless, despite (*or perhaps because of*) these unparalleled costs, the Cancer Industry remains largely closed to innovative ideas in the realm of alternative cancer treatment. According to Dr. John Bailer, who spent twenty years on the staff of the NCI and was editor of its journal, speaking at the Annual Meeting of the American Association for the Advancement of Science in May 1985, "*my overall assessment is that the national cancer program must be judged a qualified failure.*"

As a matter of fact, the Cancer Industry has waged another war... a war with those who advocate the use of alternative cancer treatments. At the root of this new war is the **almighty dollar**. Don't believe me? What are the top five alternative cancer treatments? Can you even name **one** alternative cancer treatment? Big Medicine and Big Pharma have the media in their pockets, thus the only

cancer treatments known to most of us are the “Big 3.” Unless you are an internet junkie, it is likely that you have not been exposed to much good information about alternative cancer treatments. The truth is that since conventional treatments **pay the best**, they are touted as the most effective treatments. It’s all about the economics of cancer, not finding a cure.

Being a CPA, I tend to look at things from an “economic” perspective. And I must tell you that from an economic perspective, the Cancer Industry has the perfect business model. Big Pharma (*and also chemical companies*) make **huge profits** from selling carcinogenic chemicals that are dumped (*oftentimes intentionally*) in our food, water, and air. Then, they make even **more profits** by manufacturing and selling expensive, ineffective, toxic drugs to treat the cancers and other diseases caused by their own products. Then, in baseball lingo, they complete the “triple play” by **selling additional drugs** to make the side-effects of the primary drugs more bearable. In business lingo, the Cancer Industry is sitting on a “cash cow.” Unfortunately, this cash cow is a scam at the expense of cancer patients.

Now, to make the scam perfect, they let John and Jane Taxpayer (i.e. *you and me*) fund their research into more ways to **not cure** cancer while still pushing their drugs at obscene profits. To ensure that the public remains blissfully unaware of the true facts about cancer, they have set up front group cheerleaders (*like the American Cancer Society*) to spread disinformation in the name of cancer education, while the “cancer cops” (*the FDA*) are fighting a hostile turf war to make sure that alternative cancer treatments remain suppressed and the doctors that use these treatments are persecuted and run out of the county.

One of the ways that this turf war is fought is through advertising. Not only does Big Pharma make billions of dollars annually on the sale of drugs, but they also dump billions of dollars into the advertising of prescription drugs each year. And, since people in America typically make their key decisions based solely on what they see on TV and what they hear on the radio, is it any wonder that we are largely uninformed concerning alternative cancer treatments? The Cancer Industry has done everything in its power to

make sure you **do not** know the truth about alternative cancer treatments. The TV stations and other media don't dare broadcast anything which may hurt one of their biggest advertisers – Big Pharma.

Back in 1996, if I had been aware of the successful alternative cancer treatments available, my dad may not have died. It makes me angry that the Cancer Industry suppresses alternative cancer treatments, persecutes doctors that offer them, and makes it next to impossible to gain access to these treatments, thus causing the death of untold millions of cancer victims. This next true story will break your heart.

The Alexander Horwin Story (in the words of his mother, Raphaelle):

*“On August 10, 1998 at age two, our son Alexander Horwin was diagnosed with the most common pediatric brain tumor, medulloblastoma. After Alexander endured two brain surgeries my husband and I located the best non-toxic therapy that had proven successful in treating brain cancer. However, on September 21, 1998, **the FDA denied** Alexander access to this potentially life-saving treatment.*

The oncologists told us that without their “state-of-the-art” chemotherapy, the cancer would soon return. We knew nothing of the history, efficacy and actual danger of chemotherapy but instinctively knew it was a poor choice for therapy. However, now that the FDA had denied Alexander his best chance of survival using a non-toxic therapy that had saved other children, we had no other treatment options left. Reluctantly we started chemo on October 7, 1998. The protocol was entitled CCG 9921 which consisted of intravenous administration of four chemo drugs: vincristine, cisplatin, cyclophosphamide (also called cytoxan), and VP16 (also called etoposide). Alexander completed his third month of chemotherapy in December 1998 and died on January 31, 1999. He was just two and a half years old.” www.ouralexander.org

Yes, there is definitely a war between the Cancer Industry and advocates of alternative cancer treatments. If you believe that Big Medicine acts in the public's best interest, then perhaps you should read the book written by the first director the FDA, Dr. Harvey Wiley, M.D. Dr. Wiley helped establish the FDA in 1906. In The

History of the Crime Against the Food Law, he describes the absolute corruption that occurred within just a few years of its founding. He quickly realized that its initial purpose had been subverted. He resigned and then he wrote the book.

The same problems have persisted at the FDA for almost a century. Big Medicine has a history of corruption and conflict of interests with Big Pharma. According to former FDA commissioner, Dr. Herbert Ley, *“The thing that bugs me is that the people think the FDA is protecting them. It isn’t. What the FDA is doing and what the public thinks it is doing are as different as night and day.”* (*San Francisco Chronicle*, 1/2/70).

In 1969, Dr. Ley testified before the Senate committee and described several cases of deliberate dishonesty in drug testing. One case involved a professor who had tested almost 100 drugs for 28 different drug companies. Dr. Ley testified, *“Patients who died, left the hospital, or dropped out of the study were replaced by other patients in the tests without notification in the records. Forty-one patients reported as participating in studies were dead or not in the hospital during the studies.”* (U.S. Senate, Competitive Problems in the Pharmaceutical Industry, 1969)

In the early 1970s, an “internal affairs” type of FDA study revealed that one in five doctors who carry out field research of new drugs had “invented the data” they sent to the drug companies and pocketed the fees. **In other words, 20% of the doctors just made stuff up!** (*Science*, 1973, vol. 180, p. 1038). According to Dr. Judith Jones, former Director of the Division of Drug Experience at the FDA, if the data obtained by a clinician proves unsatisfactory towards the drug being investigated, it is standard operating procedure for the drug company to continue trials elsewhere until they get the satisfactory results and testimonials they desire. Unfavorable results are almost never published and clinicians are pressured into shutting up. (*Arabella Melville & Colin Johnson, Cured to Death - The Effects of Prescription Drugs*).

Keep in mind that the incentive for clinicians to fabricate data (i.e. *make stuff up*) is enormous. Big Pharma pays clinicians up to \$1,000 per subject, thus enabling many of these doctors to earn over \$1

million a year from drug research alone. (John Braithwaite, Corporate Crime in the Pharmaceutical Industry). And don't be fooled – clinicians know very well that if they do not produce “favorable results” for Big Pharma, that their “gravy train” will soon come to a screeching halt. Folks, the deck is stacked in this cancer war; it's heavily stacked **against** alternative cancer treatments.

To succeed in the cancer war, we must have people with the intestinal fortitude to speak out without fear of being labeled “politically incorrect” or a “conspiracy theorist.” Mike Adams, the Health Ranger, is one such warrior. In his ever-so-candid style, he writes: “Western medicine has failed our people. Today, even while prescription drugs are more frequently consumed than ever before in the history of civilization, our nation has skyrocketing rates of obesity and chronic disease. **Western medicine simply does not work.** It is an outmoded system of medicine dominated by the financial interests of pharmaceutical companies, power-hungry officials at the FDA, and old-school doctors whose myopic view of health prevents them from exploring the true causes of healing. Modern medical schools don't even teach healing or nutrition. **No practitioner of western medicine has ever taught me a single thing about being healthy.**”
www.naturalnews.com/adamshealthstats.html

My friend Webster Kehr describes the war in the following manner: “When people hear the term ‘war,’ they think of guns, tanks, jet airplanes and soldiers. They think about mindless tyrants shaking their fists on television. But the war in medicine is very different. The tyrants in this war hide their real intentions. This is a ‘war’ where the weapons are information. **Welcome to the 21st century, the century where Americas most dangerous and deadly enemies are within.**”
www.cancertutor.com/WarBetween/War_Believe.html

This cancer war is one of the most costly frauds (in terms of money and human suffering) that have ever been perpetrated on the American public. Staggering amounts of money have been spent in its pursuit, but the “cancer emperor” is naked. One of my favorite authors, C.S. Lewis, put it like this: “The greatest evil is not now done in those sordid ‘dens of crime’ that Dickens loved to paint. It is not done even in concentration camps and labour camps. In those we see its final result. But it is conceived and ordered (moved, seconded,

carried and minuted) in clean, carpeted, warmed and well-lighted offices, by quiet men with white collars and cut fingernails, and smooth-shaven cheeks who do not need to raise their voices. Hence, naturally enough, my symbol for Hell is something like...the offices of a thoroughly nasty business concern.” (C.S. Lewis, The Screwtape Letters, Introduction)

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.



STEP OUTSIDE THE BOX

CHAPTER 2

LIES, PROPAGANDA, & GREED

“EVERYONE SHOULD KNOW THAT MOST CANCER RESEARCH IS LARGELY A FRAUD AND THAT THE MAJOR CANCER RESEARCH ORGANIZATIONS ARE DERELICT IN THEIR DUTIES TO THE PEOPLE WHO SUPPORT THEM.”
-DR. LINUS PAULING

SMOKE & MIRRORS

I used to fear being diagnosed with cancer, and just recently have I begun to understand why I was so fearful. I, along with 99% of Americans, had been snookered and brainwashed into believing the lies propagated by Big Pharma’s propaganda machine that instills deceit upon our schools, books, professional journals, magazines, radio shows, TV shows, and of course, the vast majority of conventional doctors, nurses, and other health professionals.

Deliberate misrepresentation of facts has always been the standard operating procedure of the directors of mass media. They cannot afford objective journalism interpreting events as they actually occur. That would be too dangerous. You see, we are *spoon fed* our opinions since the day we were born. Daily events always are “*spun*” to favor a certain side’s position. Those that disagree with the spin and actually think for themselves are frequently labeled “*radicals*” and “*kooks*.” Reality becomes fiction and fiction becomes reality. This is all part of the “*smoke and mirrors*” that are so

prominent in our “MTV – Joe Six Pack – Remote Control – Reality TV” generation. According to American journalist Russel Wayne Baker, “An educated person is one who has learned that information almost always turns out to be at best incomplete and very often false, misleading, fictitious, mendacious - just dead wrong.” Since most people have not really been educated, they are blissfully unaware that they are being brainwashed.

But this smoke and mirrors is nothing new. It began almost a century ago, when, due to his uncanny ability to reframe an issue, Edwin L. Bernays earned the nickname “the Father of Spin.” From his 1928 chronicle Propaganda, we learn how Bernays took the ideas of his famous uncle (Sigmund Freud) and applied them to the emerging science of mass persuasion. The only difference was that rather than using these principles the way Freudian psychology does (to discover the unconscious mind), Bernays used his uncle’s techniques for marketing purposes in order to create illusions, deceive, mask agendas, and brainwash the general public. In a telling quote, Bernays once described the general public as a “herd that needed to be led.” Bernays never deviated from his fundamental axiom to “control the masses without their knowing it.”

How did Bernays do it? His techniques were simple: create the illusion that there is some favorable research by using phrases like “numerous studies have shown...” or “research has proven...” or “scientific investigators have found...” but then never really cite anything. Say it long enough and loud enough, and eventually people will believe it. And if anyone doubts you, attack their character and/or their intellect. Bernays’ techniques are still being utilized today by most advertisers, including Big Pharma.

For instance, Big Pharma regularly develops newer and better prescription drugs, with their main goal being to increase shareholder profits, despite the fact that many of these drugs are toxic and deadly. The drugs are advertised over and over and over again, on TV, radio, magazines, medical journals, and in promotional literature. Despite the lack of scientific evidence to support the use of these drugs, we are conditioned to believe that they are the answer to our problems. If anyone dares to disagree, they are labeled a “quack,” their character is attacked, and their intellect is

challenged. This is what I call the “Bernays Protocol for Silencing Dissenters.” It is very effective.

A recent study carried out by the *Institute for Evidence-Based Medicine* in Germany has found that 94% of the information contained in promotional literature sent to doctors by Big Pharma has *absolutely no scientific basis*. That’s utterly amazing, if you really think about it. Mike Adams, the “Health Ranger,” pulls no punches: “*Pharmaceutical companies engage in mass scientific fraud in order to distort their studies and get drugs approved based on rather shaky science, but what surprises me about this new research is the extent of it: 94% of the marketing claims are unsubstantiated and unsupported by scientific evidence. That’s an alarming number - it means 19 of 20 statements made by drug companies in their marketing literature are false.*” www.naturalnews.com/001895.html

As it relates to cancer treatments, brainwashing and deception is essential, since the goal of the Cancer Industry is to continually convince us that alternative cancer treatments do **not** work (*despite evidence to the contrary*), while simultaneously telling us that the “Big 3” cancer treatments **do** work (*despite evidence to the contrary*). The smoke and mirrors utilized to accomplish this monumental deception make David Copperfield look like a rank amateur! Most issues of conventional cancer “wisdom” are scientifically implanted in the public consciousness by a thousand media clips and advertisements each day.

Next time you are watching TV or listening to the radio, pay close attention. You will likely hear vague phrases like this: “*In terms of big picture, we are continually making progress, but we still have a very long way to go to win the war with cancer.*” What exactly does this comment mean? Would you like me to translate this for you? Here we go: “*In order to continue getting funding, we must continually show you a little bit of progress, despite the fact that our ‘progress’ is measured by manipulated statistics. But we don’t want to be too successful, and certainly don’t want to find a real cure for cancer, since this would put all of us out of work.*”

In order to keep Big Pharma’s “cash cow” alive and well, we are brainwashed into believing that prescription drugs are the answer

for cancer (*and all other ailments as well*). Are you sick? Just watch TV for half an hour, write down the name of the latest prescription drug, and call your doctor. I'm sure that he'll be glad to prescribe it for you. You see, your doctor has likely been brainwashed, too. Big Pharma pays for over 90% of the advertising space in medical journals. I will cite some mind-boggling statistics relating to medical journals later in the book.

What is the last time you saw a commercial about proper nutrition as it relates to our health? What about all of those nutrition geeks telling you to eat raw, live, whole foods? Many conventional doctors will tell not to listen to that nonsense, that there is no evidence to support the correlation between diet and degenerative diseases such as cancer. They will tell you that physicians who believe that cancer can be cured with a change in diet are just a bunch of medical "quacks." Please be aware that this is another characteristic of a successful propaganda campaign: *dehumanize the opposition by labeling and name calling.*

We are conditioned to believe almost anything, as long as the information comes from a "trusted source." In his article entitled *The Doors of Perception: Why Americans Will Believe Almost Anything*, Dr. Tim O'Shea tells the story of how leaded gas was introduced to the U.S. "*In 1922, General Motors discovered that adding lead to gasoline gave cars more horsepower. When there was some concern about safety, GM paid the Bureau of Mines to do some fake "testing" and publish spurious research that 'proved' that inhalation of lead was harmless. Enter Charles Kettering.*

Founder of the world famous Sloan-Kettering Memorial Institute for medical research, Charles Kettering also happened to be an executive with General Motors. By some strange coincidence, we soon have Sloan-Kettering issuing reports stating that lead occurs naturally in the body and that the body has a way of eliminating low level exposure. Through its association with The Industrial Hygiene Foundation and PR giant Hill & Knowlton, Sloane-Kettering opposed all anti-lead research for years.

Without organized scientific opposition, for the next 60 years more and more gasoline became leaded, until by the 1970s, 90% or our

gasoline was leaded. Finally it became too obvious to hide that lead was a major carcinogen, which they knew all along, and leaded gas was phased out in the late 1980s. But during those 60 years, it is estimated that some 30 million tons of lead were released in vapor form onto American streets and highways. 30 million tons. **That is PR, my friends.**" www.thedoctorwithin.com

THE CANCER PROPAGANDA MACHINE & BRAINWASHING

Big Medicine and Big Pharma have essentially obtained complete control over politicians and the media. You see, people can't be brainwashed without a massive propaganda campaign. And believe me, the cancer propaganda machine (i.e. TV, newspapers, professional journals, radio, etc) is alive and well. Media executives and publishers are careful not to publish anything which offends their biggest advertisers (Big Pharma) and to shape their content in such a manner as to please them. In less polite terms, this is called "media whoring."

Isn't it amazing the number of drug commercials that you see in a typical hour of prime time TV? A recent survey of network TV newscasts found that nearly 25% of all the commercials were for prescription drugs: Viagra, Claritin, Celebrex, Allegra, Levitra, Zoloft, Cialas, Nexium, and the list goes on and on.

Big Pharma spends hundreds of millions of dollars each year on television and print ads for prescription drugs. **This is how we are brainwashed.** They are constantly bombarding us with the mantra that newer and better drugs are the answer to the cancer epidemic. Eventually, most of us just believe what we see on TV and what we are told by our doctor. This is the key to a successful propaganda campaign. People must not be taught how to think for themselves. They must be conditioned to trust those in power and believe what they hear on TV and the radio. As a result, we have lost the ability to think logically for ourselves. We have become "dumb and dumber."

Have you ever noticed that we are constantly warned against obtaining information on cancer prevention and treatments from

the internet? Headlines read that alternative cancer websites pose a health risk! We regularly see quotes from well-known physicians similar to this one: “*There is no good evidence that any alternative treatment can prevent cancer.*” How ignorant! In order to make a statement like that, a person must either be outright lying or utterly unaware of the last century of research on cancer!

What is clear is that the Cancer Industry is conducting a pervasive propaganda campaign, based on fear and ignorance, in order to prevent people from learning about alternative treatments for cancer. Frankly, the Cancer Industry would rather people remain ignorant. They do **not** want people to be informed about anything other than the treatments that they promote and control. Ideally, what the Cancer Industry wants is a form of *censorship*. Ultimately, they want websites to be flagged to indicate which ones are “*official*” cancer websites. Of course, only the websites publishing content that agrees 100% with the corrupt Cancer Industry would be qualified to receive such an emblem.

So, in light of the above facts, always keep in mind that what you hear about conventional cancer treatments from your doctors, in medical journals, on TV, on the radio, and in magazines is a labyrinth of lies and frauds, aimed at convincing us that the cure to cancer is newer, better, chemotherapy drugs and funding more drug research. And always remember that even the editors of the medical journals have prostituted themselves to Big Pharma. As Albert Einstein once said, “*The ruling class has the schools and press under its thumb. This enables it to sway the emotions of the masses.*”

In addition to censorship, another tool commonly used to brainwash and mislead is the element of **disguise**. You have seen those insects that are able to disguise themselves as twigs or leaves, when in reality they are nothing more than a chameleon. This is what the Cancer Industry does. They pretend to be acting in the cancer patient’s best interest, while they are actually acting in their own best interest. Don’t be deceived into believing that the Cancer Industry is comprised of altruistic folks who desperately want to find a cure for cancer. They are concerned with one thing, and one thing only: *shareholder profits*.

Without a doubt, my favorite alternative cancer website is Webster Kehr's www.cancertutor.com. I quote him throughout this book, due largely to the fact that he grasps this issue and has more insight than anyone I have ever met. He is a brilliant man. Here is his opinion of the media and its relationship to Big Pharma: *"The media has many different techniques they routinely use to brainwash the general public. They can all be summarized in two words: 'whited sepulcher.' They lie, withhold information, deceive you, tell half-truths, and so on . . . The media are nothing but worthless whores. They sell-out to the highest bidder, which is always the corrupt pharmaceutical industry. Everything they say is aimed to please those that pay the most."*

In his book, The War Between Orthodox Medicine and Alternative Medicine, Mr. Kehr uses an excellent example to illustrate brainwashing. He uses the **theory** of evolution, which is the only theory of origins which is taught in our public schools. In his book, the illustration is quite long, so I have summarized it here. To make it simple, let's assume that there are only 2 groups of people: 1) those who believe in evolution and 2) those who believe in Creation. The evolutionists represent the "Establishment" while the Creationists represent the "Renegades" who disagree with the "Establishment."

You have the choice of siding with the Establishment or the Renegades. In some cases this choice could affect your job. For example, if you are a Christian teaching biology in a public high school and you teach Creationism in your classroom, then you might lose your job. If you are looking for a promotion, then there is no question as to which theory you will teach. The evolution side of the fence has virtually all the benefits. But let's just suppose you are one of those rare people who are more interested in truth than benefits.

Suppose you want to know the truth about which theory is *actually* based on the evidence. You first interview the evolutionists, since you learned in school that evolution has been proven to be true. The person tells you about the Big Bang, he elaborates on microevolution, macroevolution, explains why there are no missing links, and so on. As you are walking away, the evolutionist stops you and begins to tell you why Creation is not a valid position and

continues to tell you that Christians are nothing but idiots and buffoons. After this conversation, you feel that you understand both sides of the origins issue. You decide it is not necessary to talk to a Creationist because you already think you understand their views and why their views are wrong. Now, if you made such a decision, then you would be making a common mistake: you would have heard both sides of the issue, but you would have only heard them from one person on one side of the fence. But you haven't heard the arguments of the Creationists, *from a Creationist*, nor have you heard why the Creationists think that the evolutionists are wrong.

Do you really know both sides of the issue? No you don't! Until you learn about the pro-Creationist views *from a Creationist*, and you hear the anti-evolution views *from a Creationist*, you don't have a basis for making an objective decision. Now, our entire lives, we have been taught that the Creationists are all a bunch of religious nuts, haven't we? We have been taught not to listen to the "renegades." We have been conditioned to believe that we already have all the answers and that there are no open issues up for debate. We have been taught not to listen to the people on both sides of the fence.

However, one day, just for the heck of it, you decide to talk to a Creationist. As he begins to speak, you are instantly amazed at the fact that he can talk, since the evolutionists had always told you that the Creationists had the IQ of a rodent and wore beanie caps with rotors. Not only can he speak, but he waxes eloquent about DNA, cell membranes, nucleotide chains, and protein chains. He states that the complexity of the Universe mandates a Creator since it is absurd that a 300,000 nucleotide chain can randomly form. And even if it did, the statistical probability that the first DNA had a permutation of nucleotides, such that 300 viable proteins could be created by this DNA genome, has a probability that is far less than $10^{-30,000}$.

He proves the necessity of a Creator due to the complexity of one nucleotide chain, which is a component of DNA. You quickly do some math in your head. You remember from science class that there are 10^{80} atoms in our universe. Then, you imagine there are

$10^{29,920}$ universes just like ours in a cluster (*that is a one followed by 29,920 zeros*). All of these universes combined would have $10^{30,000}$ atoms. WOW! Finally, you come out of your daydreaming and realize that he was still talking while you were doing the math in your head.

Then he tells you about the ridiculous probability of the first cell membrane forming by accident. He articulates about how incredibly complex a eukaryotic cell is, so complex that even the exobiologists admit that one could not form by accident from a prebiotic pool. Then you learn that the first DNA and first cell membrane could not have formed in the same prebiotic pool, and thus you are told it was virtually impossible that they could ever get together. He talks about irreducibly complexity, and then he begins to tell you about the problems with the evolutionist's views.

You learn about the mathematical absurdities which must be accepted in order to have *faith* in the *theory* of evolution. You then hear how “punctuated equilibrium” is really a super irreducibly complex protein system, and how absurd it is to claim that it was not necessary for irreducibly complex protein systems to have mutated all at once, but at the same time to believe in punctuated equilibrium. You hear why the phylogenetic tree is really a cover-up for the gaps in transitional species. You also learn about the massive assumptions evolutionists make with regards to carbon dating bones. You also hear the totally unproven assumptions and very shallow logic evolutionists make with respect to mitochondrial DNA and nuclear DNA. And so on...

Ten hours pass and you realize that the Creationist is still talking. You also realize it has been several hours since you had a clue what he was talking about. *This is not what you expected*. You expected some wild and crazy theories. But now you realize that Creationists are not stupid, they are not buffoons, and they really do have some very strong arguments. You also realize that the evolutionists had no idea what the Creationists actually believed. You finally go home, very confused.

According to Mr. Kehr, “*This simple story demonstrates the very sad state of affairs in America and throughout the world. Neither schools,*

nor corporations, nor governments want anyone to hear both sides of any issue from [the people on] both sides of the fence. They would rather have a brainwashed student than a thinking student. Schools act as if they have all of the answers and that it is not necessary to teach students to think for themselves. Students are graded on how well they regurgitate “facts,” not on how well they think. Students learn very early on that all of the benefits are on one side of the fence and that they should spend their life gathering up the benefits.

He continues, “People are taught from birth to assume and expect that those in the “establishment” (such as the schools, the news broadcasters and newspapers): 1) Have no vested interests or conflicts of interest, 2) Have perfect intelligence, 3) Have all the facts for both sides of the fence, 4) Are totally neutral and unbiased, 5) Have perfect integrity, 6) Have your best interests in mind, and 7) Are truly open-minded. And above all, you are never, never allowed to think that money or power (i.e. benefits) could possibly influence what the establishment teaches you. Dream on, this is the real world we are talking about.”

This story is a perfect example of the propaganda we constantly hear about alternative cancer treatments. Many cancer patients who were pronounced “terminal” by their conventional doctors went on to use alternative therapies, recovered fully, and are alive and well 10, 15, 20 or more years after their “terminal” diagnoses. However, the Cancer Industry ignores the existence of these cancer survivors or disdainfully dismisses them as “anecdotal evidence.” One trick from Big Medicine is to claim that people who got well through alternative therapies somehow magically recovered due to delayed reaction from the “Big 3.” How absurd!

Another popular ploy of Big Medicine is to say that cancer patients who were cured through alternative therapies simply underwent “spontaneous remission.” This is medical lingo for “unexplained recovery,” **a fig leaf to cloak doctors’ ignorance of what actually happened.** The most comprehensive study ever undertaken on the spontaneous remission of advanced cancers turned up only 176 such cases in the world from 1900 to 1965. Statistically speaking, it never happens. So, when you hear conventional doctors attributing the miraculous, sudden recovery of an alternative cancer patient to

“spontaneous remission,” have pity on them. They are merely hallucinating in a dream world created by the Cancer Industry.

MONEY & GREED

In the Bible, 1 Timothy 6:10 says *“the love of money is the root of all kinds of evil.”* The economics of cancer treatment are astonishing! In the year 2004, over \$72 BILLION was spent on cancer treatments in the U.S. alone! It’s easy to see why Big Medicine goes to such lengths to destroy “quacks.” Those who profit from toxic therapies like chemotherapy and radiation might be out of business and have to find another way to send their kids to Harvard or Yale if an effective, natural, non-toxic alternative were made available.

According to Dr. Linus Pauling, Ph.D. (two-time Nobel Prize winner), *“...most cancer research is largely a fraud and that the major cancer research organizations are derelict in their duties to the people who support them.”* The marketing of toxic drugs lies at the heart of Big Pharma. The pharmaceutical companies not only make billions of dollars in profits from toxic chemotherapy drugs every year, but they also make millions of dollars in profits every year for developing drugs to treat the problems **caused** by the chemotherapy drugs! *“There is nothing else in the health-care field that can do what a good prescription drug can do--on the money side. It is a business to be envied by all.”* - New York Times, July 28, 1989.

In his book, The Story of the Medical Conspiracy Against America, Eustace Mullins quotes Patrick McGrady, Sr., who was science editor of the ACS and its principal “spin doctor” in the media for over two decades. In 1978, McGrady made an interesting statement: *“Nobody in the science and medical departments (at the ACS) is capable of doing real science. They are wonderful pros who know how to raise money. They don’t know how to prevent cancer or cure patients.”*

Have you ever wondered why, despite the billions of dollars spent on cancer research over many decades, and the constant promise of a cure which is always “just around the corner,” cancer continues to increase? Do you think that Big Pharma really wants somebody to

come along with an inexpensive, natural, effective cancer cure? Or do you think that Big Pharma will do whatever it takes to retain their profits? Do you really think that the Cancer Industry is looking for a silver bullet to wipe out cancer?

A silver bullet would result in the termination of research programs, the obsolescence of skills, and an end to extravagant lifestyles of Big Pharma's executives. A silver bullet would render obsolete the "Big 3" treatments which are essential to maintain the cash cow. Sadly, the fact of the matter is that many of those in the medical community have absolutely no interest in discovering a silver bullet to cure cancer, since it would cost Big Pharma billions of dollars.

COUNTERTHINK

WHAT WILL NEVER HAPPEN



WHAT WOULD REALLY HAPPEN



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

Could it be that the Cancer Industry fears a cure because it would cut into their pocketbook? It is interesting to note that written into the charter of the American Cancer Society is the clause that states that if a cure for cancer is ever found, on that day, **the Society will disband**. So think about it, is this an organization that is truly going to be motivated to find a cure for cancer? What do you think? To ask the American Cancer Society to find a cancer cure is to say, "Now go and be successful. And then, once you have achieved your goal, promptly commit suicide."

The fact is that the eradication of cancer is by its very nature opposed to the interests of Big Pharma, as it would destroy their investment. In my opinion, Big Pharma's main goal is to *perpetuate disease*, not eradicate it. You see, they will do anything to keep the cash cow alive and well. Their survival is dependent on the elimination, by any means, of successful alternative cancer treatments. No profitable business will ever try to eliminate itself. ***That is why a cure for cancer will never come from the Cancer Industry.*** It is a colossal act of political expediency and greed that has turned what should have been an *easy-to-solve medical puzzle* into the fraud that we now call the Cancer Industry.

Have you heard of Parkinson's Second Law? "Expenditures rise to meet income." Every year, the cancer collection plates go out, to industry, foundations, and private individuals. The mantra - "Give us your money, because we are making progress every day and we can't stop now. We are just too close!" Revenues rise, so therefore, expenditures must be created to justify the revenues. This anathematizes the search for cancer cures that are natural and inexpensive. This is why the entire apparatus of the Cancer Industry is set up to ***suppress and censor*** any information that does not support their widespread need for expensive, man-made cancer treatments.

In order to protect the profits of Big Pharma, *any and all* potentially successful alternative cancer therapy must be disbelieved, denied, discouraged, and disallowed at all costs. They are prepared to do whatever it takes to suppress and censor *all* alternative cancer treatments. ***Let me repeat myself:*** The Cancer Industry is prepared to do whatever it takes to suppress and censor all successful alternative cancer treatments. ***Whatever it takes...***

...including bribery. One major reason that the healthcare system is in such a mess today is that Big Medicine has allowed itself to be bought off by Big Pharma. In his book *Dissent in Medicine - Nine Doctors Speak Out*, Dr. Alan Levin, M.D. writes "Young physicians are offered research grants by drug companies. Medical schools are given large sums of money for clinical trials and basic pharmaceutical research. Drug companies regularly host lavish dinner and cocktail parties for groups of physicians. They provide funding for the

establishment of hospital buildings, medical school buildings, and ‘independent’ research institutes...practicing physicians are intimidated into using treatment regimes which they know do not work. One glaring example is cancer chemotherapy.”

According to “the Health Ranger” Mike Adams, “...it’s not an exaggeration to call this a **medical holocaust**. These drug companies seem determined to dose the entire population with as many simultaneous prescriptions as possible, as long as it generates profits for their shareholders. Business ethics are nowhere to be found in the pharmaceutical industry these days: **it’s all about money, profits, power and control.**” www.naturalnews.com/001298.html

Dr. Guylaine Lanctot, M.D. in her book, The Medical Mafia, states “The medical establishment works closely with the drug multinationals whose main objective is profits, and whose worst nightmare would be an epidemic of good health. Lots of drugs MUST be sold. In order to achieve this, anything goes: lies, fraud, and kickbacks. Doctors are the principal salespeople of the drug companies. They are rewarded with research grants, gifts, and lavish perks. The principal buyers are the public - from infants to the elderly - who MUST be thoroughly medicated and vaccinated...at any cost! Why do the authorities forbid alternative medicine? Because they are serving the industry, and the industry cannot make money with herbs, vitamins, and homeopathy. They cannot patent natural remedies. That is why they push synthetics. They control medicine, and that is why they are able to tell medical schools what they can and cannot teach.”

In July 2004, Dr. Marcia Angell wrote an article entitled “The Truth About The Drug Companies.” For twenty years, Dr. Angell was editor of the *New England Journal of Medicine*, one of the most esteemed medical journals in the world. In the article, she states “over the past two decades the pharmaceutical industry has moved very far from its original high purpose of discovering and producing useful new drugs. Now primarily a marketing machine to sell drugs of dubious benefit, this industry uses its wealth and power to co-opt every institution that might stand in its way, including the US Congress, the FDA, academic medical centers, and the medical profession itself.”

She continues, “People need to know that there are some checks and balances on this industry, so that its quest for profits doesn’t push every other consideration aside. But there aren’t such checks and balances ... The most startling fact about 2002 is that the combined profits for the ten drug companies in the Fortune 500 (\$35.9 billion) were more than the profits for all the other 490 businesses put together (\$33.7 billion).” www.nybooks.com/articles/17244

What is the heart of conventional medicine? According to Webster Kehr: “Find a natural substance that cures something, bury this fact, then fabricate, synthesize, and mutate the key natural substance, then patent the mutation, and make huge profits.”

In his book, World Without Cancer-The Story of Vitamin B17, G. Edward Griffin writes “With billions of dollars spent each year in research, with additional billions taken in from the cancer-related sale of drugs, and with vote-hungry politicians promising ever-increasing government programs, we find that, today, there are more people making a living from cancer than dying from it. If the riddle were to be solved by a simple vitamin, this gigantic commercial and political industry could be wiped out overnight. The result is that the science of cancer therapy is not nearly as complicated as the politics of cancer therapy.”

The Cancer Industry survives and thrives by perpetually searching for “the cure” but never finding it. This multi-billion dollar juggernaut is simply not interested in finding a cure, unless that cure consists of patented drugs that can be sold at a premium and patients need to take it for the rest of their lives. So, in all actuality, the Cancer Industry is perpetuating lies and fraud. This fraud is of unspeakable magnitude, it has spanned more than a century, and it has unnecessarily caused the premature deaths of tens of millions of people, including both of my parents.

Dr. Matthias Rath hits the nail on the head when he states “the pharmaceutical industry is an investment industry driven by the profits of its shareholders. Improving human health is not the driving force of this industry... never before in the history of mankind was a greater crime committed than the genocide organized by the

pharmaceutical drug cartel in the interest of the multi-billion dollar investment business with disease.” www4.dr-rath-foundation.org

DOCTORS & EDUCATION

Before mom died, she was cared for by some of the finest doctors in America. Dr. Tim Shepherd is one of the finest doctors I know. He and his wife, Virginia Shepherd, are two of the most wonderful Christians I’ve ever met. They opened their own home to my mother and cared for her as if she were their own parent. Their 11 children “adopted” mom as their very own grandmom and each one of them held a special place in mom’s heart. I am eternally grateful to the entire Shepherd family – they will always hold a special place in my heart.

If I had a medical crisis, I would trust most doctors to give me the finest care possible. If I were involved in a car accident and needed a limb to be reconnected, I would definitely head for a hospital. Some of the recent accomplishments in the medical world are astounding. Many medical conditions which would have been a death sentence 50 years ago are now easily cured with amazing advancements in medical technology. I am constantly amazed at the complex medical procedures which are regularly and successfully performed today. A couple of years ago, I saw a TV special which showed an operation where doctors cured a small girl of Turret’s Syndrome through placing an electrode in her brain. It was truly amazing. I saw another special where surgeons reconstructed the face of a lady whose facial skin had been eaten by parasites. I was astounded! These are just a couple examples of the enormous advancements in medical technology and procedures over the past half century.

However, while incredible advancements have been made in many areas of medicine, the view of most doctors concerning the *treatment of cancer* has been obscured by the disinformation of the cancer propaganda machine. The bottom line is that most doctors do exactly what Big Medicine tells them to do and have not learned to think for themselves. Most doctors are still thinking “inside the box” when it comes to cancer. The problem is that the cancer “box” is largely the creation of Big Pharma attempting to peddle their

poisons (such as chemotherapy) in an effort to increase profits for their shareholders at the expense of the cancer patient.

The Cancer Industry is built on the foundation of treating the **symptoms** of cancer, while doing virtually nothing to treat the actual **cause** of cancer or **prevent** it. It reminds me of an old Chinese proverb: “The superior doctor prevents sickness; the mediocre doctor attends to impending sickness; the inferior doctor treats actual sickness.” However, the problem is not the doctors...**it is the system**. I want to make it clear that I firmly believe that most doctors are altruistic champions for their patients and sincerely want what is best for them. Make no mistake, I wholeheartedly believe that most doctors make decisions based upon what they **think** is best for the patient. “**Think**” being the key word. Unfortunately, most oncologists (cancer doctors) do not even consider cancer treatments that they were not taught in medical school. As I mentioned, doctors also suffer from the *no way* factor. They believe that if alternative treatments really worked, there is *no way* that they would have graduated from medical school without learning these protocols.

In other words, most doctors have a tendency to believe that not only what they were taught **must** be true, but they also believe that what they were not taught **must not** be important! So you can rest assured that your doctor has likely been brainwashed into believing that the only viable treatments for cancer are chemo, surgery, and radiation. Poison, slash, and burn. The “**Big 3**.” It is also likely that your doctor knows next to nothing about nutrition or alternative cancer treatments and fully believes that alternative practitioners are nothing but “quacks.” Go ahead, ask your doctor about vitamin therapy, or enzyme therapy, or ozone therapy. Be prepared to be chastised and/or ridiculed for your naïvité.

Where does your doctor get his continuing education? Any idea? Those “prestigious” medical journals, you know, the ones so prominently displayed on the cabinets. This is likely your doctor’s **only** source to keep abreast of the new developments in the medical field. These journals pretend to be so objective and scientific and incorruptible, but the reality is that they don’t want to

alienate their advertisers – Big Pharma. Those full-page drug ads in the top medical journals cost **millions of dollars!**

How long do you think Big Pharma will pay for ad space in a journal that prints sound scientific evidence that attacks the safety of their “*latest and greatest*” drug in the centerfold? Think about it. The editors of these medical journals may lack character, but they aren’t stupid. They know who butters their bread.

You think those medical journals are above reproach because they are peer-reviewed? Think again, folks. Studies show that fraud in peer-reviewed medical journals is commonplace. In 1987, the *New England Journal of Medicine (NEJM)* ran an article that followed the research of Dr. R. Slutsky, M.D. over a seven year period. During that time, Slutsky had published one hundred thirty-seven articles in several peer-reviewed journals. *NEJM* uncovered evidence that in sixty of these one hundred thirty-seven articles, there was either misrepresentation of fact or outright fraud. That’s almost 44%. <http://content.nejm.org/cgi/content/abstract/317/22/1383>

Then you have the “domino effect” which takes place when scientific fraud in peer-reviewed journals is quoted by other researchers, who are re-quoted, and so on, and so on. And then you also have what I call the “incest factor,” where the authors of peer-reviewed articles are “*in bed*” with Big Pharma. There is a formal requirement for all medical journals that any financial ties between an author and a product manufacturer be disclosed in the article. But we live in the real world, where this almost *never* happens. In 1998, Dr. Henry T. Stelfox showed that *twenty-three of twenty-four* authors (96%) defending the safety of calcium channel antagonists *had financial ties with manufacturers of these same drugs!* www.pubmedcentral.nih.gov/articlerender.fcgi?artid=35347

Medical journals absolutely love to advertise the latest chemotherapy drug. Don’t believe me? Go check one out. You will be amazed at the number of chemotherapy ads. So, while oncologists may not be intentionally deceiving their patients, they are, in fact, deceiving them and eventually participating in their death when they prescribe conventional treatments for cancer. Just as ignorance of the law is no excuse, neither is ignorance of proven

medical facts. I have heard many people express gratitude for chemotherapy or radiation, stating that it gave their mother or father or uncle an additional three or five years before they died. How sad it is to think that they likely would have lived much, much longer than a few years if they had **refused** the conventional treatment and pursued one of many proven successful alternative cancer treatments. The fact of the matter is that their loved one likely survived a few years in spite of the conventional treatment rather than because of the treatment.

Remember the study I mentioned earlier which concluded that the promotional literature sent to doctors by pharmaceutical companies has absolutely no basis in scientific fact? The study showed that virtually all of the data in Big Pharma's promotional brochures is either imprecise or has been overstated. Now here's the scary thing: most doctors rely on the information in these brochures when making a decision about what drugs to prescribe to patients. They have blind, unsubstantiated faith that Big Pharma is engaged in rigorous scientific studies and clinical trials, they read the brochures, believe the lies, and then prescribe the drugs to their patients. The *Journal of the American Medical Association (JAMA)* reported in February 2002 that 87% of the physicians involved in the establishment of national guidelines on disease have financial ties to Big Pharma. Talk about a conflict of interests!

As a result of prescribing toxic drugs, doctors kill patients. Did you know that doctors are the 3rd leading cause of death? In the July 26, 2000 issue of the *JAMA*, Dr. Barbara Starfield documented that over 225,000 deaths each year are due to iatrogenic causes. What does "iatrogenic" mean? This term is defined as "*induced in a patient by a doctor's activity, manner, or therapy.*"

In the 1966 *Annals of Internal Medicine*, Doctors Beaty and Petersdorf write that "*iatrogenic problems are cumulative, and in an effort to extricate himself from complications of diagnosis and therapy, the physician may compound the problem by having to employ manoeuvres that are in themselves risky.*" **Translation:** Doctors oftentimes perform risky procedures or prescribe toxic drugs to cover their tracks from problems caused by previously prescribed toxic drugs and risky procedures.

In the USA alone, for instance, it is estimated that medical mistakes in hospitals have killed 7.8 million Americans in the last decade. This is more than the combined casualties of all the wars the USA has fought in its entire history. (Gary Null et al, Death by Medicine). With the above in mind, it is not surprising that during a one month physicians' strike in Israel in 1973, the national death rate reached the lowest ever. According to statistics from the Jerusalem Burial Society, the number of funerals dropped by almost 50% (Hans Ruesch, Naked Empress or the Great Medical Fraud).

Again, let me repeat, I am **not** saying that individual doctors are the problem. The problem is **the system**. Most medical students have no reason to question the information which they are being taught and are ridiculed if they do ask uncomfortable questions. Young doctors who wish to succeed know that they must remain unquestioningly faithful to the “*established truths*.” Any doctor who rocks the boat will soon find himself floundering in deep water, and likely struggling to survive! To be successful, a doctor must respect the errors of his elders, hold fast to the dogma of his teachers, and close his mind to theories which are “*outside the box*.”

Ironically, medicine is a field which demands conformity, and there is little tolerance for opinions opposing the status quo. Doctors cannot warn you about what they themselves do not know, and with little time for further education once they begin practice, they are, in a sense, held captive by a system which discourages them from acquiring information independently and forming their own opinions. Unlike many other countries, the USA supports only one kind of medicine: **conventional**. Because of this, many Americans, including both of my parents, have been denied many vital health choices. “*Your family doctor is no longer free to choose the treatment he or she feels is best for you, but must follow the dictates established by physicians whose motives and alliances are such that their decisions may not be in your best interests,*” says Dr. Alan Levin, M.D.

Those few doctors that dare to question the status quo are frequently ostracized and blackballed. You should know that a physician risks jail time and having his medical license revoked for recommending or using alternative cancer treatments, despite the

fact that there is overwhelming scientific evidence to support their efficacy. Doctors who dare to offer patients new hope and new treatments are scorned, abused, persecuted, vilified, forced to go into hiding, or threatened with imprisonment.

For instance, Dr. Stanislaw Burzynski of Houston, Texas uses non-toxic antineoplastons to successfully treat brain cancer, non-Hodgkins lymphoma, and many common cancers. The FDA's lawyers have spent tens of millions of dollars and almost two decades trying to put Dr. Burzynski in jail.

The FDA has a track record of raiding the offices of alternative practitioners, destroying their medical records, and even putting them in jail. In addition, many doctors are afraid of expensive, time consuming lawsuits, and their insurance carrier may drop them if they use alternative treatments. Their state medical boards may fine them and revoke their license. And remember, doctors are human. Due to the fact that others doctors will publicly ridicule them if they use alternative treatments, many doctors succumb to prescribing the “Big 3” as a result of peer pressure.

Disturbingly, the truth is that a bureaucratic tangle of politicians, attorneys, CEOs, and huge international corporations has taken control over our health care system, and it is they who dictate which cancer treatments are allowed and which ones are not. Doctors are basically left out in the dark when it comes to policy making decisions concerning cancer treatments. Sadly, the fact is that our sincere, dedicated, doctors, and nurses who genuinely care about their patients have very little input concerning the type of cancer therapies they are allowed to prescribe. **Bottom line:** Don't expect a doctor working “*inside the box*” to buck the system. The risks are too great.

PRESCRIPTION DRUGS

Did you know that prescription drugs kill over 100,000 Americans each and every year? Did you know that prescription drugs injure over two million Americans each and every year? These figures are straight from the *Journal of the American Medical Association*. This is

remarkable! When you visit your doctor and take even a single prescription, you are playing “pharmaceutical roulette” and walking into the “Big Pharma Trap.” The only way to win this game of roulette and actually restore your health is to give up all prescription drugs and make essential changes to your diet and lifestyle.

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

But don't prescription drugs perform miracles for people's health? Don't they make us healthier? Well, if you watch thirty minutes of TV during prime time, you will likely see several commercials that proclaim the “gospel” of prescription drugs, loudly proclaiming that they can do wonders for people, such as helping with depression, lowering cholesterol, increasing libido, eliminating allergies, calming children, and reversing osteoporosis, just to name a few. But if prescription drugs are so good for us, then let me ask you one question: *Where are all the “healthy” people on drugs?*

There really aren't any, are there? If prescription drugs were good for us, then shouldn't there be hundreds of millions of Americans who are on prescription drugs who are also mentally sharp, physically fit, bursting with energy, and emotionally healthy? Well, where are these people? Typically, when you meet someone who is taking multiple prescription drugs, they are mentally fuzzy, sickly in appearance, chronically fatigued, and emotionally unstable and depressed.

If you head down to your local organic market and approach the healthiest people you find, why don't you ask which prescription drugs are responsible for their health? After looking a bit dazed and confused, they will likely tell you that they do not take prescription drugs! The bottom line is that prescription drugs make people sicker.

Here's why. During development, prescription drugs are designed to target a single measurable marker, such as cholesterol level. Let's examine statin drugs for an example. Now, while statin drugs do lower LDL cholesterol, their mechanism of accomplishing this is the problem. They lower cholesterol by inhibiting the liver's ability to create *all types* of cholesterol, including HDL cholesterol. So, while statin drugs may positively affect *one* marker, they disrupt the body's physiology in many other ways.

When patients begin to have additional problems which are *caused* by the prescription drugs, what do they do? They head back to the doctor's office where their doctor diagnoses them with *another* disease or disorder. And then, they give them another prescription drug to help "fix" the problems caused by the first drug. I used to wait tables, and when you convince a person to order a dessert with their meal, it is called "**upselling.**"

This is exactly what Big Pharma loves – doctors who upsell their patients with more expensive prescription drugs! It's the "Big Pharma trap." It's "pharmaceutical roulette." What's the result? Higher earnings per share! Of course! And the cycle continues...one prescription after another, like boxcars on a train. Finally, the patient is broke and suffering (or dead) from chemical toxicity resulting from prescription drugs.

When you take prescription drugs on a long-term basis, it is certain that you will end up worse than you began. Now, I'm not saying that prescription drugs are totally useless. Let's look at statin drugs again. An overweight man suffering from extremely high cholesterol is clearly at risk of a heart attack. Now, statin drugs may be legitimately used for a short period of time just to fend off a heart attack while he makes some fundamental changes to his diet and exercise regimen and is able to lose weight and lower his risk of heart attack. That's a reasonable, legitimate use of prescription drugs. However, this is not the way they're being promoted today. Thanks to the culture of greed at Big Pharma and their prevalent lack of ethics, statins and other drugs are being "pushed" as at *lifetime medications* while changes in diet and exercise are mentioned only in passing.

Big Pharma is able to obtain the FDA's "blessing" for their latest miracle drug since the clinical trials focus only on one marker while basically ignoring the other detrimental systemic effects of the drug. Their goal is to positively impact one particular marker, thus gaining FDA approval as fast as possible. There are literally thousands of markers to target, and if a prescription drug can positively alter just one of these markers (*without killing too many people during clinical trials*), then the FDA will likely approve the drug, despite the lack of evidence on the systemic effect of the drug on other body functions. This is just one of many problems with prescription drugs, since they all have a systemic effect.

The numerous other deleterious effects that the drug may have on the human body are largely ignored. And since prescription drugs have a systemic effect, they *all* have side effects. When clinical trial participants start showing these side effects, they are usually "excused" from the trial to make sure that trial results spin the newest wonder drug in a positive light. This is the standard operating procedure for the FDA and is the way that extremely toxic drugs are actually approved considered to be safe.

In his 1980 book Confessions of a Medical Heretic, famed medical writer and pediatrician, Dr. Robert Mendelsohn, accused doctors of having "*seeded the entire population with these powerful drugs.*" He states that "*every year, from 8 to 10 million Americans go to the*

doctor when they have a cold. About ninety-five percent of them come away with a prescription - half of which are for antibiotics.”

According to Mike Adams, the Health Ranger, some prescription drugs are marked up an astounding 500,000% from the cost of their raw ingredients (*no, that's not a typo*), and a big chunk of that money goes right back into the big propaganda machine. Big Pharma claims that they need those exorbitant prices to invest in R&D, but in reality, they spend far more on advertising than they spend on R&D. According to Adams, **“our system of modern medicine is a sham, folks. It is legalized drug pushing dominated by Big Pharma. The science is largely distorted (and often outright fraudulent), the ethics have all but disappeared, and the long-term price of all this is going to be enormous. We have an unprecedented problem on our hands that's sickening an entire generation and creating stratospheric long-term health care costs for the next round of working taxpayers unlucky enough to stumble onto all this.”** www.naturalnews.com/001352.html

AN ALLEGORY

“WELCOME TO THE TOWN OF ALLOPATH”

There once was a town called Allopath. It had many people, streets and cars, but due to budget limitations, there were no stop signs or traffic lights anywhere in Allopath. Not surprisingly, traffic accidents were common. Cars would crash into each other at nearly every intersection. But business was booming for the auto repair shops and local hospitals, which dominated the economy of Allopath. As the population of Allopath grew, traffic accidents increased to an alarming level. Out of desperation, the city council hired Doctor West, a doctor of the Motor Division (M.D.) to find a solution.

Dr. West spent days examining traffic accidents. He carried an assortment of technical gear -- microscopes, chemical analysis equipment, lab gear -- and put them all to work as part of his investigation. The townspeople of Allopath watched on with great curiosity while Dr. West went about his work, meticulously documenting and analyzing each traffic accident, and they awaited

his final report with great interest. After weeks of investigation, Dr. West called the people of Allopath to a town meeting for the release of his report. There, in front of the city council and most of the residents of Allopath, he announced his findings: **“Traffic accidents are caused by skid marks.”**

As Dr. West explained, he found and documented a near-100% correlation between traffic accidents and skid marks. *“Wherever we find these cars colliding,”* he explained, *“we also find these skid marks.”* The town had *“Skid Marks Disease,”* the doctor explained, and the answer to the town’s epidemic of traffic accidents would, *“...require nothing more than treating Skid Marks Disease by making the streets skid-proof,”* Dr. West exclaimed, to great applause from the townspeople.

The city paid Dr. West his consulting fee, then asked the good doctor to propose a method for treating this Skid Marks Disease. As chance would have it, Dr. West had recently been on a trip to Hawaii paid for by a chemical company that manufactured roadaceuticals: special chemicals used to treat roads for situations just like this one. He recommended a particular chemical coating to the city council: teflon. *“We can treat this Skid Marks Disease by coating the roads with teflon,”* Dr. West explained. *“The streets will then be skid-proof, and all the traffic accidents will cease!”* He went on to describe the physical properties of teflon and how its near-frictionless coating would deter nearly all vehicle skids.

The city council heartily agreed with Dr. West, and they issued new public bonds to raise the money required to buy enough teflon to coat all the city’s streets. Within weeks, the streets were completely coated, and the skid marks all but disappeared. The city council paid Dr. West another consulting fee and thanked him for his expertise. The problem of traffic accidents in Allopath was solved, they thought. Although the cure was expensive, they were convinced it was worth it.

But things weren’t well in Allopath. Traffic accidents quadrupled. Hospital beds were overflowing with injured residents. Auto repair businesses were booming so much that most of the city council

members decided to either open their own car repair shops or invest in existing ones.

Week after week, more and more residents of Allopath were injured, and their cars were repeatedly damaged. Money piled into the pockets of the car repair shops, hospitals, tow truck companies and car parts retailers. The town economic advisor, observing this sharp increase in economic activity, announced that Allopath was booming. Its economy was healthier than ever, and Allopath could look forward to a great year of economic prosperity!

There were jobs to be had at the car repair shops. There were more nurses needed at the hospital. “*Help wanted*” signs appeared all over town at the paramedic station, the tow truck shops, and the auto glass businesses. Unemployment dropped to near zero. But the traffic accidents continued to increase. And yet there were no skid marks.

The city council was baffled. They thought they had solved this problem. Skid Marks Disease had been eradicated by the teflon treatment. Why were traffic accidents still happening? They called a town meeting to discuss the problem, and following a short discussion of the problem, an old hermit, who lived in the forest just outside of Allopath, addressed the townspeople. “*There is no such thing as Skid Marks Disease,*” he explained. “*This disease was invented by the roadaceuticals company to sell you teflon coatings.*”

The townspeople were horrified to hear such a statement. They knew Skid Marks Disease existed. The doctor had told them so. How could this hermit, who had no Motor Division (M.D.) degree, dare tell them otherwise? How could he question their collective town wisdom in such a way?

“*This is a simple problem,*” the hermit continued. “*All we need to do is build stop signs and traffic lights. Then the traffic accidents will cease.*” Without pause, one city council member remarked, “*But how can we afford stop signs? We’ve spent all our money on teflon treatments!*” The townspeople agreed. They had no money to buy stop signs.

Another council member added, *“And how can we stop anyway? The streets are all coated with teflon. If we build stop signs, we’ll waste all the money we’ve spent on teflon!”* The townspeople agreed, again. What use were stop signs if they couldn’t stop their cars anyway?

The hermit replied, *“But the stop signs will eliminate the need for teflon. People will be able to stop their cars, and accidents will cease. The solution is simple.”*

But what might happen if stop signs actually worked, the townspeople wondered. How would it affect the booming economy of Allopath? Realizing the consequences, a burly old man who owned a local repair shop jumped to his feet and said, *“If we build these stop signs, and traffic accidents go down, I’ll have to fire most of my workers!”*

It was at that Moment that most of the townspeople realized their own jobs were at stake. If stop signs were built, nearly everyone would be unemployed. They all had jobs in emergency response services, car repair shops, hospitals and teflon coating maintenance. Some were now sales representatives of the roadaceuticals company. Others were importers of glass, tires, steel and other parts for cars. A few clever people were making a fortune selling wheelchairs and crutches to accident victims.

One enterprising young gentleman started a scientific journal that published research papers describing all the different kind of Skid Marks Diseases that had been observed and documented. Another person, a fitness enthusiast, organized an annual run to raise funds to find the cure for Skid Marks Disease. It was a popular event, and all the townspeople participated as best they could: jogging, walking, or just pushing themselves along in their wheelchairs.

One way or another, nearly everyone in Allopath was economically tied to Skid Marks Disease. Out of fear of losing this economic prosperity, the townspeople voted to create a new public safety agency: the Frequent Drivers Association (FDA). This FDA would be responsible for approving or rejecting all signage, technology and chemical coatings related to the town’s roads.

The FDA's board members were chosen from among the business leaders of the community: the owner of the car shop, the owner of the ambulance company, and of course, Dr. West.

Soon after its inception, the FDA announced that Skid Marks Disease was, indeed, very real, as it had been carefully documented by a doctor and recently published in the town Skid Marks Disease journal. Since there were no studies whatsoever showing stop signs to be effective for reducing traffic accidents, the FDA announced that stop signs were to be outlawed, and that any person attempting to sell stop signs would be charged with fraud and locked up in the town jail.

This pleased the townspeople of Allopath. With the FDA, they knew their jobs were safe. They could go on living their lives of economic prosperity, with secure jobs, knowing that the FDA would outlaw any attempt to take away their livelihood. They still had a lot of traffic accidents, but at least their jobs were secure.

And so life continued in Allopath. For a short while, at least. as traffic accidents continued at a devastating rate, more and more residents of Allopath were injured or killed. Many were left bed-ridden, unable to work, due to their injuries. In time, the population dwindled. The once-booming town of Allopath eventually became little more than a ghost town. The hospital closed its doors, the FDA was disbanded, and the Skid Marks Disease journal stopped printing.

The few residents remaining eventually realized nothing good had come of Skid Marks Disease, the teflon coatings and the FDA. No one was any better off, as all the town's money had been spent on the disease: the teflon coatings, car parts and emergency services. No one was any healthier, or happier, or longer-lived. Most, in fact, had lost their entire families to Skid Marks Disease.

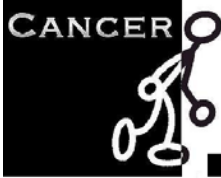
And the hermit? He continued to live just outside of town, at the end of a winding country road, where he lived a simple life with no cars, no roads, no teflon coatings and no FDA. He outlived every single resident of Allopath. He gardened, took long walks through the forest, and gathered roots, leaves and berries to feed himself. In

his spare time, he constructed stop signs, waiting for the next population to come along, and hoping they might listen to an old hermit with a crazy idea:

**... THAT PREVENTION IS THE ANSWER,
NOT THE TREATMENT OF SYMPTOMS.**

-- This fable was authored by Mike Adams, “the Health Ranger”
www.naturalnews.com/008674.html

-- Video of this fable can be seen on Dr. Joseph Mercola’s website:
www.mercola.com/townofallopath/index.htm



STEP OUTSIDE THE BOX

CHAPTER 3

PERSECUTION & SUPPRESSION

“THERE IS WIDESPREAD SUPPRESSION OF NATURAL CANCER THERAPIES, & PERSECUTION OF SUCCESSFUL THERAPISTS. THE UNDISPUTED LEADER IN THIS FIELD IS THE USA” -WALTER LAST

IT'S A FACT FOLKS

*T*hat widespread suppression and persecution **does** exist and **has existed** for well over a century is a fact. Anyone who disputes this fact is either not paying attention or purposefully lying. History is chock full of examples of original thinkers who have been scorned, laughed at, ruined, and imprisoned for daring to be creative and original and (*the most heinous crime of all*) for having the audacity to threaten the status and authority of Big Medicine.

Daniel Haley has written a fabulous book entitled Politics in Healing: The Suppression and Manipulation of American Medicine in which he clearly demonstrates that government agencies including the FDA, NCI, and FTC have **systematically suppressed cancer cures that worked and are continuing this suppression to this day**. A former New York State Assemblyman who has spent a lifetime studying health and healing in America, Mr. Haley is a man uniquely able to tell the story of the damage greed and political influence has wrought on our nation's healthcare alternatives. The twelve documented cases Mr. Haley describes are not unique. However, what makes them special is that public records exist which show

both the efficacy of the cancer treatments and the active suppression that makes it difficult for cancer patients to find and use these options.

Over the past century, hundreds of caring, concerned, and conscientious alternative doctors and herbalists have been treated like common criminals for the “crime” of curing people of terminal diseases in an unapproved manner by heavy-handed government agents who swoop down on clinics with machine guns and body armor. All the while, these same agencies posture themselves before TV cameras and the public under the ludicrous pretense of being servants of the people and protectors of the common good.

COUNTERTHINK



FACT: THE FDA HAS CONDUCTED MULTIPLE ARMED RAIDS ON VITAMIN SHOPS AND HEALTH CLINICS.

Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

According to the late Dr. Robert Atkins, “There have been many cancer cures, and all have been ruthlessly and systematically suppressed with a Gestapo-like thoroughness by the cancer establishment. The cancer establishment is the not-too-shadowy association of the American Cancer Society, the leading cancer hospitals, the National Cancer Institute and the FDA. The shadowy part is the fact that these respected institutions are very much dominated by members and friends of members of the pharmaceutical industry, which profits so incredibly much from our profession-wide obsession with chemotherapy.”

One book I have already mentioned which I highly recommend is a book by the famous medical historian, Hans Ruesch, entitled Naked Empress or the Great Medical Fraud. In this book, Ruesch exposes massive corruption and fraud in medicine, media, science, government, and industry. Ruesch quotes J.W. Hodge, M.D. on page 75, “The medical monopoly or medical trust, euphemistically called the American Medical Association, is not merely the meanest monopoly ever organized, but the most arrogant, dangerous and despotic organization which ever managed a free people in this or any other age. **Any and all methods of healing the sick by means of safe, simple and natural remedies are sure to be assailed and denounced by the arrogant leaders of the AMA doctors’ trust as ‘fakes, frauds and humbugs.’**”

He continues, “Every practitioner of the healing art who does not ally himself with the medical trust is denounced as a ‘dangerous quack’ and impostor by the predatory trust doctors. Every sanitarian who attempts to restore the sick to a state of health by natural means without resort to the knife or poisonous drugs, disease imparting serums, deadly toxins or vaccines, is at once pounced upon by these medical tyrants and fanatics, bitterly denounced, vilified and persecuted to the fullest extent.” Medical mavericks with innovative cancer ideas are slandered, labeled as “quacks” or “charlatans,” and persecuted, while their treatment protocols are bastardized and suppressed.

But Why? Big Medicine tells us that they are protecting us from the alternative cancer treatments since they have not been scientifically proven to be effective and they may delay the more effective

conventional cancer treatments from doing their job. **More effective conventional cancer treatments?** You've got to be kidding!! Is that what they call a three percent cure rate with chemotherapy? This argument would be laughable if it were not so heartbreaking for millions of cancer victims. They aren't protecting us; they are protecting their own cash cow! And what exactly does it mean to be "*scientifically proven to be effective*" by the FDA anyway? Snickers, Twinkies, Cupcakes, Coca Cola, and thousands of other junk food products are "*approved*" by the FDA, but if you offer an alternative cancer treatment, then you are liable to end up in jail. Think I'm making this stuff up? **Read on.**

HARRY HOXSEY

Harry Hoxsey was born in 1901. Around 1840, Harry's grandfather, John Hoxsey, a horse breeder, had a stallion that developed cancer. When the horse was pastured, John noticed that the horse grazed primarily on a particular shrub and flowering plants. Over the course of a few months, eventually the horse was cancer free. John eventually developed an herbal tonic derived from these "*wonder plants*" and began to treat sick horses. John passed down the formula to his son, Harry's father, who quietly began to use the tonic to help humans with cancer. When Harry was only 10 years old, he began to help his father administer the tonic to terminal cancer victims. They had tremendous success, and eventually, when his father died, Harry was responsible for carrying on the Hoxsey healing tradition.

In 1924, at the age of only twenty-three, Harry opened the Hoxsey Cancer Clinic in Dallas. For over thirty years, he treated (*and cured*) many cancer patients using the Hoxsey tonic. By the 1950s, the Hoxsey Cancer Clinic in Dallas was the world's largest private cancer center, with branches in seventeen states. At that time, the head of the AMA was Morris Fishbein, who was also the editor of the *Journal of the American Medical Association (JAMA)*. Fishbein tried to purchase the rights to the tonic from Hoxsey, but when he refused, Fishbein conducted a personal vendetta against him, using the *JAMA* as his primary means to discredit him.

Over the course of several years, Fishbein published numerous articles in the *JAMA* which claimed that the Hoxsey tonic was nothing more than a “worthless bottle of colored water” made of “backyard weeds.” And due to the fact that he gave these weeds to cancer patients, Hoxsey, who was not a doctor, was arrested **over 200 times** for practicing medicine without a license! Perhaps his biggest adversary was district attorney, Al Templeton, who had him arrested over one hundred times. Al’s brother, Mike, developed terminal cancer and went through the “Big 3” conventional treatments. After the doctors sent him home to die, Mike visited the Hoxsey Cancer Clinic and was eventually cured. When Al learned about his brother’s miraculous recovery from terminal cancer, he quit his job and became Hoxsey’s defense attorney.

Unfortunately, this was during the period that the “Big 3” conventional cancer treatments, due largely to their profitability to the entire Cancer Industry, were gaining a foothold in conventional cancer therapy. The inexpensive Hoxsey tonic posed a real threat to the profits which were being realized from the “Big 3,” so it’s not hard to guess what happened next: **a huge smear campaign.** Through their subversive network of cronies and through a series of slanderous articles, the Cancer Industry effectively labeled Hoxsey “the worst cancer quack of the century.” However, if Hoxsey was a quack, then he sure wasn’t a very good quack, since quacks are in it for the money, and the Hoxsey Cancer Clinics would treat 100% of the patients who came for treatment, even if they couldn’t afford to pay for treatment. **But the “medical mafia” didn’t stop at slander.** FDA officials would actually break into his patients’ houses, intimidate them, tell them they were being duped by a quack, and steal their medicine.

However, in 1954, an independent team of ten physicians from around the United States made a two-day inspection of the Hoxsey Cancer Clinic in Dallas, examining case histories and speaking to patients. They then issued a remarkable statement. They declared that the clinic was “**successfully treating pathologically proven cases of cancer, both internal and external, without the use of surgery, radium or x-ray.**” Of course, the results of this investigation were ignored by the Cancer Industry. Then in 1953, the Fitzgerald Report, commissioned by a U.S. Senate committee, concluded that

organized medicine had “**conspired to suppress**” the Hoxsey therapy (Ben Fitzgerald, *Congressional Record*, August 1953).

Due to a slanderous article published by Fishbein, Hoxsey sued him for libel and slander, and Hoxsey won. Fishbein was forced to resign from the AMA. **But it was too little, too late.** Hoxsey’s name, along with his tonic, had already been trashed and would never recover. All of Hoxsey’s clinics were eventually shut down. The Dallas clinic closed in 1960, and three years later, to escape the mounting pressure, Mildred Nelson R.N. (*his long time chief nurse whose mother had been cured from terminal cancer by the Hoxsey tonic*) moved the operation to Tijuana, Mexico. Harry Hoxsey died in 1974, but the Bio-Medical Center, as the clinic is now called, continues to treat all types of cancer. Before she died, Nelson appointed her younger sister, Liz Jonas, as the administrator of the Bio-Medical Center.

As I mentioned earlier in the book, we had planned to take dad to this clinic, but unfortunately he never recovered from the surgery. Their medical records indicate that many patients (*some arriving with advanced stages of cancer*) have been helped and even completely healed of cancer by the Hoxsey tonic. This is yet another instance of a successful alternative cancer treatment which was dismissed as “quackery” by the Cancer Industry.

ROYAL RAYMOND RIFE

Royal Raymond Rife was a brilliant scientist born in 1888. Rife developed technology which is still commonly used today in the fields of optics, electronics, radiochemistry, and biochemistry. In the 1920s, Rife invented the world’s first virus microscope.

By 1933, he had perfected that technology and had constructed the Rife Universal Microscope, which was capable of magnifying objects 60,000 times their normal size. Unlike electron microscopes which can only observe dead specimens due to the lethal chemical stains applied to them, Rife’s microscope enabled him to view living organisms via a process he called “*staining with light.*”

Like so many other pivotal discoveries in science, the principles behind Rife's super-microscopes were simple yet ingenious. For example, the microscopes never crossed light beams, as according to Rife, light diffraction is responsible for the lower resolutions seen in standard research microscopes. Through his advanced microscopes, Rife was able to show "*pleomorphism*," meaning that growing an organism in a different type of culture may yield a different organism entirely.

Rife was able to observe tiny living microorganisms that dwell in the human body, organisms which he felt caused cancer. He observed the reactions of various microbes as he bombarded them with infinite combinations of radio and audio frequencies. He soon discovered that certain frequencies, which he called "mortal oscillatory frequencies," would destroy the pleomorphic microbes which are active in cancers.

Rife developed successful inexpensive electronic treatments via his device. Did his frequency treatment cure cancer? The evidence says "**yes.**" In 1934, a clinical trial was conducted. Sixteen terminal cancer patients were treated with Rife's frequency machine therapy. The medical team included a "Who's Who" of doctors and pathologists. They were assigned to examine the patients after 3 months, if they were still alive. The results? **100% were cured... all 16 lived.**

Along comes Big Medicine. The head of the AMA during that era was...you guessed it...the infamous Morris Fishbein. Just like he did with Harry Hoxsey, Fishbein wanted a piece of the action from the sales of these devices, so he proposed an arrangement whereby he (*and the AMA*) would give Rife their official blessing and then he would get his pals at the FDA to fast track their approval of Rife's device. In exchange, Fishbein would receive a huge share of the profits from the sales. **Rife refused.** Similar to what he did to Harry Hoxsey, Fishbein and his cronies set out to destroy Rife. Rife's lab was vandalized and photographs, film, and records were stolen. His microscope was stolen, his lab was burned down, and some of his supporters died under suspicious circumstances.

Then the knockout blow – the police illegally confiscated the remainder of his fifty years of research. To finish the job, the medical journals, supported almost entirely by drug company revenues and controlled by the AMA, refused to publish anything about Rife’s treatment. In 1971, at the age of eighty-three, Rife died from an overdose of valium and alcohol. For more information on Royal Raymond Rife, I recommend that you read [The Cancer Cure That Worked](#) by Barry Lynes.

THE RALPH MOSS STORY (in his own words)

excerpted from www.cancerdecisions.com

“In 1974, I began working at Memorial Sloan-Kettering Cancer Center, the world’s leading cancer treatment hospital. I was an idealistic and eager young science writer, sincerely proud to be part of Sloan Kettering and Nixon’s “War On Cancer.” Ever since I was a kid, my main heroes were scientists (with the Brooklyn Dodgers running a close second!) The job at Sloan-Kettering seemed like a dream come true for me. I wanted to be part of the winning team that finally beat cancer.

Within three years, I had risen to the position of Assistant Director of Public Affairs at the Hospital. At the time, I was 34 years old, married to my high-school sweetheart, and we had a daughter and son, then 9 and 7 years old. We had dreams of buying a house and saving for the kids’ education, so you can imagine how thrilled we were when I was promoted, with a huge raise, glowing feedback from my bosses, and was told that perks of the job would eventually include reduced tuition for the kids at New York University. Needless to say, we all were really counting on my “bright future” at Memorial Sloan-Kettering. But something soon happened that changed the course of my life forever.

A big part of my job as Assistant Director of Public Affairs was to write press releases for the media about cancer news and to write the in-hospital newsletter. I also handled calls from the press and public about cancer issues. So I was just doing a normal day’s work (or so I thought) when I began interviewing an esteemed scientist at the Hospital for a newsletter article I was working on. It turned out that

the scientist, Dr. Kanematsu Sugiura, had repeatedly gotten positive results shrinking tumors in mice studies with a natural substance called amygdalin (You may have heard of it as “laetrile”.) Excitedly (and naively!) I told my “discovery” of Sugiura’s work to the Public Affairs Director and other superiors, and laid out my plans for an article about it. Then I got the shock of my life.

They insisted that I stop working on this story immediately and never pick it up again. Why? They said that Dr. Sugiura’s work was invalid and totally meaningless. But I had seen the results with my own eyes! And I knew Dr. Sugiura was a true scientist and an ethical person. Then my bosses gave me the order that I’ll never forget: They told me to lie. Instead of the story I had been planning to write, they ordered me to write an article and press releases for all the major news stations emphatically stating that all amygdalin studies were negative and that the substance was worthless for cancer treatment. I protested and tried to reason with them, but it fell on deaf ears.

I will never forget how I felt on the subway ride home that day. My head was spinning with a mixture of strong feelings- confusion, shock, disappointment, fear for my own livelihood and my family’s future, and behind it all, an intense need to know why this cover-up was happening. After long talks with my wife and parents (who were stunned, as you can imagine) I decided to put off writing any amygdalin press releases as long as I could while I discreetly looked into the whole thing some more on my own time. Everyone at the office seemed happy just to drop the whole thing, and we got busy with other less controversial projects.

So in the next few months, I was able to do my own investigating to answer the big question I couldn’t let go of: Who were these people I worked for and why would they want to suppress positive results in cancer research? My files grew thick as I uncovered more and more fascinating - and disturbing - facts. I had never given any thought to the politics of cancer before. Now I was putting together the pieces as I learned that:

- The people on Sloan-Kettering’s Board of Directors were a “Who’s Who” of investors in petrochemical and other polluting industries. In other words, the hospital was being

- run by people who made their wealth by investing in the worst cancer-causing things on the planet.
- CEOs of top pharmaceutical companies that produced cancer drugs also dominated the Board. They had an obvious vested interest in promoting chemotherapy and undermining natural therapies.
 - The Chairman and the President of Bristol-Myers Squibb, the world's leading producer of chemotherapy, held high positions on MSKCC's Board.
 - Of the nine members of the Hospital's powerful Institutional Policy Committee, seven had ties to the pharmaceutical industry
 - The Hospital itself invested in the stock of these same drug companies.
 - Directors of the biggest tobacco companies in the U.S., Phillip Morris and RJR Nabisco held places of honor on the Board.
 - Six Board Directors also served on the Boards of The New York Times, CBS, Warner Communications, Readers Digest, and other media giants.

Not surprisingly, profits from chemotherapy drugs were skyrocketing and the media glowingly promoted every new drug as a “breakthrough” in cancer. I kept all my notes in my filing cabinet at work. I had no idea what I would ever do with them. I just knew that I had to get to the bottom of it, for myself.

Meanwhile, the public's interest in laetrile refused to go away. A lot of people were going across the border to Mexican clinics to get the stuff and my secretary's phone was ringing off the hook with people wanting to know what Sloan-Kettering thought of its value. I was once again told to give out the news that the studies had all been negative.

At home, I called my family together for a meeting. With their support, I decided I couldn't lie on behalf of the Hospital. In November of 1977, I stood up at a press conference and blew the whistle on Memorial Sloan Kettering Cancer Center's suppression of positive results with amygdalin. It felt like jumping off the highest diving board, but I had no doubt I was doing the right thing. I was fired the next day for “failing to carry out his most basic responsibilities” as the

Hospital described it to the New York Times. In other words, failing to lie to the American people.

When I tried to pick up my things in my office, I found my files had been padlocked and two armed Hospital guards escorted me from the premises.

*Luckily for all of us, I have a very smart wife who all along had been making copies of my research notes and had put a complete extra set of files in a safe place. Those notes turned into my first book, *The Cancer Industry*, which is still in print (in an updated version) and available in bookstores.*

That dramatic day, when I stood up in front of the packed press conference and told the truth, was the beginning of a journey I never could have predicted. I was launched on a mission that I'm still on today – helping cancer patients find the truth about the best cancer treatments.

Well, we weren't able to buy a home until years later, the kids went to colleges on scholarships and loans, and my wife took on a demanding full-time job to help us get by. But in retrospect, my experiences as an insider in "the cancer industry" were among the best things ever to happen to me. My values were put to the test and I had to really examine what was important in my life. It is because of this difficult experience at Sloan-Kettering that I found a truly meaningful direction for my professional life, rather than just climbing Sloan-Kettering's career ladder and losing my soul in the process."

MORE PERSECUTION & SUPPRESSION

Dr. Jonathan Wright, M.D. was a highly regarded nutrition specialist, but his cardinal sin was promoting natural treatments which hadn't received the FDA's blessing. In the summer of 1992, *The Civil Abolitionist* carried an article titled "FDA: The American Gestapo Prosecutor or Persecutor?" which told the story. On May 6, 1992, in what must have resembled a military invasion, Dr. Wright's clinic was assaulted by over twenty armed men who kicked open the door, pointed guns at both patients and staff, and confiscated

business records, patient records, supplies, and equipment. The FDA “Gestapo” agents spent fourteen hours at the clinic, searching through everything. At that point in time, he had not even been charged with a crime!

Why did they need to kick in the door and draw their guns? Well, police spokesman Rob Barnette explained that officers “*need to be prepared for the worst.*” Dr. Wright hardly fit the bill of a “*Wild West Desperado.*” A graduate of Harvard and the University of Michigan Medical School, he was nutrition editor of *Prevention* magazine for over a decade. But he committed **the unforgivable sin** – he failed to prescribe drugs to treat illness. Rather he chose to use nutritional therapy and vitamin therapy. It is interesting to note that one of his favorite treatments was using L-Tryptophan to cure depression, but the FDA had outlawed this amino acid. Curiously, it was outlawed just a few months before the FDA put a big push on Prozac as a treatment for depression.

My friend, Jason Vale, was handed a death sentence by his doctors in the mid 1990s when it was discovered that he had terminal cancer. Through extensive research, he discovered that people who once had cancer found healing properties in something as simple as the seeds of apples and apricots. It turned out that these seeds contain natural substances that kill cancer cells (*Vitamin B₁₇*). Jason immediately began to feel better by eating apple seeds as a part of his daily diet. Within a short period of time, Jason’s cancer literally disappeared. When “Extra” aired Jason’s story on national TV, it turned out to be the program’s highest rated show to date so they chose to run that same episode the following week. The viewer response was so great that Jason was inundated with thousands of telephone calls from people all over the country.

Since then, Jason has inspired and helped thousands of people to naturally treat their own cancer. Through proper diet, nutrition, and the introduction of apple and apricot seeds into their daily diets, they have one-by-one created their own success stories that fortunately they will live to tell. In November, 2001, Jason was coerced by the FDA into signing a Consent Decree that would prevent him from sharing his story. Despite the fact that he had **not** broken any law, the FDA brought criminal charges against Jason for

distributing apricot seeds. Jason was sentenced on June 18, 2004 to sixty-three months in prison and three years of supervised release by a United States District Court in the Eastern District of New York. **UPDATE:** Jason has been released from jail. Thank God! See Appendix 4 (page 383) for more information on Jason and to learn a little bit more about his fascinating story.

Dr. Max Gerson developed a successful protocol to treat cancer patients using a strict regimen of nutrition, fresh juicing, and pancreatic enzymes. The medical community had an outstanding opportunity to appropriately examine alternative cancer treatments when a United States Senate Committee moved to grant extensive funds for research of his treatment, and Senators were very impressed with his results.

However, Big Medicine (*specifically the AMA*) lobbied so strongly against research into alternative cancer treatments that the move was narrowly defeated in the Senate. Then Big Medicine used their influence to suppress Gerson’s success and branded him as a “quack.” They said it loud enough and long enough that it became common knowledge that Gerson was a quack, despite the fact that his treatment protocol was curing terminal patients of cancer.

This is standard operating procedure for Big Medicine – when someone discovers an alternative cancer treatment that is effective at treating cancer, Big Medicine quickly suppresses the treatment and they use their cronies to create the public perception that the physician is incompetent or a “quack.” And they are quite effective – they even have websites set up for this very purpose. Dr. Albert Schweitzer wrote “*I see in him (Dr. Gerson) as a medical genius who walked among us.*”

Neal Deoul financed alternative cancer treatment research in the 1990s. In 1998, Maryland Attorney General Joseph Curran charged him with distributing deceptive promotional literature. Deoul had financed T-UP, Inc. which distributed cesium and T-UP (*an aloe vera concentrate*) to battle cancer (*and AIDS*). Despite the fact that there was not a single consumer complaint and there were hundreds of testimonials from consumers who claimed life changing results.

Ironically, as the case against Deoul unfolded in court, Deoul himself was diagnosed with an aggressive form of prostate cancer. He quietly and confidently turned to cesium & T-UP (*his own products*) for treatment of his prostate cancer. Of course, Big Medicine physicians protested loudly and predicted the worst if he continued to refuse radiation and chemotherapy, but his condition improved as a result of taking his own medicines... **no other therapies were used.** Unfortunately, his successful treatment in the real world was not mirrored in the courtroom. A Maryland Judge found Deoul and T-UP, Inc. guilty of violating Maryland's consumer protection statutes. The critical question of whether the products actually fight cancer was never addressed in the judge's findings.

Jimmy Keller operated an alternative cancer clinic in Baton Rouge, but was forced out of the country to Tijuana, Mexico. Keller had founded the clinic after using natural methods to cure himself of terminal cancer. His own cancer had been unsuccessfully treated over two decades earlier by orthodox cancer specialists who amputated his ear and mutilated his face. As is typical with the “Big 3” orthodox treatments, Keller's cancer returned with a vengeance. He investigated natural healing methods, cured himself, and then began helping others to do so. He thought he was safe from the “*medical mafia*” since he was in Mexico. He was wrong.

In March 1991, Keller was abducted at gunpoint by four bounty hunters working for the U.S. Justice Department, at the command of the FDA, and forced to cross the U.S. border. There, Keller was arrested by the FBI on twelve counts of wire fraud. What was his crime? Keller had made telephone calls across interstate lines to attract people to his Mexican clinic. Following the illegal kidnapping of Keller from Mexican soil, without extradition, he was jailed in Texas. Amazingly, his bond was set at \$5 million. He was later convicted and sent to prison for two years. Keller's case was part of a trend of U.S. government kidnappings abroad, in full defiance of international law.

In his book entitled Politics in Healing: The Suppression and Manipulation of American Medicine, Daniel Haley has documented 11 case studies of systematic suppression of proven cancer cures with substances like Hydrazine Sulfate, DMSO, Cesium Chloride, and

Aloe Vera. Haley's conclusion: *“In a free market, where non-toxic therapies can openly compete with toxic therapies, and information is not suppressed, consumers will make informed choices. This is exactly what the pharmaceutical companies don't want. **Dancing to their tune, the FDA ferociously keeps off the market effective, nontoxic therapies that might provide formidable competition for patented, and often toxic, pharmaceutical drugs.** By keeping these therapies off the market, the FDA is not protecting the public from harm. It is protecting the pharmaceutical companies from effective competition.”*

The fact is that many successful alternative cancer treatments have been created in the past century and then lost again due to suppression and persecution. The barrier of **scientific bigotry** that separates conventional cancer research from reality remains intact. There are countless true life stories of persecution and suppression. If I were to list them all, it would take 10 more books. But I'll let you do the research yourself.

Just type in these names in any search engine: Dr. Sam Chachoua, Dr. Hulda Clark, Dr. A. Keith Brewer, Dr. William Kelley, Dr. Gaston Naessens, Dr. Patrick Flanagan, Dr. Hans Nieper, J.H. Tilden, Dr. Kurt Donsbach, Dr. Stanislaw Burzynski, Dr. William Koch, Dr. F.M. Eugene Blass, Dr. Otto Warburg, Dr. Virginia Livingston, Dr. Günther Enderlein, Dr. Ernest Krebs, Dr. Philip E. Binzel, Jr. and the list goes on and on. Many names have been lost forever...others have been crushed out of existence for good.

What do all these honorable doctors have in common? **They all developed successful alternative methods of treating cancer for thousands of patients.** And they all were persecuted by the Cancer Industry since they used “unapproved” treatments. These examples are only the tip of a huge iceberg.

The Cancer Industry now has an eighty year history of vast corruption, incompetence, persecution, and organized suppression of cancer therapies which actually work. Millions of people have suffered terribly and even died because those in charge took bribes, closed their minds to innovation, and refused to do what was morally right.

But what is going on in medicine today should not surprise us if we take a quick look at the past. Did you know that many of the world's greatest discoveries were initially rejected by the scientific community? Those who pioneered these discoveries often were ridiculed and condemned as quacks or charlatans. According to Arthur Schopenhauer, 19th century philosopher, “Every truth passes through three stages before it is accepted. In the first it is ridiculed; in the second it is opposed; in the third, it is regarded as self-evident.” Here are just a few examples:

- Ignaz Semmelweis was expelled from the medical society and run out of Vienna for asking surgeons to wash their hands before operating.
- Galileo was scorned for his belief that the sun is the center of the universe.
- Wilbur and Orville Wright were dismissed as “hoaxsters” by the Scientific American, the U.S. Army, and most American scientists.
- William Harvey was ridiculed for his belief that blood was pumped from the heart and moved around the body through arteries.
- Jacques Cartier discovered the cure to scurvy: tree bark and needles from the white pine (*both rich in Vitamin C*) stirred into a drink. He reported this to doctors when he returned to Europe, but they laughed at him. It took over 200 years before the medical experts “discovered” that scurvy is caused by a deficiency of vitamin C.
- The inventors of turbine power, the electric telegraph, the tank, the electric light, television, and space travel were all laughed at or ignored by the scientific establishment.

The irony about science (*which is **supposedly** a search for new truths*) is that most members of any scientific establishment seem dedicated to **opposing** real progress and suppressing original thought. This includes the medical field. One can attack political or economic theories with some freedom, and there is room for originality in most areas of intellectual thought. **But not so with science and medicine** . . . any scientist or physician with a new and original idea is likely to be regarded as a dangerous “hoaxster” or “quack” rather than an innovator whose ideas are worth evaluation.

The most repressive, most prejudiced, and most obscenely intolerant branch of Big Medicine is undoubtedly that part of it which claims to deal with cancer. As a matter of fact, Big Medicine has a list of current cancer quacks and charlatans which they publish on numerous websites, including quackwatch.com. What do these so-called cancer quacks have in common? They utilize “unproven methods” for treating cancer. Let’s look at this, shall we? Unproven methods? What exactly does this mean? Are these methods really **unproven**, or is the proof of their success being **suppressed**?

You should be aware that the Cancer Industry goes to great lengths to bury and suppress successful alternative cancer treatments. They also suppress alternative cancer treatments that do **not** work, thus it appears that **all** of the treatments which they suppress do **not** work and that they are just “doing their job to protect us.” However, the fact is that hundreds of alternative cancer treatments **do** work, and it is unfortunate that the few snake oil salesmen do their worst damage by giving Big Medicine the ammunition they need to make **all** alternative cancer treatments (*including the effective treatments*) look like quackery.

The truth be told, most of the everyday practices of conventional medicine are unproven if we go by the government’s own standards. In 1978, the Office of Technology Assessment (*an arm of Congress*) issued a major research report that concluded “only 10 to 20 percent of all procedures currently used in medical practices have been shown to be efficacious by controlled trial.” **Translation:** between 80% and 90% of what doctors do to you is **scientifically unproven guesswork**. By the government’s own definition, the majority of conventional medicine is “quackery” (“Assessing the Efficacy & Safety of Medical Technologies,” U.S. Congress, OTA, PB 286-929, 1978).

According to Webster Kehr, “The scientific evidence for alternative treatments can be compared to a ship the size of the Queen Mary II. The scientific evidence for orthodox treatments, by comparison, would be compared to a ship that could fit in a bathtub. I am not exaggerating. Yet the FDA says chemotherapy and orthodox medicine ‘has’ scientific evidence and there is ‘no scientific evidence’ for alternative treatments. It is nothing but pure corruption, it is nothing

*but lies. So how does the FDA, NIH, NCI, AMA, ACS, etc. suppress the statistically **overwhelming evidence** for alternative treatments for cancer? By ignoring it (i.e. blacklisting it) and babbling about their concepts of ‘spontaneous remission’ and what I call ‘psychological remission’.”*

Interestingly, all of the alternative cancer treatments on Big Medicine’s “quackery” list have the following common denominators: they are all natural, non-drugs, non-toxic, and non-patentable. **Most importantly, they all successfully cure cancer!** Even though chemo and radiation are completely unproven therapies and oftentimes will **kill** a cancer patient, they are not on the list. Why? Because they both are very expensive and are patentable. Let me explain.

Let’s just suppose that I discovered a vitamin that cured cancer. Let’s just call it Vitamin Z. In order for me to be able to tell you what Vitamin Z does and sell it to you, I would need to get Vitamin Z approved as a drug by the FDA. This would cost me between \$200 and \$500 million and several years to get it approved. However, since Vitamin Z is natural and is found in most vegetables, I can’t patent it. So, even after spending half a billion bucks to classify Vitamin Z as a “drug,” it would still be a non-patentable drug, and anyone could sell it without my permission. I just wasted half a billion bucks and several years. As a CPA, I can tell you that it makes no business sense to try and get Vitamin Z approved by the FDA to sell as a drug.

So, even though Vitamin Z is a natural vitamin, cures cancer, and is free from harmful side effects, I cannot **tell you** that it cures cancer because it has not passed FDA scrutiny. But why would Big Medicine withhold information about something as important as the cure for cancer? Aren’t they concerned with our well being? Don’t they want what is best for us? Sadly, the answer to each of these questions, plain and simple, is “no.”

Since Big Medicine is beholden to Big Pharma, their treatment protocols will always include the most expensive, profitable drugs, regardless of whether or not this is in the patient’s best interest.

Let's imagine that there was a plant that helped to ease the chronic pain associated with terminal cancer. We'll just call it "plant X." Cancer patients everywhere were living pain-free lives, without vomiting, actually had appetites, and weren't suffering from cachexia (*wasting away*). You would think that plant X would be given to every cancer patient, right? Well, you would be sadly mistaken. Most likely, since plant X cannot be patented, it would be outlawed as an "illegal drug" and those who used plant X would be criminalized. You see, only the "legal drugs" are allowed, despite the fact that many of the legal drugs are **lethal** . . . and many of the "illegal drugs" (i.e. *plants and herbs*) are completely harmless and actually have many health benefits.

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

The Cancer Industry relentlessly persecutes those doctors that offer new, effective, non-toxic cancer therapies (*ignoring the wishes of patients who wish to try those therapies*) while condoning, supporting, and protecting by law the “Big 3” which have been **proven to be ineffective and toxic**. The deciding issue for the Cancer Industry is not whether alternative cancer treatments work better than the “Big 3.” **This fact is evident**. The deciding issue, unfortunately, is which protocol will result in the largest profits to Big Pharma.

And the winner is **the “Big 3.”**

And the losers are ... **the cancer patients!**



STEP OUTSIDE THE BOX

CHAPTER 4

TOXIC TREATMENTS

“SUCCESS OF MOST CHEMOTHERAPIES IS APPALLING ... THERE IS NO SCIENTIFIC EVIDENCE FOR ITS ABILITY TO EXTEND IN ANY APPRECIABLE WAY THE LIVES OF PATIENTS SUFFERING FROM THE MOST COMMON ORGANIC CANCER. CHEMOTHERAPY...IS A SCIENTIFIC WASTELAND.” -DR. ULRICH ABEL

THE “BIG 3”

If you have cancer, then it is very likely you’re your doctor has already or will soon advise you that the only viable treatments are surgery, chemotherapy, and/or radiation. If you have a tumor, then the doctor will try to cut or **slash** it out via surgery. After they cut you, then they typically recommend chemo to try to kill any remaining cancer cells with toxic **poisons**. And they will finish off with radiation, to **burn** whatever cancer cells remain. This is why I, and many others, refer to the “Big 3” protocol as “**Slash, Poison, and Burn.**” This is the toxic protocol that we have all been misled to believe is the best way to treat cancer.

Now, with modern advancements in medicine, one would think that the “Big 3” has improved the prognosis for cancer, right? Aren’t we curing a greater percentage of people with cancer now as compared to 1950? The answer is a resounding “**NO!**” As a matter of fact, the track record of the “Big 3” is so pathetic that the Cancer

Industry considers it a “success” if the survival rate of patients who take the “Big 3” actually matches the survival rate of patients who do nothing at all! Each of these treatments is invasive, has devastating side effects, and treats only **symptoms**, not the **cause** of the cancer.

The fact is that the “Big 3” can cause the spread or recurrence of cancer. According to the *New England Journal of Medicine*, “Secondary cancers are known complications of chemo therapy and irradiation used to treat Hodgkin’s and non-Hodgkin’s lymphomas and other primary cancers.” (NEJM, September 21, 1989). Dr. Lucian Israel, a well-known oncologist, noted in his book Conquering Cancer, that several studies have shown that cancer patients who undergo radiation therapy are more likely to have their cancer metastasize to other sites in their bodies. The radioactivity used to kill cancer cells also triggers the process of DNA mutation that creates new cancer cells of other types.

In his book The Cancer Industry, Dr. Ralph Moss reports that “In 1902, a German doctor recorded the first case of human cancer caused by radiation: the tumor had appeared on the site of a chronic ulceration caused by X-ray exposure. Experimental studies performed in 1906 suggest that leukemia (cancer of the blood) could be caused by exposure to the radioactive element radium. By 1911, 94 cases of radiation-induced cancer had been reported, more than half of them (54) in doctors or technicians. By 1922, over 100 radiologists had died from X-ray-induced cancer.” According to Dr. Moss, “I had a brain cancer specialist sit in my living room and tell me that he would **never take radiation** if he had a brain tumor. And I asked him, ‘but, do you send people for radiation?’ and he said, of course. ‘I’d be drummed out of the hospital if I didn’t.’” www.ralphmoss.com

“Complications following high-dose radiotherapy for breast cancer are: fibrous, shrunken breasts, rib fractures, pleural and/or lung scarring, nerve damage, scarring around the heart... suppression of all blood cells, immune suppression,” according to Dr. Robert F. Jones, writing in the *Seattle Times* on July 27, 1980. He continues, “...many radiation complications do not occur for several years after treatment, giving the therapist and the patient a false sense of security for a year or two following therapy. The bone marrow, in

which blood cells are made, is largely obliterated in the field of irradiation... this is an irreversible effect.” In his book Understanding Cancer, Dr. John Laszlo, a former VP of research for the ACS, indicates that when chemotherapy and radiation are given together, secondary tumors are **25 times** more likely to occur than the normal rate.

Virtually all cancer surgery is unnecessary. According to Dr. Patrick McGrady, “Even though it’s been proven conclusively that lymph node excision after radiation does not prevent the spread of cervical cancer, you will still see lymphadenectomies performed all over the country routinely. This despite the fact that lymphadenectomies make women feel so bad they wish they were dead-and are a proven useless procedure.” (Townsend Letter for Doctors, June 1984, p. 99)

Surgery is oftentimes responsible for the spread of the cancer, since a minute miscue or careless handling of tumor tissue by the surgeon can literally spill millions of cancer cells into the cancer patient’s bloodstream. Biopsies can also result in the spread of cancer, since according to Dr. Donald Kelley in his book One Answer to Cancer, “often while making a biopsy the malignant tumor is cut across, which tends to spread or accelerate the growth. Needle biopsies can accomplish the same tragic results.”

One of the problems is that we’re being duped by Big Medicine with phony statistics, bad science, and fraudulent studies. According to Webster Kehr, “**The uselessness of surgery, chemotherapy and radiation is hidden behind a maze of very sophisticated false and misleading statistics, misleading definitions, meaningless concepts and many other techniques.**” www.cancertutor.com

A 1986 report in the *New England Journal of Medicine* assessed progress against cancer in the USA during the years 1950 to 1982. Despite progress against some rare forms of cancer, which account for one to two percent of total deaths caused by the disease, the report found that the overall death rate had increased substantially since 1950. “The main conclusion we draw is that some 35 years of intense effort focused largely on improving treatment must be judged **a qualified failure.**” The report further concluded, “... **we are losing the war against cancer.**”

Statistics indicate that chemotherapy will cure about 3% (*mainly blood and lymph cancers*). **That's right...only 3%**. As a matter of fact, chemotherapy is known to have 90% of its successes in certain rare cancers. But what if you have cancer which is in the other 90% group? Why is your oncologist still telling you to take chemotherapy? When President Nixon declared war on cancer, researchers were given access to **billions** of dollars of research money earmarked for cancer drug research. If you are an M.D., you better not challenge the status quo (i.e. the “Big 3”), because if you do, then you are likely to have your funding pulled.

Case in point: in 1966, Dr. Irwin D. Bross and four colleagues published a series of groundbreaking articles entitled “*Is Toxicity Really Necessary.*” In these articles, they merely questioned whether it was possible to find an alternative to chemotherapy and radiation, since chemo and radiation are both so toxic. **The result:** they promptly lost their government support for drug testing studies.

Chemotherapy is toxic, carcinogenic (*causes cancer*), destroys red blood cells, devastates the immune system, and kills vital organs. **How toxic is chemotherapy?** Think about it...your hair falls out, your immune system is destroyed, you are constantly nauseated, you get sick and vomit, you are constantly dizzy, and you have severe headaches.

Are these signs that maybe this stuff is poison and doesn't belong in your body? I'm no doctor, but this sure does seem like a very strange way to “heal” someone. If I were a doctor and I were trying to heal someone, but then I had them do something which made their hair fall out and they started vomiting and it looked like they were going to die, then I would probably think that I was using the wrong protocol.

Sadly, the fact is that cancer patients often die from the drugs themselves due to their high toxicity. Most people who “*die from cancer*” really die from the conventional treatments long before they would have actually died from the cancer itself. To put it plainly, **the treatment kills them before the cancer kills them**. As a matter of fact, the chemotherapy drug 5FU is sometimes referred to by doctors as “*5 feet under*” because of its deadly side effects.

For most adult cancers, the typical **best case** scenario is that the “Big 3” buys a little time. In a **worst case** scenario, you will die from the treatment rather than the disease. But don’t take it from me, here’s what Dr. Allen Levin says about chemotherapy: **“Most cancer patients in this country die of chemotherapy.** Chemotherapy does not eliminate breast, colon, or lung cancers. This fact has been documented for over a decade, yet doctors still use chemotherapy for these tumors.” That’s right, the “Big 3” have actually been shown to **shorten life** in many instances.

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

In his book, *The Topic of Cancer: When the Killing Has to Stop*, Dick Richards cites a number of autopsy studies which have shown that cancer patients actually died from conventional treatments before

the tumor had a chance to kill them. Just think about it. Chemotherapy has always been developed from toxic poisonous chemicals, right? So, there has always been a fine line between administering a “therapeutic dose” and killing the cancer patient. Some (*many*) doctors step over that line. In his book, When Healing Becomes a Crime, Kenny Ausubel notes that in a trial on a chemotherapy drug tested for leukemia, **a whopping 42% of the patients died directly from the toxicity of the chemotherapy drug!**

It’s interesting to note that chemotherapy drugs were initially derived from the nitrogen mustard gas experiments during World War I and World War II. It was noticed that exposure to mustard gas caused destruction of fast growing tissues, thus it was surmised that since cancer grew quickly, these poisons could kill cancer tissue. Well, they were right...exposure to these gases did kill cancerous tissue.

Make no mistake about it, chemotherapy and radiation **do** shrink the size of tumors and they kill cancer cells. But is shrinking a tumor equivalent to curing cancer? Is there a direct correlation? The answer is **“no.”**

According to Dr. Ralph Moss, *“If you can shrink the tumour 50% or more for 28 days you have got the FDA’s definition of an active drug. That is called a response rate, so you have a response..(but) when you look to see if there is any life prolongation from taking this treatment what you find is all kinds of **hocus pocus** and song and dance about the disease free survival, and this and that. In the end there is no proof that chemotherapy in the vast majority of cases actually extends life, and this is the **GREAT LIE** about chemotherapy, that somehow there is a correlation between shrinking a tumour and extending the life of the patient.”*

Here are the facts. In 1942, Memorial Sloan-Kettering Cancer Center quietly began to treat breast cancer with these mustard gas derivatives. **No one was cured.** Chemotherapy trials were also conducted at Yale around 1943 where 160 patients were treated. Again, **no one was cured.** But, since the chemotherapy **did shrink tumors**, researchers were so excited that they proclaimed the chemotherapy trials to be a “success.”

A person can undergo \$100,000 worth of chemotherapy and live an extra six months, and conventional medicine calls that a success. The official position of Big Medicine is that the “Big 3” (*specifically chemotherapy*) is the **only treatment protocol** that should be available to sufferers of cancer, and if you step “outside the box” and find an alternative cancer treatment that actually works and increases your lifespan by years or decades, you are committing some kind of crime. This is despicable, since there is no evidence that chemotherapy increases overall lifespan at all.

In a courageous letter to Dr. Frank Rauscher, his boss at the National Cancer Institute, Dr. Dean Burk condemned the Institute’s policy of continuing to endorse chemotherapy drugs when everyone knew that they caused cancer. He argued: “Ironically, *virtually all of the chemotherapeutic anti-cancer agents now approved by the Food and Drug Administration for use or testing in human cancer patients are (1) highly or variously toxic at applied dosages; (2) markedly immunosuppressive, that is, destructive of the patient’s native resistance to a variety of diseases, including cancer; and (3) usually highly carcinogenic...These now well established facts have been reported in numerous publications from the National Cancer Institute itself, as well as from throughout the United States and, indeed, the world.*” (Letter to Frank Rauscher, dated April 20, 1973; Griffin, “Private Papers”)

In his book, Questioning Chemotherapy, Dr. Ralph Moss writes on page 29, “The amount of toxic chemicals needed to kill every last cancer cell was found to kill the patient long before it eliminated the tumor.” Then, on page 40, he writes, “I remembered the story of a celebrated Sloan Kettering chemotherapist who, when he found out that he had advanced cancer, told his colleagues, ‘Do anything you want - **but no chemotherapy.**’ It was an open secret that an official of Sloan Kettering sent his mother to Germany for alternative treatment..”

On page 70, Dr. Moss writes, “Perhaps the strangest thing about chemotherapy is that **many of these drugs themselves are carcinogenic.** This may seem astonishing to the average reader – that cancer-fighting drugs themselves cause cancer. Yet this is an undeniable fact.”

According to Dr. John Diamond, M.D., “A study of over 10,000 patients shows clearly that chemo’s supposedly strong track record with Hodgkin’s disease (lymphoma) is actually a lie. Patients who underwent chemo were 14 times more likely to develop leukemia and 6 times more likely to develop cancers of the bones, joints, and soft tissues than those patients who did not undergo chemotherapy.” (NCI Journal 87:10)

And the March 21, 1996 issue of the *New England Journal of Medicine* reported that “Children who are successfully treated for Hodgkin’s disease are 18 times more likely later to develop secondary malignant tumours. Girls face a 35 percent chance of developing breast cancer by the time they are 40 – which is 75 times greater than the average. The risk of leukemia increased markedly four years after the ending of successful treatment, and reached a plateau after 14 years, but the risk of developing solid tumours remained high and approached 30 percent at 30 years.”

The McGill Cancer Center in Montreal, one of the largest and most esteemed cancer treatment centers in the world, surveyed seventy-nine oncologists to see how they would respond to a diagnosis of cancer. The results will blow your mind. Are you sitting down? **Fifty-eight** said that **ALL** chemotherapy programs were unacceptable to them and their family members due to the fact that the drugs don’t work and are toxic to one’s system (Philip Day, Cancer: Why We’re Still Dying to Know the Truth). **That means 73% of the oncologists wouldn’t take chemo themselves!!** Wow!

In the addendum to the second edition of his book, The Persecution and Trial of Gaston Naessens, Christopher Bird describes his personal encounters with several physicians who were **well aware** that they were treating patients with protocols that did **not** work. “Thirteen of the doctors who called me were eager to know how they could get access to treatments such as those devised by Gaston Naessens for themselves, their wives, or their relatives to treat grave cases of cancer with which they had become afflicted. In each case, I interjected my own question: ‘Doctor, how come you’re not advising yourself (or those close to you) to go the same prescription route you’ve been recommending for so long to your patients? Chemotherapy, or radiation, or the like?’ And each time, though

phrased slightly differently, the answer came back: **‘Because we know it doesn’t work!’** When I heard this answer, sometimes voiced late at night, I wondered if I were living in a world gone medically mad.” www.hbci.com/~wenonah/new/naessens.htm

In the 1980s, Dr. Ulrich Abel, a German epidemiologist, did a comprehensive analysis of every major study and clinical trial of chemotherapy that has ever been done. To insure that he didn’t leave anyone out, he contacted over 350 medical centers worldwide requesting them to furnish him with anything they had published on the subject of cancer. By the time he published his report, it is likely that **he knew more about chemotherapy than any person in the world.**

The results were amazing! In his report, published in *The Lancet*, August of 1991, Dr. Abel stated, “Success of most chemotherapies is appalling...There is **no scientific evidence** for its ability to extend in any appreciable way the lives of patients suffering from the most common organic cancer...Chemotherapy for malignancies too advanced for surgery, which accounts for 80% of all cancers, is a **scientific wasteland.**” Of course, Big Medicine immediately attacked Dr. Abel’s character since they couldn’t attack his science. This is standard operating procedure for Big Medicine. Not surprisingly, no mainstream media ever mentioned Abel’s comprehensive study: **it was totally buried.**

Dr. Glenn Warner, who died in 2000, was one of the most highly qualified cancer specialists in the United States. He used alternative treatments on his cancer patients with great success. On the treatment of cancer in this country he said: “We have a multi-billion dollar industry that is killing people, right and left, just for financial gain. Their idea of research is to see whether two doses of this poison is better than three doses of that poison.”

Dr. Alan C. Nixon, past president of the American Chemical Society writes, “As a chemist trained to interpret data, it is incomprehensible to me that physicians can ignore the clear evidence that chemotherapy does much, much more harm than good.” And according to Dr. Charles Mathe, French cancer specialist, “...if I contracted cancer, I would never go to a standard cancer treatment

centre. Only cancer victims who live far from such centres have a chance.”

Yet, day after day, year after year, the Cancer Industry continues to put these toxic chemicals into the bodies of cancer patients. And the patients let them do it, even volunteering for new “guinea pig” studies, simply because someone with a degree from a school of disease (*also known as medical school*) told them it was their “only option.” And it costs lots of money for them to poison the body of cancer patients, and the patients gladly pay it. **Sadly, some people will spend six figures a year poisoning their bodies because their doctor told them to do it.**

MANIPULATING THE TERMS

Is the media lying when they say that we are winning the war on cancer? In a word, “**yes,**” but only because the Cancer Industry has been lying to the media. The Cancer Industry tells us that due to advancements in chemotherapy, people are living longer. **This is a lie.** They have been able to perpetuate this myth by manipulating the data and the terms.

Dr. John Bailer, who spent twenty years on the staff of the NCI and was editor of its journal, sheds some light on this subject: “*the five year survival statistics of the American Cancer Society are very misleading. They now count things that are not cancer, and, because we are able to diagnose at an earlier stage of the disease, patients falsely appear to live longer. Our whole cancer research in the past 20 years has been a total failure. More people over 30 are dying from cancer than ever before... more women with mild or benign diseases are being included in statistics and reported as being ‘cured.’ When government officials point to survival figures and say they are winning the war against cancer they are using those survival rates improperly.*” www.ghchealth.com/chemotherapy-quotes.html

Here is how G. Edward Griffin puts it in his book World Without Cancer: “It is clear that the American Cancer Society – or at least someone very high within it—is trying to give the American people a good old-fashioned **snow job**. The truth of the matter is – ACS

statistics notwithstanding – orthodox medicine does not have ‘proven cancer cures,’ and what it does have is pitifully inadequate considering the prestige it enjoys, the money it collects, and the snobbish scorn it heaps upon those who do not wish to subscribe to its treatments.”

Yes, the Cancer Industry uses snobbery, bigotry, intimidation, and manipulation to keep cancer patients completely ignorant of the truth concerning the “Big 3” toxic treatments and the non-toxic alternative cancer treatments. As the old saying goes, **“He who defines the terms wins the argument.”** Here is how the Cancer Industry has been manipulating the data and re-defining the terms (i.e. lying to us) about the effects of the “Big 3”:

- The Cancer Industry has defined the term “cure” to apply to a cancer patient who lives over five years from the date of diagnosis. It does not mean “healed” nor does it mean “free of cancer.” Due to improvements in cancer diagnosis, we are now able to see a tumor months if not years earlier than we could previously with sophisticated blood tests and imaging equipment. As a result, patients are now living longer from the point of diagnosis, since diagnosis happens earlier. However, if a patient develops the same cancer again after the period is up, or if they are disfigured by the disease or treatment, or if they drop dead two days after the period is up, they are still deemed to be “cured.”
- The Cancer Industry typically omits certain groups of people from their statistics and includes certain groups based upon what will make their statistics look more favorable for the “Big 3.” That’s right. They choose the sample. For example, lung cancer patients are typically excluded from their statistics, despite the fact that lung cancer is the leading cause of cancer death. And certain cancers like non-melanoma skin cancers are **always** included in their samples, since 99% of non-melanoma skin cancer patients live over five years, so they increase the “cure” percentage. Fishy, huh?
- The Cancer Industry typically will remove a patient who dies during a “Big 3” treatment protocol from the population of the sample. What does this mean? It means that if there are ten patients on a chemotherapy protocol which is to last sixty days, and nine of them die before the sixtieth day while only one

patient makes it to the end of the treatment, then the nine are removed and the treatment is said to have a 100% cure rate!

- Another trick the Cancer Industry uses in their statistics is to ignore counting people who die from the effects of the “Big 3.” In other words, let’s say you have chosen chemotherapy, and as a result of your newly compromised immune system, you catch pneumonia and die. Well, did you know that your death will likely **not** be counted as a death from cancer?
- Also, the Cancer Industry tells us that if a chemotherapy drug shrinks the size of a tumor, then it must be considered effective. But what does effective mean? Does it mean that the patient will live longer? **No**. It has been well documented that shrinkage of a tumor has little to do with a longer survival rate.

TUMOR TIZZY

The Cancer Industry is in a “tumor tizzy.” Most oncologists are so obsessed with shrinking the size of a tumor that they miss the mark completely. You see, chemotherapy does shrink tumors; that is true. However, despite the fact that oncologists are successfully able to shrink tumors, oftentimes the cancer patient still dies.

But why? **The reason is the tumor size has nothing do to with curing cancer.** A tumor is like the “check engine” light in your car. It appears only **after** a problem has developed, but the light itself is not the problem. Do you smash the light, or do you attempt to fix the underlying problem? A tumor is just a signal that something has gone terribly wrong in the body... it is just the tip of the iceberg.

*“Orthodox medicine, with its focus on the highly profitable tumor, has brainwashed the public into thinking that the tumor is the cancer. I have actually seen orthodox web sites that say that tumors are made exclusively of cancer cells. **All of this is hogwash.** A tumor cannot be made exclusively of cancer cells any more than a house can be made exclusively out of crude oil. Cancer cells **CANNOT** form tissue. There is **NO WAY** a tumor can be made exclusively out of cancer cells. Cancer cells reside in the tissue of the tumor. That is why they do biopsies. Thus, if you kill the cancer cells in the tumor, the tumor is nothing but a harmless piece of tissue!*

*With alternative cancer treatments, little, if any, attention is paid to the size of the tumor. If the tumor gets a little bigger, for many types of cancer that is no big deal. It is the **cancer cells in the tissue of the tumor** that are important, not the tissue itself. But it is not even the cancer cells in the tissue of a tumor that threatens the life of the patient ... it is the **SPREADING** of cancer that kills cancer patients. Nothing in orthodox medicine deals with the spreading of the cancer.”* (Webster Kehr, www.cancertutor.com/Other/ShrinkTumors.html)

*According to Dr. Philip Binzel, “The problem with many (not all) Doctors and Oncologists in today’s society is that they have been trained to be ‘tumor orientated’ ... For example, when a patient is found to have a tumor, the only thing the doctor discusses with that patient is what he intends to do about the tumor...no one ever asks how the patient is doing. In my medical training, I remember well seeing patients who were getting radiation and/or chemotherapy. The tumor would get smaller and smaller, but the patient would be getting sicker and sicker. At autopsy we would hear, ‘Isn’t that marvelous! The tumor is gone!’ Yes, it was, but so was the patient. How many millions of times are we going to have to repeat these scenarios before we realize that we are treating the **wrong thing?**”*

In his book *Alive and Well*, Dr. Binzel states that in primary cancer, with only a few exceptions, the tumor is neither health endangering nor life threatening. What is health endangering and life threatening is the spread of cancer through the rest of the body. **There is nothing in surgery** today that will prevent the spread of cancer. **There is nothing in chemotherapy or radiation** that will prevent the spread of cancer.

How do we know? Just look at the statistics. The survival time of a cancer patient today is no different to what it was half a century ago. The only advancement in the last fifty years has been the improvement on ways to kill tumors via chemo and radiation. What does all this mean? It means that **“we are treating the wrong thing!”** By focusing only on the tumor and not the real cause of the cancer, mainstream cancer treatments have left the “fox in the henhouse”... and he will most certainly strike again!

IS YOUR HOUSE ON FIRE?

Suppose you own a nice, comfortable, \$300,000 house in the country, but near a small city. While you have gone to the store your house catches on fire. As you return home you see that two rooms of your house are in flames and the fire is spreading. You immediately call the fire department. Twenty minutes later three fire trucks show up. The men and women in the first fire truck pull out heavy suits and axes and run to the house and start cutting down parts of the house that have already burned. They furiously cut and cut and when they have cut out about 10% of the parts of the house that have already burned, they quit and go back to their fire truck.

You note that they did absolutely nothing to stop the spreading of the fire. What they cut out wasn't even burning and it certainly had nothing to do with stopping the raging fire. You watch the men and women in the second fire truck pull out a fire hose and started spraying a powder on the fire. The amount of powder they were spraying did not seem to you to be enough to put out the fire. But you notice that while the powder is slowing down the spreading of the fire, it is also severely damaging the parts of the house that are not on fire.

Puzzled, you ask the fireman what the powder is. They say it is a very toxic acid that is capable of putting the fire out, but they can't spray very much of it on the fire because if they did, the entire house would be reduced to a pile of rubble by the acid. Thus, all they can do is slow down the spreading of the fire, but they can't stop the spreading of the fire. Even more puzzled, you ask them why they did not bring water in their fire truck. They said that using water on a house fire is an old "wives tale" and water is not effective. They state the government regulatory agency, the Fire Development Administration (FDA) has researched water and has declared that water is an "unproven" method to put out house fires.

You silently mumble to yourself that there must be a huge underground connection between the FDA and the chemical

companies. While you have been talking to the men and women in the second truck, five men have jumped out of the third fire truck. They ask you where the couch is in the living room. You point in the general direction of the couch in the living room, which you assume by now is on fire. Each of them immediately pulls out a 30-06 caliber rifle and starts shooting at the couch from where they are standing next to their fire truck. You scream at them and ask them what they are doing. They respond that they have been taught that couches are very bad to have in a house during a fire, so they are trying to shoot the couch to pieces. They comment: “*We think we are doing some good.*” You say that even if the couch is helping spread the fire, that they are blowing holes in the front and back of the house trying to shoot the couch to pieces from outside the house.

While the spreading of the house fire did slow down because of the toxic acids, within two hours you no longer have a house. The fire men and women were quite proud that they slowed down the fire. They tell you that your house lasted an extra hour because of their work. They give each other “high fives,” get in their fire trucks, and head back to the fire station. Between the fire, the acid and the bullets, your house has been reduced to rubble. The cutting out of the wood that had already burned, by the first fire truck, had absolutely no affect on stopping the fire. In fact, nothing any of them did stopped the spreading of the fire, it only slowed it down. ***You are astonished at what you have seen.***

You ponder why the “investigative journalists” have not jumped on this situation. Then you realize how much the chemical companies advertise on T.V. and you realize why the “investigative journalists” have kept their mouths shut. A week later, as you drive by the fire department, you notice that all of the cars in the parking lot are very expensive cars. A month later you know why they are driving very expensive cars. They have sent you a bill for their services: \$100,000. But they note in the bill that the house insurance company will pay most of the bill. You are puzzled when you look at your house insurance policy and realize the insurance company will not pay the bill if the fire department uses water.

“Is Your House on Fire?” was written by Webster Kehr and it brilliantly illustrates the sheer inadequacy of the “Big 3.” Mr. Kehr

hits the nail on the head when he allegorizes the ineffectiveness of the “Big 3” as well as the utter greed which controls the Cancer Industry. Of course, the first fire truck represents surgery to cut out cancerous tumors, the second fire truck represents chemotherapy, and the third fire truck represents radiation. **Slash, Poison, and Burn.**

So to sum it up, despite the fact that the “Big 3” conventional cancer treatments are toxic, immunosuppressive, and carcinogenic, oncologists continue to prescribe this treatment protocol. But why? Follow the money trail...follow the money. The “Big 3” toxic treatments are the foundation of a multi-**BILLION** dollar business. Sadly, if you have cancer and choose these treatments, the odds indicate that you are going to die from complications of your treatment before you have time to die from your cancer. Ironically, in a demented kind of way, I guess you could say that the “Big 3” cancer treatments **do** prevent many cancer patients from dying from cancer ... **they die from the “treatments” instead.**

THE KATIE WERNECKE STORY

Katie Wernecke was diagnosed with Hodgkin’s lymphoma (*cancer of the lymph nodes*) in January 2005 when she was only twelve years old. Her parents took her to the emergency room with what they believed was pneumonia, but it turned out to be much worse. Doctors persuaded them that Katie needed chemotherapy, and they acquiesced. However, doctors recommended radiation as well, but the Wernecke’s refused. Katie is quoted as saying, “*I don’t need radiation treatment. And nobody asked me what I wanted. It’s my body.*”

In an effort to force the Werneckes to submit Katie to conventional cancer treatments, the modern-day “governmental Gestapo” (*Child Protective Services*) took Katie away from her parents in 2005, after receiving a tip that Katie and her mother were hiding out at a family ranch in order to avoid the radiation that doctors claimed she needed to survive. Authorities promptly took Katie into custody and arrested her mother on charges of interfering with child custody. That’s right, the Texas government **kidnapped** a child from her

family in order to **poison** her, then they arrested her mother for attempting to keep her child from being poisoned.

Her mother had to pay \$50,000 bail to get out of jail. Imagine that...\$50,000 for protecting your own child! This is ludicrous! I have heard of murderers who were out on less than \$50,000 bail! In addition to kidnapping her daughter, CPS placed her three sons in a foster home. Attorneys for the Texas Department of Family and Protective Services have stated in court that the Werneckes are “medically neglectful” for refusing radiation. Apparently, these attorneys are blissfully unaware of the irony of that statement.

In late 2005, a Texas judge ruled that the Werneckes would be “allowed” to take Katie out of state to consult with alternative cancer doctors, but not before she underwent five more days of chemo-**poison**. Eventually, Katie was released and reunited with her family. Fortunately, the chemotherapy did not kill Katie and she survived despite this horrible cancer treatment. This story is a prime example of how the Cancer Industry is out of control. It seems that we now live in a frightening world where medical “professionals” are able to enlist the help of government agencies in order to **force** people into toxic medical “treatments.” This is nothing less than government sponsored terror!

If you think that we live in a “free” society, think again. Right now, under the direct supervision of ill-advised cancer specialists, a judge can order CPS to kidnap your **own** kids from your **own** home, haul them into hospitals, and drip chemical toxins into their veins! Against your will and against the will of your children! How can this possibly be called a system of “health care?” I thought that this was the land of the free. Apparently **not!**

Mike Adams, the Health Ranger, states *“this is not a system of health care at all, folks. It’s a system of control. How do you control a population? Drug them, from cradle to grave. Keep ‘em in a mental haze. Bewilder them with television images. Bankrupt them with medical bills. And if they don’t comply, arrest them at gunpoint and terrorize their family to set an example. I call it state-sponsored*

medical terrorism. In this case, the state is Texas. Personally, I think that in a just society, **the Texas CPS personnel would be arrested and charged with kidnapping, and the oncologists who took part in this cancer conspiracy would be tried in an international court for crimes against humanity.** Is it not a crime to inject a child with deadly chemicals against her will and against her parents' will? If I loaded a syringe with the exact same chemicals used on this girl, and injected them into your arm without your permission, I would be (rightly) charged with attempted murder.” www.naturalnews.com/016387.html

COUNTERTHINK



ART - DAN BERGER



CONCEPT - MIKE ADAMS



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www.NewsTarget.com

Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

PART 2

BIOLOGY BASICS

CANCER FACTS

NON-TOXIC
TREATMENTS

&

CLEANSING



STEP OUTSIDE THE BOX

CHAPTER 5

BIOLOGY 101 & CANCER

"CANCER DOES NOT CAUSE CELLS TO TURN ANAEROBIC, BUT RATHER IT IS STABILIZED ANAEROBIC RESPIRATION THAT IS THE SINGLE CAUSE (*OR ESSENTIAL REQUIREMENT*) THAT TURNS THE NORMAL CELLS THAT DEPEND ON AEROBIC RESPIRATION INTO CANCER CELLS."
-DR. DAVID GREGG

CELL BIOLOGY

*B*efore we get into the causes of cancer, it is important that we obtain a grasp of the basics of biology as well as define the terms which will be used throughout the remainder of this book. So, let's get started, shall we?

God has made our bodies in a miraculous way. Our heart pumps blood through our veins, arteries, and capillaries to every cell in our body. Imagine that your body is a country and the cells are its citizens. In order for the country to be strong, its citizens must have various jobs, proper tools to perform those jobs, proper nutrition to stay healthy, a transportation system, a communication system, a waste disposal system, a safe place to rest, and protection from toxins who wish to do them harm. Our goal is to provide our cells with all of these requirements.

Just like people, our cells come in all shapes and sizes, and they all have different abilities and jobs. But they are all essential to the health of your body. The "trash collector" cells are just as important as the "food server" cells and the "communication" cells. All of our

cells are highly structured. At the center of a cell is its nucleus, which is basically the equivalent of a “*brain*.” The nucleus is covered by a plasma membrane. Interestingly, other than red blood cells, all of the cells in our bodies have a nucleus.

Extending from the nucleus to the cell membrane (*the “skin” of the cell*) are cell fibers, which are basically the cell’s scaffolding. These cell fibers also serve as the “*muscles*” of the cells, allowing the cell to contract and expand into different shapes. This ability to change shapes is called pleomorphism. In these cell fibers are embedded organelles, which are like “*little organs*,” since each of them has a specific function. As I mentioned, the cell “*skin*” is called a membrane which is made of protein molecules. Some of these proteins act like a “*name tag*” to identify the type of cell, while other proteins act as a “*door*” to the cell.

Healthy cells are aerobic, meaning that they function properly in the presence of sufficient oxygen. Healthy cells metabolize (*burn*) oxygen and glucose (*blood sugar*) to produce adenosine triphosphate (ATP), which is the energy “*currency*” of the cells. This process is referred to as aerobic respiration (*or aerobic metabolism*). This cycle of creating energy, called the Krebs cycle, takes place in the mitochondria, which are organelles composed of an outer membrane and an inner membrane. The enzymes used to produce energy lie on top of the inner membrane.

ATP is composed of three phosphates. The breaking of the bond between the second and third phosphates releases the energy to power virtually all cellular processes. Amazingly, we all generate enough metabolic energy to produce our own body weight in ATP every day just to function! Every second, each of our approximately sixty trillion cells consumes and regenerates twelve million molecules of ATP.

ATP production is the essential core function of every human cell. Without it, basic activities such as cellular repair, and protein, enzyme, hormone, and neurotransmitter synthesis would not occur. DNA repair and cell reproduction would cease. Many factors such as aging, poor diet, improper nutrition, and external toxins can impede

this critical energy generation. Negatively charged electrons from hydrogen are the source of the energy needed to generate this staggering amount of ATP.

Once the ATP is produced, it is stored in the Golgi bodies of the mitochondria until it is needed by the cells for their activities. The byproduct of this energy making process is carbon dioxide. Carbon dioxide, in turn, is responsible for releasing oxygen from hemoglobin (*red blood cells*). The oxygen then is burned to produce more ATP with more carbon dioxide byproduct, which is then used to extract the oxygen from hemoglobin. It's a miraculous state of continual perpetuity.

When foreign “*invaders*” enter the body, our immune system comes to the rescue. The immune system is a collection of cells, chemical messengers, and proteins that work together to protect the body from potentially harmful, infectious microbes such as bacteria, viruses, and fungi, thus the immune system plays a role in the control of cancer and other diseases. The immune systems' leukocytes (*white blood cells*) are our first line of defense. There are 2 main subgroups of leukocytes. The first subgroup is called polymorphonuclear leukocytes (*also called granulocytes*). These leukocytes are filled with granules of toxic chemicals that enable them to digest microbes by a process called phagocytosis (*literally “cell-eating”*). Three types of granulocytes are neutrophils, eosinophils, and basophils.

The second subgroup of leukocytes is called mononuclear leukocytes which includes both monocytes and lymphocytes. Monocytes ingest dead or damaged cells (*through phagocytosis*) and provide immunological defenses against many infectious organisms. Monocytes migrate into tissues and develop into macrophages. Macrophages contain granules or packets of chemicals and enzymes which serve the purpose of ingesting and destroying microbes, antigens, and other foreign substances.

Lymphocytes are mononuclear leukocytes which identify foreign substances and germs (*bacteria or viruses*) in the body and produce antibodies and cells that specifically target them. It takes from

several days to weeks for lymphocytes to recognize and attack a new foreign substance. The main lymphocyte sub-types are B-Cells, T-Cells, and NK (*Natural Killer*) Cells.

AEROBIC VS. ANAEROBIC RESPIRATION

The cycle of creating energy is called the Krebs cycle and takes place in the mitochondria. Cells typically create energy via a process known as aerobic (*i.e.* “with oxygen”) respiration. However, if something happens which either inhibits the blood’s ability to transport oxygen, lowers the amount of oxygen in the blood, decreases our carbon dioxide, prohibits the cells from absorbing the oxygen in the blood, or damages the mitochondria’s ability to produce ATP, then the Krebs cycle has been disrupted, the cells have no energy, and we have a serious problem.

Since there is not enough oxygen for the cell to breathe, it changes to anaerobic (*i.e.* “without oxygen”) respiration to survive. According to Dr. David Gregg, “Cancer does not cause cells to turn anaerobic, but rather it is stabilized anaerobic respiration that is the single cause (or essential requirement) that turns the normal cells that depend on aerobic respiration into cancer cells.” www.krystalis.net

The cell stops breathing oxygen and starts fermenting glucose (*sugar*) to make energy. The waste byproduct of the fermentation process is a sea of lactic acid, which further inhibits the cell from receiving oxygen. Calcium and oxygen are used up trying to buffer this acid. This is what enables a cancer cell to stabilize. Fortunately, ozone oxidizes lactic acid.

Anaerobic respiration is extremely inefficient and a severe drain on the body, since anaerobic cells must work much harder than aerobic cells to produce ATP from the glucose they metabolize. As a matter of fact, aerobic respiration creates as many as thirty-six ATP molecules from each glucose molecule, while **anaerobic** respiration creates only two ATP molecules. Thus, anaerobic respiration releases only 1/18 of the available energy. So, when we do the math, we calculate that in order for a cancer cell to obtain the same energy as a normal cell it must metabolize at least eighteen times

more glucose. Now do you see why we hear the phrase “cancer loves sugar”?

To be honest, the cancer cell has no possibility of *actually* utilizing 18 times more sugar to come up to the energy level of a good cell. Therefore, the cancer cell is chronically weak. This weakness prevents it from making the protective antioxidant enzymes superoxide dismutase, glutathione peroxidase, catalase, and reductase, thus leaving the cell wide open to oxidative attack by ozone.

As I’ve already mentioned, healthy cells metabolize oxygen and glucose to produce ATP while releasing carbon dioxide. Carbon dioxide, in turn, is responsible for releasing oxygen from hemoglobin, which are the red blood cells that transport oxygen from the lungs to cells. However, cancer cells cannot extract the oxygen from hemoglobin since their anaerobic respiration does not produce carbon dioxide which is required to get the oxygen out of the hemoglobin.

Now, different cells have different life spans. God created our neurons (*nerve cells*) to last our entire life, but He made our leukocytes to last only a couple of days. When cells are damaged, they can die prematurely; these dead cells are constantly being replaced to insure proper tissue function. This sort of cell replacement occurs constantly through a process known as mitosis, which is basically cell division where one cell divides into two smaller “*daughter*” cells. The new cells are structurally and functionally *similar* to each other. I say *similar* because the two daughter cells receive about half rather than exactly half of their parent cell’s organelles. Much more important, however, is that each daughter cell inherits an *exact* replica of the DNA (*heredity information*) of the parent cell.

However, even though there is always a considerable amount of mitosis occurring, there is no real change in the total number of cells in our bodies. How does this happen? Well, in accounting lingo, your body has to “*balance its books.*” Simply put, in order for the body to stay balanced, for every new cell that is generated via mitosis,

another cell must die. Programmed cell death is a process referred to as apoptosis. Amazingly, every year the average human loses half of his/her body weight in cells via apoptosis!

Deregulation of apoptosis is associated with several diseases and syndromes, including cancer and AIDS. In the case of cancer, inhibition of the normal process of apoptosis can lead to the development of tumors, since cells that would normally have died live indefinitely. Contrary to popular belief, cancer does *not* result from a problem with the p53 gene (*which regulates apoptosis*). The centers of solid cancer tumors are dead cells – no shortage of apoptosis in these tumors. It is the edges of growing tumors that are alive, where they can get a good supply of sugar, and not drown in their own lactic acid.

A cancer cell is described as being undifferentiated. What this means is that a cancer cell has no useful function. As a result, a cancer cell cannot become part of the tumor tissue itself, since tumor tissue must be composed entirely of healthy cells. The cancer cells just sit inside the tumor tissue, doing nothing except multiplying and refusing to die. However, what kills cancer patients is the **spreading of their cancer cells**. This is exactly why biopsies are so dangerous! Cutting the tissue can release the cancer cells into the bloodstream, thus enabling them to travel throughout the body! When the cancer spreads throughout the body, eventually there are enough cancer cells to kill a person.

Of course, cancer cells spread even without biopsy. There is a colonizing effort made with the spreading of “*daughter*” cells from the “*mother*” tumor. The daughter cells are mostly held in check by statins released by the mother, until the mother tumor is removed by surgery, or destroyed by radiation, whereupon the daughter cells have nothing to suppress them, and therefore start to grow.

Tumors have been shown to become self sustaining by creating their own blood supply. Angiogenesis is the process by which new blood vessels are formed and is a normal, essential process for biological development. However, angiogenesis is also required for cancerous tumors to grow. The primary initiating event for angiogenesis is a **lack of oxygen** (hypoxia). The growth of blood

vessels is an external event, so that more sugar can be brought into the edges of the tumor, where the cells are alive. Many things can be done to inhibit angiogenesis, including taking large amounts of pancreatic enzymes.

“Cells deprived of oxygen emit angiogenic signals.” (The Townsend Letter, June, 2002, pg. 97). According to Dr. David Gregg, “the complex process of new blood vessel formation follows from there. In a way this makes sense in that one would expect a normal cell to respond in such a manner, not just tumor cells. In fact, that might be happening. Normal cells in the oxygen deficient environment of the anaerobic tumor cells may be creating the new blood vessels, not the cancer cells.”

Dr. Gregg continues, *“I have always wondered why all cancers are anaerobic in metabolism. It is almost like it is a requirement. I think I now understand the answer. It is well known that in order for tumors to grow they must form new blood vessels to supply the increased tumor size. If they can’t do this they can’t grow. This is a fundamental requirement for all cancers. If the angiogenesis theory...is correct, they have to create an oxygen deficient environment to stimulate the growth of new blood vessels. The anaerobic metabolism accomplishes this. Thus, anaerobic metabolism is not just a secondary consequence of cancer, it is a requirement for cancer to grow. Cells that are not anaerobic have no means of stimulating the formation of new blood vessels and thus cannot support tumor growth. Lacking this ability they would eventually die off.”* www.krysalis.net/cancer4.htm

One scientist who contributed much to cancer research was P.G. Seeger, who published almost three hundred scientific works and was twice nominated for the Nobel Prize. In the 1930s, he showed that cancer starts in the cytoplasm of the cell, not in the nucleus. The cytoplasm is the gel-like fluid inside the cell, and it provides a platform upon which other organelles can operate within the cell. All of the functions for cell expansion, growth, and replication are carried out in the cytoplasm of a cell. The cytoplasm contains the mitochondria, which are sometimes described as “cellular power plants,” because they produce ATP through a series of steps which he called the “respiratory chain.”

Seeger showed that in cancer cells, the respiratory chain was blocked by the destruction of important enzymes, thus the cell can only produce energy anaerobically by converting glucose into lactic acid. In 1957, Seeger successfully changed normal cells into cancer cells within a few days by introducing chemicals that blocked the respiratory chain. Perhaps his most important discovery: certain nutrients have the ability to restore cellular respiration in cancer cells, thus transforming them back into normal cells. In other words, Seeger believed that cancer is *reversible*. One of these nutrients is the B vitamin inositol, which has been used by University of Maryland Professor of Pathology, Dr. AbulKalam M. Shamsuddin, PhD to successfully revert cancer cells into normal aerobic cells.

German born Dr. Otto Warburg, a cancer biochemist and the 1931 Nobel laureate in medicine, first discovered that cancer cells have a fundamentally different energy respiration than healthy cells. He discovered that cancer cells are anaerobic, thus whatever causes this anaerobic respiration to occur is the cause of all cancers. He believed that cancer occurs whenever any cell is denied 60% of its oxygen requirements, and showed that cancer cells exhibit anaerobic respiration. His thesis was that cancer is a fermentative disease caused by cells which have mutated from aerobic respiration to anaerobic respiration, resulting in glucose fermentation and uncontrolled cellular growth. He theorized that tumors are nothing more than walled-off toxic waste dumps inside the body sustained by fermenting sugar. *According to Warburg, most, if not all degenerative diseases, are a result of lack of oxygen at the cellular level.*

Some researchers claimed that Warburg's theory was not valid after they had measured a particularly slow growing cancer, and found no fermentation at all. Dean Burn and Mark Woods, two researchers at the National Cancer Institute, checked those results. Using more sophisticated equipment, they determined that the equipment these researchers used to measure fermentation levels was not accurate enough to detect fermentation at low levels. Using newer and more accurate equipment, Burn and Woods showed that even in those very slow growing cancer cells, fermentation was still taking place, albeit at very low levels.

THE PH BALANCE

“Indeed, the entire metabolic process depends on a balanced pH.”
(Dr. Robert Young, Sick & Tired, page 59).

After years and years of research, I have learned that most successful non-toxic alternative cancer treatments have two common denominators:

1. maintaining the acid/alkaline balance of our body
2. increasing the amount of oxygen at the cellular level

So let's take a quick look at these two concepts. Back in high school chemistry, we learned about our acid/alkaline balance, also referred to as the body's **pH** (“potential Hydrogen” or “powers of Hydrogen”). Our pH is measured on a scale from 0 to 14, with around 7.35 being neutral (*normal*). The pH numbers below 7.35 are acidic (*with 0 being the most acidic*) and the numbers above 7.35 are alkaline (*with 14 being the most alkaline*).

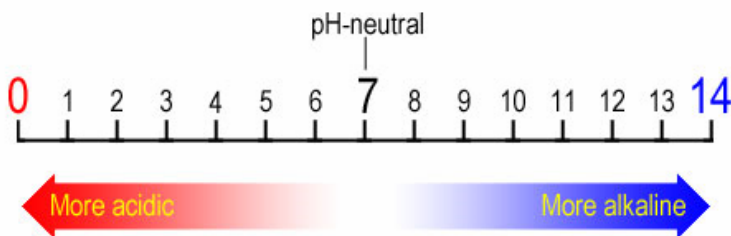
Hydrogen is both a proton and an electron. If the electron is stripped off, then the resulting positive ion is a proton. Without going into all the details about **protons** (“+” charge) and **electrons** (“-” charge), it's important to note that alkaline substances (*also called “bases”*) are proton “acceptors” while acids are proton “donors.” What does that mean to someone who isn't a doctor? Let me simplify it for you. Since bases have a higher pH, they have a greater potential to absorb hydrogen ions. And vice versa for acids.

Why is **hydrogen** so important? Our universe is composed of millions of compounds, all derived from just 106 atoms. Of these elements, hydrogen is the first and most fundamental. Hydrogen is also the most abundant element, comprising **90%** of all atoms in the cosmos. In our sun and stars, hydrogen nuclei fuse to produce helium, the second element. This generates the enormous energy that powers life on earth. And just as hydrogen fuels the sun, so, in the human body, it is the crucial factor in the electrochemical process that produces ATP, as we just discussed.

In chemistry, we know that water (H_2O) decomposes into hydrogen ions (H^+) and hydroxyl ions (OH^-). When a solution contains more hydrogen ions than hydroxyl ions, then it is said to be acid. When it contains more hydroxyl ions than hydrogen ions, then it is said to be alkaline. As you may have guessed, a pH of 7.35 is neutral because it contains equal amounts of hydrogen ions and hydroxyl ions.

Over 70% of our bodies are water. When cells create energy via aerobic respiration, they burn oxygen and glucose. I don't want to get overly scientific here, but the fact is that in order to create energy, the body also requires massive amounts of hydrogen. As a matter of fact, each day your body uses about $\frac{1}{2}$ pound of pure hydrogen. Even our DNA is held together by hydrogen bonds. And since the pH of bases is higher, they have a greater potential to absorb hydrogen, which results in more oxygen delivered to the cells.

The hydrogen ion concentration was found to vary over fourteen powers of 10, thus a change of one pH unit changes the hydrogen ion concentration by a factor of 10. The pH scale is a common logarithmic scale. For those of you who never liked math, what this means is that a substance which has a pH of 5.2 is 10 times more acidic than a substance with a pH of 6.2, while it is 100 (10^2) times more acidic than a substance with a pH of 7.2, and it is 1,000 (10^3) times more acidic than a substance with a pH of 8.2, etc...



Our blood must always maintain a pH of approximately 7.35 so that it can continue to transport oxygen. Thus, God has made our bodies resilient with the ability to self-correct in the event of an imbalanced

pH level through a mechanism called the **buffer system**. In chemistry, a buffer is a substance which neutralizes acids, thus keeping the pH of a solution relatively constant despite the addition of considerable amounts of acids or bases. However, due to our poor diet of junk foods, fast foods, processed foods, and sodas, most of us are putting our bodies through the ringer in order to maintain the proper pH in our blood. Although our bodies typically maintain alkaline reserves which are utilized to buffer acids in these types of situations, it is safe to say that many of us have depleted our reserves.

When our buffering system reaches overload and we are depleted of reserves, the excess acids are dumped into the tissues. As more and more acid is accumulated, our tissues begin to deteriorate. The acid wastes begin to oxidize (“rust”) the veins and arteries and destroy cell walls and even entire organs. According to Dr. Robert Young, *“A chronically over-acidic body pH corrodes body tissue, slowly eating into the 60,000 miles of our veins and arteries like acid eating into marble. If left unchecked, it will interrupt all cellular activities and functions, from the beating of your heart to the neural firing of your brain. Over-acidification interferes with life itself, leading to all sickness and disease.”* (Sick & Tired, page 59)

As we learned earlier, normal cells create energy via aerobic (with oxygen) respiration. Alkaline cells are able to absorb sufficient quantities of oxygen to support aerobic respiration. However, when cells become more acidic, less oxygen is absorbed, and the cells begin to ferment glucose in order to survive. This concept is essential to understand, because cancer cells thrive in an acidic, anaerobic environment and don’t do very well in an aerobic, alkaline environment. Having an acidic pH is like driving your car with the “check engine” light on. It’s a sign that something is wrong with the engine, and if we don’t get it fixed, then eventually the car will break down.

According to Keiichi Morishita in his book, Hidden Truth of Cancer, as blood starts to become acidic, the body deposits acidic substances in cells to get them out of the blood. This allows the blood to remain slightly alkaline. However, it causes the cells to

become acidic and toxic. Over time, he theorizes, many of these cells increase in acidity and some die. However, some of these acidified cells may adapt in that environment. In other words, instead of dying (*as normal cells do in an acid environment*) some cells survive by becoming abnormal cells. These abnormal cells are called malignant cells, and they do not correspond with brain function or with our own DNA memory code. Therefore, malignant cells grow indefinitely and without order. **This is cancer.**

Putting too much acid in your body is like putting poison in your fish tank. Several years ago, we purchased a fish tank and a couple of goldfish for our children. After killing both goldfish, we quickly learned that the key factor in keeping fish alive is the condition of the water. If their water isn't just right, then they quickly die. We also learned that you can kill a fish rather quickly if you feed it the wrong foods! Now, compare this to the condition of our internal "fish tank." Many of us are filling our fish tanks with chemicals, toxins, and the wrong foods which lower our pH balance, and an acidic pH results in oxygen deprivation at the cellular level. As I have already mentioned, **this is the beginning of degenerative disease.**

Since we are beginning to understand what internal conditions make cancer cells thrive (*an acidic pH and low oxygen environment*), then it stands to reason that the opposite conditions (*an alkaline pH and oxygen*) should make cancer cells revert to being inert, or harmless. So, one way to make our pH more alkaline is to stop consuming things that make our bodies more acidic. A soda pop has a pH around 2, thus it is 100,000 (10^5) times more acidic than water with a pH of around 7. People that consume huge amounts of sodas (*as well as coffee and alcohol*) are typically very acidic and are "cancer magnets."

So, what other things can we do to keep our tissue pH in the proper range? The easiest thing is to eat mostly alkaline foods. One of our favorite cookbooks is called Back to the House of Health by Shelly and Robert Young. The general rule of thumb is to eat 20% acid foods and 80% alkaline foods. Fresh fruit juice also supplies your body with a plethora of alkaline substances. You can also take

supplements, such as potassium, cesium, magnesium, calcium, and rubidium, which are all highly alkaline.

Some excellent **alkaline-forming** foods are as follows: most raw vegetables and fruits, figs, lima beans, olive oil, honey, molasses, apple cider vinegar, miso, tempeh, raw milk, raw cheese, stevia, green tea, most herbs, sprouted grains, sprouts, wheatgrass, and barley grass. Foods such as yogurt, kefir, and butter are basically neutral. Several **acid-forming** foods are as follows: sodas, coffee, alcohol, chocolate, tobacco, aspartame, meats, oysters, fish, eggs, chicken, pasteurized milk, processed grains, sugar, peanut butter, beans, and pastas.

SOME STATISTICS

One American dies of cancer every minute! That's over 1,400 people per day – enough to fill four fully loaded jet planes. That's over half a million Americans each year.

In his book, *Don't Waste Your Life*, John Piper quotes Ralph Winter on pages 115-116. *“Satan has, horrifyingly, employed his rebellious freedom in the development of destructive germs and viruses at the microbial level, which today account for 1/3 of all deaths on the planet... (however all of the) funded projects of the federal National Cancer Institute are focused on chemo and radiation treatment, not prevention. It's like getting caught up in 150 Vietnam wars at the same time – as far as battle deaths are concerned. And yet we act as though no war exists! **How can the consciousness of America be aroused to the fact that 1/3 of all women and 1/2 of all men will contract cancer before they die?”***

Have you lost a loved one to cancer? It seems like everyone I know has cancer or has a loved one with cancer. Finding out that you or a loved one has cancer can be absolutely terrifying. When my father died in 1996, it inspired me to get to the bottom of what causes cancer and what treatments actually work to stop this terrible disease.

Consider these facts:

- Each year in the United States, we spray over a billion pounds of pesticides on our crops
- We feed millions of pounds of antibiotics to our farm animals
- We inject our cattle with cycle after cycle of growth hormone
- We eat grains contaminated with mycotoxins (*fungus toxins*)
- We dump billions of tons of toxic waste into our waste sites and rivers
- We unknowingly poison our children with vaccinations
- We drink water that has been poisoned by chlorine and fluoride and other chemicals
- We drink diet sodas contaminated with aspartame
- We have mouths full of mercury fillings and root canals
- We let doctors destroy our bodies with X-rays
- We smoke cigarettes and drink lots of alcohol
- We eat mainly junk food, fast food, and processed food

Is it any wonder we are sick all the time?

WHAT CAUSES CANCER?

God has miraculously made our bodies with trillions of living cells. Each cell is unique, has its own identity, and performs a specific task. In the body, these trillions of cells have to discover how to interact and work together in order to maintain health and vigor.

Cancer cells are *constantly* being created in the body, but God has miraculously created our immune systems with the ability to seek out and destroy these cells. However, tumors begin when more cancerous cells are being created than an overworked, depleted immune system can destroy. Cutting out the tumor does not usually fix the problem. Remember, a tumor is just an uncontrolled growth of cells, and is just a **symptom** of cancer, not the cause.

However, tumors **do** have the ability to migrate to different parts of the body and grow out of control there as well, so I am not saying that tumors are irrelevant. They may compress surrounding structures, and their waste products may be toxic to the rest of the body. This being so, they oftentimes interfere with the function of

organs such as the brain, liver, kidney, and lungs, thus resulting in death.

Overcoming cancer is a process of reversing the conditions that allowed the cancer to develop. It is critical to note that cancer is a systemic imbalance. In other words, it is a problem with the entire system of the interrelated parts of the body. This being so, appropriate treatment must be for the total environment of the body.

There are many different theories on what actually causes cancer. Here are four of them:

1. **The External Toxin Theory** – this theory holds that the proliferation of cancer cells is caused by external toxins, such as chemicals and other materials created largely from industry and carelessness. These chemicals have saturated our water, food, and the very air we breathe. You can't see, feel, or smell many toxins – at least, not right away. We don't realize their affects until we come down with a chronic disease (*like cancer*) after years of exposure. Over four billion pounds of toxic chemicals are released by industry into the nation's environment each year, including 72 million pounds of recognized carcinogens. The link between external toxins and cancer cells is irrefutable.
2. **The Microbe Theory** – this theory holds that cancer is caused by pleomorphic ("*shape changing*") microbes, such as fungus, yeast, bacteria, and parasites. It is irrefutable that fungus, mold, yeast, bacteria, parasites, and viruses are related to cancer. It is well known and well documented that some fungal infections were actually misdiagnosed as leukemia. Many researchers over the last century have observed "pleomorphism" with the aid of dark field microscopes. Pleomorphism is based on the belief that fungus, mold, yeast, and bacteria are all merely different stages in the life cycle of microbes.
3. **The Hypoxia Theory** – this theory, based largely upon the research of Dr. Otto Warburg, holds that cancer is caused by a poor diet and lifestyle which results in toxic buildup, thus overloading the body's self-cleansing mechanism. Cancer is believed to be a manifestation of long-term nutritional and

environmental irritation as well as a deficiency in the immune system, resulting in cellular oxygen starvation (*hypoxia*), leading to uncontrolled cell replication. Since oxygen is our main life force, it is understandable to think that a lack of it would cause damage to our bodies and organs. This fact is, of course, true.

4. **The Internal Rebel Theory** – this is the predominant theory of Big Medicine. This theory holds that the wild overgrowth of cancer cells is a kind of genetic rebellion within the body, where one’s own cells rebel and destroy the body which produced them. Logically, if this theory is correct, then it only makes sense to do whatever it takes to squelch the rebel. This is why doctors try to cut and burn the cancer out of the body, or poison the cancer with toxic medicines, or send radiation throughout the body to kill these internal rebels. With orthodox medicine, these are the standard treatment protocols: **slash, poison, and burn**. These are the only approved treatments inside the “*orthodox cancer box*.” Doctors are placed in the box during medical school and are required to stay in this box once they begin to practice medicine. Those who dare to think “*outside the box*” are condemned by Big Medicine, and their therapies are blacklisted (*without evidence, proof, investigation, or substantiation*) as unproven and dangerous therapies. Unfortunately, this type of approach kills both cancerous and healthy cells. As a result, many cancer patients die from the treatments rather than from the actual disease.

My research over the past decade has resulted in a synthesis of my theory on what causes cancer, and also what we can do to stop cancer. Summarized in a few words, the prime cause of cancer is the replacement of the respiration of oxygen in normal body cells by a fermentation of sugar. In other words, **hypoxia** (*lack of oxygen*) at the tissue level is the **prime** cause of cancer. Of course, external toxins are definitely associated with cancer, as are microbes. However, I used to believe that cancer was **caused** by microbes or fungi, but I now believe that microbes and fungus follow as the “*cleanup crew*.” In other words, they are the resultants of hypoxia.

According to Dr. Saul Pressman, “... *the cause of cancer is clear: poor diet, lifestyle and poor mental attitude result in toxic buildup which*

overloads the self-cleansing mechanism. Cancer is manifestation of long term nutritional and environmental irritation, resulting in cellular oxygen starvation, leading to uncontrolled cell replication.” Under normal conditions, the cells of the human body function by burning sugar in oxygen to provide energy. The waste products are carbon dioxide and water. However, if there is insufficient oxygen at the cellular level, the burn will be incomplete, and anaerobic respiration will begin, forming carbon monoxide and lactic acid, which lower the intracellular pH of the cell. The body cannot easily rid itself of carbon monoxide since it prevents the hemoglobin from picking up fresh oxygen at the lungs, and the body temperature is lowered. The lactic acid can build up in the system, clogging nerve signal pathways, eventually crystallizing and causing degeneration.

Once anaerobic respiration has begun, it perpetuates and reinforces itself, due to the fact that the process doesn't produce carbon dioxide, which is responsible for extracting oxygen out of hemoglobin. Without oxygen, there is no carbon dioxide...thus there is no oxygen...thus there is no carbon dioxide...and the cycle continues. In this state of hypoxia, the oxygen-starved cancer cell rapidly duplicates and grows out of control.

Many researchers believe that cell replication occurs as a result of damage to the p53 gene. This may be one of the reasons that cancer cells replicate, but it's definitely not the only reason. According to Dr. Stephen Ayre, *“...cancer cells get their energy by secreting their own insulin, and they stimulate themselves to grow by secreting their own insulin-like growth factor (IGF). These are their mechanisms of malignancy.”* Recent research by Dr. Gregg L. Semenza at Johns Hopkins University in Baltimore has shown that the reason why the cells replicate is not necessarily because there is damage to the p53 gene, but rather because the exposure of cancer cells to IGF causes them to self-stimulate and also induces the expression of hypoxia-inducible factor 1 (HIF-1) transcription factor, which controls oxygen delivery (*via angiogenesis*) and also metabolic adaptation to hypoxia (*via fermentation*).

Some causes of hypoxia include a buildup of toxins within and around cells, which blocks and then damages the cellular oxygen

respiration mechanism. Clumping up of red blood cells slows down the bloodstream and restricts flow into capillaries, which also causes hypoxia. Even lack of the proper building blocks for cell walls, essential fatty acids, restricts oxygen exchange and leads to hypoxia.

There is so much professional evidence about the fast growth of tumors when the condition of hypoxia is present that a large group of Californian researchers wrote a paper *Hypoxia - inducible factor-1 is a positive factor in solid tumor growth* (EMBO Journal, 1998, p. 3005-3015). UK Researchers from the Gray Laboratory Cancer Research Trust concluded, “...cells undergo a variety of biological responses when placed in hypoxic conditions, including activation of signalling pathways that regulate proliferation, angiogenesis and death. Cancer cells have adapted these pathways, allowing tumours to survive and even grow under hypoxic conditions...” (International Journal of Radiation, Oncology, Biology, Physics, August 1986, p. 1279-1282).

When the solid tumor is large enough and the disease progresses, cancer starts to invade other tissues. This process is called metastasis. Does poor oxygenation influence it? According to M. Kunz and S.M. Ibrahim, “...tissue hypoxia has been regarded as a central factor for tumor aggressiveness and metastasis.” (Molecular Cancer 2003, p. 23-31).

I also believe that cancer is reversible. That’s right. **Reversible.** According to Dr. David Gregg, “The proposed cure, as an alternative to protocols that focus on killing the cancer cells, is to restart aerobic respiration which allows the cells to revert back to being quasi-normal cells again. Genetic damage is not corrected, but if the cells are held in a normal state of aerobic respiration, with time they will go through the normal process of programmed cell death and the cancer cells are permanently eliminated.” www.krysalis.net

WHY SOME GET CANCER AND NOT OTHERS

Let me ask you this question: **why don’t we have a forest fire each time that someone throws a burning cigarette out a car window?**

There are many reasons why a burning cigarette may not start a forest fire.

1. Perhaps the cigarette falls on the pavement rather than directly onto the grass
2. Perhaps there was a recent rain and the grass is wet, thus it will not ignite
3. Perhaps the grass is dry, but the cigarette is snuffed before it can start a fire
4. Perhaps it starts a fire but the grass is surrounded by water and cannot spread into the forest
5. Or perhaps a fire begins, but then the wind blows so hard that it blows the fire out

In the burning cigarette example above (*used with permission from Tanya Harter Pierce in her book Outsmart Your Cancer*), the cigarette represents one of the many potential causes of cancer, like toxins, while the forest fire represents cancer. The pavement and the wet grass and the wind all represent the internal control mechanisms that prevent cancer, such as a healthy immune system, a balanced pH, and oxygenated cells.

Given the same exposure to the same toxins over the same period of time, someone with a healthy immune system may have no adverse effects while someone with a compromised immune system may develop hypoxia and eventually cancer. **Do you follow my drift?** We see the evidence of this truth constantly around us. One person in an office gets a very bad cold. The one sitting next to him doesn't get a sniffle. Certainly both were exposed to the same microorganisms. But what is the difference? One of them has a healthy immune system while the other does not.

Perhaps some people are better able to resist cellular mutations and damage by outside toxins and carcinogens. Perhaps their acid buffering systems are better suited to maintaining homeostasis within the body's pH system. So, despite years of exposure to external toxins, chemicals, tobacco, and eating a poor diet, they will not develop cancer, while others exposed to the same toxins will develop cancer.

Human cancer is **primarily** attributable to chemical pollutants, horrible eating habits, and unhealthy lifestyles, not genetics, according to recent research by Paul Lichtenstein of the Karolinska Institute of Stockholm, Sweden, who led a giant study of 89,576 twins and reported results in the 2000 *New England Journal of Medicine (NEJM)*. The researchers found even an identical twin has about a 90% chance of not getting the same cancer as his or her cancer-afflicted twin.

So, no matter what your genetic predisposition, there are a multitude of steps you can take to minimize your cancer risk if you don't have cancer, and there are scores of successful treatment protocols you can use if you do have cancer. Or, you can choose to bury your head in the sand, allow your irrational trust in Big Medicine to blind you from the truth, and think happy thoughts (*like many of our friends have done*).

HISTORY 101

In order to better understand the scientific basis behind my cancer theory, let's travel back in time to the 1850s and learn about the scientific "duel" of two Frenchmen – Louis Pasteur and Antoine Beauchamp. Both men had bacteriological theories of disease, but they disagreed about the origin and character of the bacteria. Little did they know that the winner of their duel would influence the course of medicine forever.

Pasteur promoted what is referred to as the "germ theory" of disease. He hypothesized that disease arises from microbes outside the body (*germs*). He believed that each microbe has a constant shape and color (i.e. *monomorphic* – "having one form"). He also believed that each disease and illness was caused by a unique microbe which entered the body, and that disease can only be caused by microbes or bacteria that invade the body from the outside. Therefore, the only way to cure diseases is to kill the invader.

Beauchamp promoted what is referred to as the "cellular theory" of disease. He hypothesized that disease arises from microbes within

the cells of the body. He hypothesized that microbes can go through diverse stages of growth and they can mutate into various growth forms within their life cycle. In other words, he believed that the microbes were pleomorphic (“*many forms*”). His theory was that when the host organism (i.e. *person*) became unbalanced and unable to maintain homeostasis, then these microbes would mutate and become pathogenic. In other words, it is the condition of the host organism is the primary cause of disease. Beauchamp called these organisms “*microzymas*,” meaning “*small ferments*.” Beauchamp believed that the bacteria, microbes, viruses, and fungi that were being blamed as the **cause** of disease, were actually part of God’s “*clean-up crew*,” breaking down sick tissue and ultimately decomposing a no-longer-occupied body.

Claude Bernard, another French scientist, entered into the debate with the theory that it was actually the environment that is the determining factor in disease. He agreed with Beauchamp in his belief that microbes do mutate, but Bernard asserted that these mutations are all a result of the environment to which they are exposed. Therefore, Bernard’s theory was that disease in the body is dependent upon the state of the internal biological terrain.

Pasteur went to great lengths to disprove Beauchamp and Bernard’s theory. Due largely to his wealth and political connections, he was able to convince the scientific community that his theory was correct, despite the fact that he had never been educated in science! However, on his deathbed, Pasteur admitted that his germ theory had flaws and that Bernard was correct. He said “*Bernard was correct ...the terrain is everything*.” I think his pride prohibited him from admitting that Beauchamp was also correct, as he had been Pasteur’s nemesis for so long. However, it was too little, too late. The mainstream scientists had already embraced his monomorphic germ theory.

In the 150 years since the birth of Pasteur’s germ theory, it has become so widely accepted that it is seldom even discussed in conventional medical circles today. His theory was the genesis of modern allopathic (*conventional*) medicine, which claims that germs

from an external source invade the body and are the first cause of infectious disease.

The germ theory also gave birth to the technique of **vaccination** that was blindly begun in 1796 by Edward Jenner, who took pus from the running sores of sick cows and injected it into the blood of his patients. **Thus, the vile practice of vaccination and immunization was born.** Also resulting from the erroneous germ theory was the development of **antibiotics**, the first of which was penicillin in 1940. Simply stated, an antibiotic is the poisonous waste from one germ used in the attempt to kill another.

Unfortunately, conventional cancer treatments do not address the underlying conditions of cancer, such as our pH balance and hypoxia (*lack of oxygen*) at the cellular level. Rather, conventional cancer treatment protocols focus on treating the **symptoms** of cancer, such as tumors. The reason why all physicians are kept in the dark by medical schools teaching Pasteur's germ theory is that if they are taught the truth that it's the inner condition of the patient (*i.e. oxygen deprivation, nutritional deficiencies, acidic pH, built up toxins in and around the cells, poor circulation, etc.*), not the germs that creates the medium for cancer cell growth, the majority of doctors would throw away their script pad and surgical knife and focus their cancer protocols on reestablishing a healthy cellular environment.



STEP OUTSIDE THE BOX

CHAPTER 6

NON-TOXIC TREATMENTS

"ALL OF MY KNOWLEDGE IS LEARNED BY
STANDING ON THE SHOULDERS OF GENIUSES."

-DR. ALBERT SCHWEITZER

The reason I begin this chapter with this quote is that I want to make it clear that these treatments are not “my” treatments, per se. They have been formulated and tested by medical mavericks and have been shown to be effective at treating cancer. I have merely summarized them for you in order to make all this information readily available and understandable, since it is next to impossible to successfully navigate the millions of websites on cancer, wade through the lies propagated by the Cancer Industry, and get to the truth on alternative cancer treatments.

In the first two editions of this book, there were two separate chapters for the most effective Stage III and Stage IV treatments. However, in this edition, I have chosen to remove these distinctions and devote this entire chapter to the non-toxic alternative cancer treatments which have been shown to be the most effective at treating **advanced cancer** (*i.e. Stages III and IV*). The title of this chapter highlights the chief difference between conventional cancer treatments and alternative cancer treatments. Without exception, conventional treatments are all toxic, while all successful alternative treatments are **non**-toxic.

Back in 2006, the mainstream press seemed downright giddy when Coretta Scott King (widow of Rev. Martin Luther King Jr.) died of cancer after exploring an alternative cancer treatment clinic in Mexico. What the press didn't report is that conventional medicine had already given up on her and left her to die. It's no surprise she would want to check out alternatives. Sadly, she was too late.

The truth is that many patients only seek alternative care after they been “*slashed, poisoned, and burned*” by the “Big 3.” Blaming an alternative cancer clinic for the death of a patient who was considered terminal when they walked in the door is like blaming an auto body shop worker for damaging the car you towed in after it was totaled in a high-speed collision. But unfortunately, this is the point at which most cancer patients finally decide to try alternative cancer treatments.

If you have cancer, the good news is that there is hope with alternative cancer treatments. **Real hope.** Not the false, dishonest, deceitful hope that doctors give you when they try to convince you that the “Big 3” are the answer. Remember, that's what they have been taught in medical school, so that's all they know. But, you also need to remember to **follow the money trail.** When your doctor is skeptical about a new natural treatment, you can bet that he is only regurgitating the lies that he has read in the latest medical journal, sponsored by Big Pharma.

It is painfully obvious that the Cancer Industry has absolutely no interest in saving lives or in the truth. According to Walter Last, “*There is widespread suppression of natural cancer therapies, and persecution of successful therapists. The undisputed leader in this field is the USA, and other governments and medical authorities happily follow the US example. The rationale for this suppression is the claim that natural cancer therapies have **not been scientifically proven to be effective**, and such treatment, even if harmless, would delay the more effective conventional cancer treatment. This argument would be laughable if it were not so tragic for millions of sufferers.*”

Why is there “no **official** scientific evidence” for alternative treatments? This is **vital** to understand. According to Webster Kehr, “the reason there is no **official** ‘scientific evidence’ for alternative cancer treatments is that they are not highly profitable to Big Pharma. It is impossible, by law, for a substance to be considered to have ‘scientific evidence’ unless Big Pharma submits it to the FDA, and **they will only submit things that are very, very profitable to them.** Thus, the many thousands of studies of natural substances that have cured or treated cancer, are not ‘scientific evidence’ and they are ignored by our government, because they were not done under the control of Big Pharma.”

However, despite the Cancer Industry’s efforts to completely suppress and squelch the truth about alternative cancer treatments, sometimes the word still gets out about an effective treatment, thanks largely to the internet. But the Cancer Industry is prepared for just such an occasion and has a standard operating procedure for these “leaks.” They typically handle them in one of the following ways:

- The testimonials are explained as “**unreliable,**” (i.e. lies)
- The alternative cancer treatments are **ignored** and **suppressed**
- The patients are said to have undergone “**spontaneous remission**” unrelated to the alternative cancer treatment
- The patients are said to have actually been cured from the **delayed effects** of conventional cancer therapy which was administered before the alternative cancer treatment.
- The physicians who administer the alternative cancer treatment are **persecuted**

Do **not** believe the **lies** of the Cancer Industry! There are several non-toxic alternative cancer treatments that work with advanced cancer patients. However, due to the fact that Big Pharma pumps billions of dollars into the advertising each year, you are probably **only** familiar with the “Big 3” cancer treatments. And since most alternative cancer treatments are very inexpensive and non-patentable, they do not provide the Cancer Industry with a single penny of revenue, thus they are relatively obscure.

Remember, the successful alternative treatments **target cancer cells** and **do not harm healthy cells**. This is a key difference between alternative cancer treatment protocols and conventional cancer protocols, which are not selectively toxic (i.e. they kill ***all cells, including healthy cells***). Big difference, isn't it? Alternative cancer treatments focus on cleansing the body and stimulating the natural immune system with special diets, supplementation, detoxification, and oxygenation. Alternative doctors regard cancer as a systemic disease (*one that involves the whole body*) and focus on correcting the underlying **root** of the disease, not the tumor, which is merely a **symptom**. So why doesn't every doctor get on the bandwagon and begin to treat cancer with treatments that really work? Well, we live in the ***real*** world, don't we?

There are well over three hundred non-toxic alternative cancer treatments that I have studied. This chapter focuses on the most effective of these three hundred treatments. If you have advanced cancer, then you are considered to be “*terminal*.” You do **not** have time to waste monkeying around with unproven cancer treatments. **The clock is ticking!** After careful consideration and voluminous research, I have detailed the most effective non-toxic cancer treatments in this chapter. If you had a six inch gash on your abdomen, you wouldn't treat it with a band aid. Neither should you treat advanced cancer with a less potent cancer treatment. If you have cancer and have been given up on by orthodox medicine, then please pay close attention to these treatments. Perhaps one of them will save your life.

The treatments in this chapter are listed in alphabetical order, not according to their success record. Honestly, these are the treatments that I would consider if I had advanced cancer. Guaranteed to work? **Sorry. No guarantees.** But if you have advanced cancer, you have likely already been given a guaranteed “*death sentence*” from your doctor and you have basically a **0%** chance of survival with conventional cancer medicine. **No chance.**

NOTE: These advanced alternative cancer treatments ***should never be combined***, except in a clinical setting. This is because the dosages for these treatments are established based on the ability of the body to rid itself of dead cancer cells. By combining these

treatments at home, the number of dead cancer cells could be far too high and toxicity could occur.

BRANDT/KEHR GRAPE CURE

In the 1920s, Johanna Brandt of South Africa said she cured her stomach cancer with what she called The Grape Cure. A few years later, she wrote a fascinating book that revealed the specifics of how she rid herself of cancer. Basically, Brandt ate grapes...lots of grapes...including their skins and seeds. As it turns out, grapes have been show to contain a substance called **resveratrol**.

According to a well-known researcher, Dr. John Pezzuto of the University of Illinois at Chicago, this naturally occurring phenol “*has multiple modes of action, inhibiting cancer growth at a lot of different stages, which is unusual.*” It is also believed that resveratrol activates the p53 gene which induces apoptosis (*normal cell death*). In addition to resveratrol, grapes (*especially purple Concord grapes*) contain several other nutrients that are known to kill cancer cells, such as ellagic acid, lycopene, OPCs, selenium, catechin, quercetin, gallic acid, and vitamin B₁₇. **What an amazing cancer fighting arsenal!**

Since many things have changed since Brandt published her Grape Cure diet in the 1920s, I have adapted this diet based upon recommendations from Webster Kehr, thus “***the Brandt/Kehr Grape Cure.***” For example, the trace minerals in the soil have largely been depleted over the past half century, and chlorine and fluoride are now added to water supplies, just to name a few. I mention these items because all grape juice, including organic, may have been mixed with chlorine water. Also, all grape juice has been pasteurized, by law, thus destroying the enzymes which are critical to the digestion of grape juice. This being so, the Brandt/Kehr Grape Cure requires a certain amount of whole grapes.

A typical day on the Brandt/Kehr diet involves twelve hours of fasting followed by twelve hours of grape consumption. During the consumption period, you are supposed to consume absolutely nothing except for grapes, grape mush, and fresh squeezed grape

juice, which should be consumed slowly over the twelve hour period, not just at meal times. During this period, you should consume between ½ gallon and one gallon of pure “grape mush” made from putting the grapes into a food processor. To avoid nausea and maximize the effectiveness of the grape mush, divide it into eight equal portions to be eaten slowly every 1½ hours of the twelve hour consumption period.

Be sure to drink at least a gallon per day of pure spring water or artesian well water, spread out over both twelve hour periods, and taken with the grape mush during the consumption period. Make sure your water is **not** treated with chlorine or fluoride. The grape juice mush should include crushed seeds and the skins, and the grapes should be purple Concord grapes. Don’t buy seedless grapes or green grapes, as they don’t have all the “goodies” that purple Concord grapes do. And purchase **organic** grapes if possible, since grapes are heavily sprayed with pesticides. If you are unable to obtain organic grapes, be sure to wash your grapes in warm spring water for at least fifteen minutes and rinse.

During the water fast, the cancer cells get very hungry. Then, when they finally do get food, what they get is grapes, which they gobble up since grapes contain high concentrations of natural sugar. And cancer cells love sugar! However, those same grapes also contain several major cancer killing nutrients listed above. So, in essence, we “fool” the cancer cells into ingesting an entire myriad of cancer-fighting nutrients. It’s like putting poison in candy and then giving it to a starving child. And since cancer cells are extremely inefficient at producing energy, they require much more sugar than regular healthy cells, so they gobble up even more grapes! And as we learned previously, cancer cells consume eighteen times more sugar (*and eighteen times more of the cancer-fighting nutrients found in grapes*) than normal healthy cells. Thus, the Grape Cure diet is one of the ultimate ways to **kill cancer cells!**

What supplements should be taken with the Brandt/Kehr Grape Cure?

1. Grape seed extract – check the ingredients to get the most OPCs.

2. Grape skin extract – check ingredients to get the most resveratrol.
3. Quercetin – available as an over the counter supplement.
4. Vitamin C – 12 to 15 grams spread out during the day (*build up to this amount over two weeks, do **NOT** start out at 12-15 grams*).
5. Cayenne pepper – the hotter and as close to raw as possible.
6. Niacin – one gram per day.

Both cayenne pepper and niacin increase blood flow, which helps get the grape juice to the cancer cells. Cancer cells frequently thrive in areas where circulation is poor. What treatments can you use along with the Grape Cure? **Do not** use cesium chloride, since cesium blocks glucose from getting into the cancer cells, and the Brandt/Kehr Grape Cure uses the glucose as a transport agent for the cancer-fighting nutrients.

There is a six week cycle on this treatment. The first five weeks are the pure Brandt/Kehr Grape Cure treatment. Do not eat or drink anything other than grapes. **Period.** During the sixth week, eat only **raw** fruits and vegetables. The sixth week will allow certain other foods to be eaten. Repeat the six week cycle as many times as necessary to cure your cancer.

BUDWIG DIET

A remarkable alternative cancer treatment was devised by a German biochemist, Dr. Johanna Budwig, also a seven time Nobel nominee. Her most important medical contributions involved her research into the roles of essential fatty acids. In order to mass produce and distribute foods high in oils, food manufacturers deliberately alter the chemical composition of the oils, which gives them longer shelf lives. In the 1950s, she proved that these chemically-altered, hydrogenated fats (*which she called “pseudo” fats*) are rigid fats which stick to the cell membranes, thus causing them to malfunction.

Dr. Budwig believed that these hydrogenated, processed fats and oils shut down the electrical field of the cells and make us susceptible to chronic and terminal diseases, since the beneficial oxidase ferments are destroyed by heating or boiling. She also demonstrated that the absence of healthy unsaturated fats (*i.e. omega-3 and omega-6*) is responsible for the production of oxidase, which induces cancer growth and is the cause of many other chronic disorders. She came to believe that cancer was not the result of too much cell growth, but defective cell growth (*i.e. cell division*), caused by the combination of too much “pseudo” fats and too few healthy fats in the cell membrane.

But exactly what happens to fats when they are processed? In healthy fats there is a vital electron cloud which enables the fat to bind with oxygen. Healthy, oxygenated fats are capable of binding with protein and in the process become water-soluble. This water solubility is vital to all growth processes, cell damage restoration, cell renewal, brain and nerve functions, sensory nerve functions, and energy development. In fact, the entire basis of our energy production is based on lipid metabolism. **Hydrogenation destroys the vital electron cloud** and as a result, these “pseudo” fats can no longer bind with oxygen or with protein. These fats end up blocking circulation, damaging the heart, inhibiting cell renewal, and impeding the free flow of blood and lymph. Might want to remember this fact the next time you want to buy some margarine or fried foods, since both typically contain these harmful fats.

Dr. Budwig began to study fats in the 1950s, and she quickly discovered much more about the metabolism of fats than had previously been known. She began her research by analyzing the blood samples of thousands of seriously ill patients, then she compared these samples to the blood of healthy people. She soon found that the blood of seriously ill cancer patients was deficient in certain important essential ingredients, including phosphatides and lipoproteins, whereas the blood of a healthy person always contained sufficient quantities of these ingredients.

She hypothesized that the lack of these ingredients resulted in the proliferation of cancer cells. When she analyzed the blood of cancer patients, instead of finding healthy, red, oxygen-rich hemoglobin,

she discovered a greenish-yellow substance. She found that when these natural ingredients were replaced, that the cancerous tumors began to shrink. The strange greenish elements in the blood were replaced with healthy red blood cells as the lipoproteins and phosphatides amazingly reappeared. She then discovered that eating a combination of two foods would replace the lipoproteins and phosphatides and turn the blood healthy again.

The two essential fatty acids (EFAs) are defined as alpha-linolenic acid (ALA), an omega-3 fatty acid, and linoleic acid (LA), an omega-6 fatty acid. Good health requires the proper ratio of ALA and LA in the diet. The ideal ratio is around 1:2. Ocean fish (*such as salmon, tuna, and mackerel*) and certain nuts/seeds (*such as flax/linseed, and walnuts*) are the highest in omega-3 fatty acids, while other vegetables and nuts (*corn, safflower, cottonseed, peanuts, and soybeans*) are the highest in omega-6 fatty acids.

Budwig believed that chronic disease is a result of a body lacking EFAs, which are full of electrons and bind to oxygen and proteins. When they are absorbed into the cell wall, they pull oxygen into the cell. And when bound to sulfur-based proteins, they become water-soluble. **This is the theory behind the Budwig Diet: the use of oxygen in the organism can be stimulated by lipoproteins (sulfur-rich proteins and linoleic acid).**

On page eighty-five of his book *Oxygen Therapies*, Ed McCabe discusses his point of view on essential fatty acids: “*The red blood cells in the lungs give up carbon dioxide and take on oxygen. They are then transported to the cell site via the blood vessels, where, they release their oxygen into the plasma. This released oxygen is ‘attracted’ to the cells by the ‘resonance’ of the ... fatty acids. Otherwise, oxygen cannot work its way into the cell. ‘Electron rich fatty acids’ play the decisive role in respiratory enzymes, which are the basis of cell oxidation.*” Essential fatty acids combined with sulfur-rich proteins (*such as those found in cottage cheese and yogurt*) increases oxygenation of the body, since the electrons are naturally protected until the body requires the energy.

Of course, as you would expect, she was persecuted for her work. Just think of the money generated each year from the fat and oil

industry. The hydrogenation process is central to both of these industries, and Dr. Budwig's theory was based upon the foundation that hydrogenated fats contribute to the formation of cancer cells! Eventually, she was prevented from doing further research and prevented from publishing her findings.

In her own words, *“I have the answer to cancer, but American doctors won't listen. They come here and observe my methods and are impressed. Then they want to make a special deal so they can take it home and make a lot of money. I won't do it, so I'm blackballed in every country.”* Thank God, she endured and now her work is available for us.

Several excellent sources of sulfur-rich proteins are nuts, onions, chives, garlic, and **especially** cottage cheese and yogurt. The flaxseed oil should optimally be virgin, cold-pressed, organic, liquid, refrigerated, and unrefined. One of the best brands is Barlean's High Lignan Flaxseed Oil. **The blend of flaxseed oil and cottage cheese should be a part of every cancer patient's diet.** You simply mix one cup of organic cottage cheese with two to three tablespoons of flaxseed oil. Be sure to mix them together and let them sit for several minutes. This will convert the oil-soluble omega-3 into water-soluble omega-3. It is important to note that neither foods rich in EFAs nor sulfur-rich proteins **alone** will accomplish these tasks. This is because the oils must first bind to the proteins before oxygen can be bound and before the body can assimilate the combination.

I also munch on dehydrated flax seed crackers that Charlene makes along with cottage cheese, stevia, and strawberries. It's an excellent snack and boy is it healthy! I also like to add a couple of tablespoons of Carlson's Fish Oil, an excellent source of omega-3 fats. If you have cancer and use the Budwig Diet, **be sure to stay away from sugar**, all animal fats, salad oils, and hydrogenated oils.

Thanks to the tireless work of Dr. Budwig we now know that electron-rich fats interact with sulfur-rich proteins to bind oxygen and promote aerobic metabolism which restores health. According to Dr. Dan C. Roehm, M.D. (*oncologist and former cardiologist*), *“What she (Dr. Johanna Budwig) has demonstrated to my initial*

*disbelief but lately, to my complete satisfaction in my practice is: **CANCER IS EASILY CURABLE**, the treatment is dietary/lifestyle, the response is immediate; the cancer cell is weak and vulnerable; the precise biochemical breakdown point was identified by her in 1951 and is specifically correctable, in vitro (test-tube) as well as in vivo (real)... **This diet is far and away the most successful anti-cancer diet in the world.**" (Townsend Letter for Doctors, July 1990)*

Bill Henderson has worked with over a thousand "terminal" cancer patients. The keystone to his treatment protocol is the Budwig Diet. His book, [Beating Cancer Gently](#), is excellent as is his new book, [Cancer-Free](#). Bill has cured over two thousand people using his protocol and he will "coach" you over the phone. **His protocol includes some very advanced attributes that make it one of the most potent cancer treatments available.** He really focuses on a strict cancer diet, which is one of the reasons that so many people have been cured using his treatment. And as the name says, it is also one of the most "gentle" treatments. Anyone who chooses the Budwig protocol should use Bill Henderson's protocol. You can purchase his book here: www.beating-cancer-gently.com.

DMSO/MSM/CESIUM CHLORIDE ("DMCC")

I first learned about this protocol several years ago, and have since then learned of several doctors who are using it. DMSO (*dimethyl sulfoxide*) is a highly non-toxic, 100% natural product that comes from the wood industry. MSM (*methyl sulfonyl methane*) is basically DMSO with an additional oxygen atom attached to the sulfur atom, forming a molecule with a total of two attached oxygen atoms. MSM occurs in fresh fruit and vegetables, raw milk, wheat grass juice, and aloe vera.

Both DMSO and MSM have the property of being quite soluble in both oil and water based liquids. In this book, I use the term "DMSO" to refer to both substances, since according to biochemist Dr. David Gregg, "*DMSO and MSM, which form each other in the body, should be essentially indistinguishable in their biochemical effects.*"

DMSO, as a healing agent, was introduced in the 1960s by a research team headed by Stanley W. Jacob, M.D., at the University of Oregon Medical School. A study was conducted in which DMSO was mixed with a haematoxylin (*a purple dye*) and injected into patients with cancer. The purpose of the study was to determine which cells would attract the DMSO. **They learned that DMSO has an affinity for cancer cells.** As a matter of fact, some of the cancer patients were cured during this study, even though DMSO was only being combined with a dye! (“*Haematoxylin Dissolved in Dimethylsulfoxide [DMSO] Used in Recurrent Neoplasms*” by E. J. Tucker, M.D., F.A.C.S., and A. Carrizo, M.D., June 1968). The study also showed that DMSO could not only dissolve substances, but it could also penetrate human skin and carry the dissolved substances along with it! This is remarkable, because human skin is impenetrable to most substances.

How does it work? According to Dr. David Gregg, “*in the body DMSO forms equilibrium with MSM (the oxidized form of DMSO) and the combination becomes an oxygen transport system, enhancing aerobic metabolism. This operates at only one point, the respiratory chain (at the inner membrane of the mitochondria).*” www.krystalis.net

Over the past four decades, more than 10,000 articles on the biological implications of DMSO have appeared in the scientific literature and 30,000 articles on the chemistry of DMSO have also been published. The results of these studies strongly support the view that DMSO is a remarkable new therapeutic principle. In his book, Cancer & Natural Medicine, John Boik cites a number of publications where DMSO solutions have caused numerous forms of cancer *in vitro* (*outside the living organism*) to differentiate, thus reverting into normal cells through reestablishing aerobic metabolism.

Once aerobic metabolism is reestablished, the previously cancerous cells will eventually be eliminated via apoptosis. Remember, apoptosis is programmed cell death that happens to most normal cells in a matter of a couple of weeks. Reestablishing aerobic metabolism with DMSO will not correct genetic damage, but holding the cancer cells in a normal state long enough gives the natural process associated with healthy cells (i.e. *apoptosis*) time to

kill the cancer cells. This is a bit of a paradox, but one way that DMSO kills cancer cells is through making them healthy.

Of course, with an effective alternative treatment, you can expect the Cancer Industry's cronies to go to work. According to Webster Kehr, *"the FDA took note of the effectiveness of DMSO at treating pain and made it illegal for medical uses in order to protect the profits of the aspirin companies (in those days aspirin was used to treat arthritis). Thus, it must be sold today as a 'solvent.' Few people can grasp the concept that government agencies are started for the sole purpose of being the 'police force' of large, corrupt corporations. Buying the souls of politicians is as easy as giving candy to a baby."* www.cancertutor.com/Cancer/DMSO.html

While DMSO has been called *"the most controversial therapeutic advance of modern times,"* the controversy seems to be based on politics and money rather than science. Honestly, I wish we lived in a world where physicians would treat cancer patients with the **proper** treatment rather than have patients treat themselves at home. Unfortunately, due to the influence of Big Pharma, physicians are using treatments that have been chosen solely on the basis of their profitability rather than their effectiveness. When you consider the fact that DMSO is not a patentable drug, is cheap, safe and effective, and knowing what you should know about the Cancer Industry, is it any wonder that there is a smear campaign against DMSO?

Perhaps the most important attribute of DMSO/MSM is that it works in synergy with other treatments, such as **cesium chloride**, the most alkaline mineral in the world. It's a fact that many parts of the world that have high levels of strong alkaline minerals in their water have a very low incidence of cancer. The Hunzakuts of Northern Pakistan have water high in cesium, and **never** develop cancer unless they move away from their homeland. The Hunzakuts also eat apricot kernels (*which contain vitamin B₁₇*) on a regular basis. I will discuss B₁₇ therapy later in the book.

When cesium is transported into the cell, it is able to radically increase the intracellular pH of the cell. **Once inside the cell, the cesium begins to pull potassium from the blood, thus it eventually**

blocks the cell's intake of glucose, thus it stops the fermentation process, thus it starves the cell. The cesium also neutralizes the lactic acid which is produced with anaerobic respiration, thus stopping the cell from proliferating and stopping the “cachexia cycle“ at the cellular level.

Perhaps the most well known physician to use cesium to treat cancer is Dr. H. E. Sartori. He began his cesium cancer therapy program in April 1981 at Life Sciences Universal Medical Clinics in Rockville, Maryland, where fifty patients with “terminal” cancer were treated. In other words, their cancer had metastasized to other organs and they were sent home to die. The medical establishment labeled their conditions as “hopeless” and “terminal.” Of the fifty patients, three were comatose, and forty-seven had already completed maximum dosages of the “Big 3” before cesium was tried.

Cesium chloride was given to patients, along with vitamin A, vitamin C, vitamin B₁₇, zinc, and selenium. The diet consisted primarily of whole grains, vegetables, and linolenic acid rich foods such as flaxseed, walnut, and wheat germ. To increase efficiency of the treatment and improve the circulation and oxygenation, the patients received the chelating agent EDTA and DMSO. The study included ten patients with breast cancer, nine with colon cancer, six with prostate cancer, four had pancreatic cancer, six had lung cancer, three had liver cancer, three had lymphoma, one had pelvic cancer, and eight had cancer from an unknown site of origin.

The results were astounding. Approximately **fifty percent** of patients with breast, colon, prostate, pancreatic, and lung cancer **survived for at least three years**, despite the fact that conventional doctors gave them only a few weeks to live! Thirteen patients died in the first two weeks of therapy. Autopsy results in each of these thirteen disclosed reduced tumor size from the cesium therapy. Amazingly, pain disappeared in all the patients within one to three days after initiation of cesium therapy. The write up of these studies can be found in Dr. Sartori's book, Cancer – Orwellian or Utopian?

Considering the fact that cesium chloride is typically only used on advanced cancer patients, Dr. Sartori's fifty percent cure rate is

astonishing. **Here's why:** All of the patients had already been given their “death sentence” by conventional doctors. They were labeled as “terminal” and sent home to die. They likely had damage to their major organs from the toxic chemo treatments and/or radiation. Yet, still half of them were saved! This is truly remarkable. Remember, the cure rate for similar advanced cancer patients by orthodox medicine is close to **zero percent**.

Dr. Keith Brewer (*a physicist*) became very interested in cancer in the 1930s. He discovered that ***cancer cells had an affinity for cesium***. This fact is the reason that a radioactive isotope of cesium is commonly used as a “marker” to trace the movement of conventional chemotherapy drugs into a tumor. Introducing substantial amounts of cesium into the body, he reasoned, might cause a cancer cell to absorb enough to change its pH and disrupt anaerobic metabolism and the fermentation process it needed to stay alive.

After extensive testing, Brewer determined that cesium or rubidium could raise the pH of cancer cells. Ultimately he focused on cesium because it was the more alkaline of the two. The question, however, was how to get enough cesium into the cancer cell to change its pH. Brewer determined that there were a number of vitamins and minerals (*including vitamin B₁₇*) that greatly enhanced the absorption of these elements by the cancerous cells. By administering these substances in conjunction with the cesium, the level of the cesium absorbed was sufficient to kill the cancer cells.

Here's how. ***The cesium proceeded to alkalize the cancer cells, thus causing them to reestablish aerobic metabolism***. This caused cell replication to cease and also caused normal apoptosis to occur within a few days. In 1981, tests were performed on 30 patients with cancer, and in all thirty patients, the cancerous tumors disappeared and the pain ceased within a couple of days. This protocol became the basis for the what is now called “High pH Therapy.” www.mwt.net/~drbrewer/highpH.htm

Remember the story of Neal Deoul? He had financed research on cesium and aloe vera to battle cancer (*and AIDS*). He was sued and his name was dragged through the mud in a lengthy court battle

initiated by the Cancer Industry. During the court battle, Deoul was diagnosed with cancer, and turned to a form of high pH therapy, which eventually cured him of cancer. **Great** news for alternative cancer treatments; **horrible** news for the Cancer Industry. Since their court battle began in the late 1990s, Neal and his entire family have been horribly persecuted by the Cancer Industry. Read more about their story here: www.cancer-coverup.com.

DMSO binds with cesium chloride to get inside of cancer cells. However, what DMSO is really used for is to get the cesium chloride through the skin into the blood stream. The DMCC protocol is especially effective with brain cancer patients because of how quickly it gets past the blood-brain barrier, but it can be used productively with any type of cancer.

In a case study, one brain cancer patient had a tumor in his brain pressing against one of his optic nerves. When he mixed DMSO with the cesium chloride he could literally feel the cesium flooding into the tumor's cancer cells within just a few minutes, since the tumor was pressing against his optic nerve.

According to Dr. Robert R. Barefoot in his book, *The Calcium Factor: The Scientific Secret of Health and Youth*, *“Cesium chloride is a natural salt, and where it is found, cancer does not exist. This is because cesium is the most caustic mineral that exists, and when it enters the body, it seeks out all of the acidic cancer hotspots, dousing the fire of cancer, thereby terminating the cancer within days. Also, **when dimethyl sulfoxide (DMSO) is rubbed near a painful cancer, the pain is removed and the DMSO causes the cesium to penetrate the cancer tumor much faster, thereby terminating the cancer much faster.**”* However, since this can also cause excessive swelling, in some cases it is better not to rub the cesium directly above the tumor.

There are multiple theories on why and how the DMCC protocol stops cancer in its tracks. My theory is that the DMCC protocol transports enough oxygen to the cells that the condition of hypoxia is reversed and the cells reestablish aerobic metabolism.

According to Dr. David Gregg, the cesium “cancer-kill mechanism” is one (or a combination of) the following:

1. It changes the osmotic pressure in the cancer cells relative to the surrounding media, causing them to swell and burst. (*This is why the tumor swells, which can be dangerous in some cases.*)
2. It results in an opposing cesium & potassium concentration gradient that arrests the continued operation of the sodium-potassium pump, arresting the sodium-glucose co-transport system feeding glucose into the cancer cell, thus starving the cancer cell.
3. It results in an accumulation of negative ions inside the cancer cell, canceling the potential gradient across the cell membrane, which is required to energize the sodium-glucose co-transport system, thus starving the cell.
4. It results in a breakdown of the cancer’s disguise which “deceives” the immune system, thus the cancer cell is made visible and is attacked/destroyed by the immune system.
www.krystalis.net/cancer5.htm

I suppose that it’s possible that all four mechanisms described by Dr. Gregg play a role in killing the cancer cells. In any event, regardless of the exact cancer-kill mechanism, the fact of the matter is that the DMCC protocol kills cancer cells (*either directly or indirectly*), stops cancer from metastasizing (*spreading*), shrinks tumors within weeks, and alleviates pain within a few days, depending upon what is causing the pain. However, please understand that any level of swelling, inflammation, and/or congestion can be very dangerous, thus the DMCC protocol is not recommended for everyone.

DR. KELLEY’S ENZYME/METABOLIC THERAPY

The primary basis of the enzyme/metabolic therapy for cancer emanates from the recognition that cancer cells are virtually indistinguishable from placental cells found in pregnancy. This theory, called the “*trophoblast*” theory, was proposed by Scottish embryologist, Dr. John Beard, around 1900. First he observed that the invading placental (*trophoblast*) cells were astonishingly similar

to cancer cells, and other observations led him to believe there was an intimate correlation between these trophoblasts and cancer cells.

In early fetal development, the placental trophoblasts produce a protective environment (*placenta*) and a source of nutrition (*umbilical cord*), much in the same manner as cancer cells form a protective environment (*tumor*) and a source of nutrition (*new blood supply*). Another observation was that the placental trophoblasts seem to take a downturn in activity around the 8th week of pregnancy. It became clear to Beard that this downturn coincided with the completion of the digestive system in the fetus, and the activation of the fetal pancreas.

Modern medical research has also shown that these trophoblast cells secrete a hormone called **human chorionic gonadotropin (hCG)**, and the quantities of this hormone rise until around the 8th week and then begin to taper off. It is this very hormone that coats the trophoblast cells and cancer cells and makes them impervious to our immune system. It has been proven that hCG is found in all types of cancers. Other than the trophoblast cell and the cancer, no other human cells produce hCG. **So, if you take an hCG urine test and get a positive result, then you are either a pregnant woman or you have cancer.**

Trophoblasts are also surrounded by a coating of glycoprotein including a molecule that gives them a negative charge. This same type of coating is found around the cancer cell. And in fact, it is one of the chief reasons for classifying all cancer cells as trophoblastic. Also negatively charged are the leukocytes (*white blood cells*) of the immune system. And as we all know, like charges repel, while opposites attract. This being so, both trophoblasts and cancer cells are impermeable to the immune system's natural defense mechanism.

Remember that the placental trophoblasts produce hCG until the 8th week of pregnancy, when they taper off. **This is a direct result of the fact that the fetal pancreas begins to produce enzymes!** And when certain enzymes, namely trypsin and chymotrypsin and amylase, encounter a trophoblast cell, they are able to break down its

negatively charged protein coating. This is why “morning sickness” typically begins around the 8th week of pregnancy – the fetal pancreas is not yet fully developed and does not yet produce amylase, which is responsible for digesting glycogen (the “glyco” part of the glycoprotein coating). As a result, the glycoproteins are not broken down into their smallest units, and the mother’s kidneys and pancreas are both forced to compensate and become overloaded. The result is nausea, pain in the lower back, and low energy. *Thus, the pregnant mother can supplement her diet with amylase to minimize morning sickness.*

Interestingly, one of the rarest cancers is cancer of the duodenum, which is the area of the intestines which is highest in pancreatic enzymes. The reason that we **do** find cases of pancreatic cancer is that the enzymes have not yet been “activated” in the small intestine. This is also the reason that pancreatic cancer has such a high mortality rate – the pancreas loses its ability to produce enzymes, thus there is no control mechanism for the cancer!

In 1911, Dr. Beard published a paper entitled The Enzyme Therapy of Cancer, which summarized his therapy and the supporting evidence. After his death in 1923, the enzyme therapy was largely forgotten, especially with the advent of Marie Curie and her radiation work. The pioneer in the development of Enzyme/Metabolic therapy was Dr. William Donald Kelley (a Texas orthodontist). Around 1960, at the age of 35, his health began to deteriorate. In 1964, a series of X-rays showed the signs of advancing pancreatic cancer, including lesions in his lungs, hip and liver. The surgeon said Kelley was too sick to operate on and told Mrs. Kelley (his wife and the mother of his four children) that he had **4 to 8 weeks** to live. Kelley was ready to give up, but his mother was not! She threw out the junk food and meat and instructed him to eat only fresh and raw fruits, vegetables, nuts, grains, and seeds. After several months, Kelley began to feel better, and he was even able to return to work.

However, after 6 or 7 months, he stopped improving and developed severe digestive problems, probably from the advancing cancer. He therefore began taking pancreatic enzymes to aid his digestion, and eventually increased the dose to 50 enzyme capsules per day. It was at this point that he discovered the work of Dr. John Beard

concerning the relationship of pancreatic enzymes to cancer. He also encountered the writings of Dr. Edward Howell, an early advocate of the raw plant food diet. **In time, Kelley fully recovered from his cancer.** Considering the fact that the Medical Big Medicine still considers pancreatic cancer incurable, this was very impressive!

Kelley theorized that the formation of cancer was attributable to excess female hormones which were responsible for changing a stem cell into a trophoblast cell. Simply put, this means that cancer is the growth of normal tissue, but at the wrong place at the wrong time. He believed that cancer progresses due to a lack of pancreatic enzymes that digest the cancer cells. Eventually, Kelley went on to treat over 33,000 patients who had cancer. That's right... **33,000**. Dr. Kelly had a cure rate of **93%** in patients that lived at least 1½ years after starting his treatment. In other words, those that weren't "on their last leg" had tremendous success with his treatment protocol, since this is not necessarily a fast-acting treatment.

Of course, the building blocks of his treatment protocol were **pancreatic enzymes**. He also instructed patients to eliminate pasteurized milk, peanuts, white flour and sugar, chlorinated water, and all processed foods. Dr. Kelley developed a line of over 50 nutritional formulations for different types of cancers, and he always individualized plans for patients according to their own metabolic type. The typical Kelley diet restricts protein, is 70% to 80% raw, and emphasizes whole grains, fruits, vegetables, raw juices, sprouts, and pancreatic enzymes. Coffee enemas are taken to help the body detoxify and to eliminate toxins secreted by tumors as they dissolve.

The Cancer Industry, in their pompous ignorance and diabolical greed, didn't like Dr. Kelley curing cancer with inexpensive enzymes! So, they sent a young medical intern, Dr. Nicholas Gonzalez, to investigate Kelly's claims and debunk him. Gonzalez traveled to Dallas in 1981 to interview and to investigate Dr. Kelley. He was astonished to find case after case of appropriately diagnosed, advanced cancer patients who were healthy and active 10 to 15 years after their diagnosis. Kelley made all his records available, of over 10,000 patients, and encouraged Gonzales to contact any and all of them. Eventually, the study sample was narrowed down to 50

cases which represented 25 different types of cancer. All 50 patients were initially diagnosed as terminal. **The median survival of this group of 50 patients was 10 years!**

As incredible as these results seemed, Dr. Gonzalez decided to go a step further. He wanted to focus on pancreatic cancer, since the 5 year survival rate with orthodox treatments is virtually **zero percent**. He searched and found twenty-two pancreatic cancer patients who had been treated by Dr. Kelley between 1974 and 1982.

The twenty-two patients fell into three categories:

1. Ten patients consulted with Kelley only once and never went on the protocol – All had died.
2. Seven patients followed the protocol only partially and sporadically (as determined by interviews with family members, doctors, and records) – All had died.
3. However, five patients followed the protocol completely – All achieved long-term remission (although one had died of Alzheimer’s disease after 11.5 years of survival). **The median survival rate of these five pancreatic cancer patients was 9 years!**

Of course, as with other medical mavericks, Dr. Kelley had his share of persecution from the Cancer Industry and its wolves. He was issued a restraining order which prohibited him from treating anything but dental disease. When he violated this order, he was thrown in jail. A Texas court also made it illegal for him to distribute his self-published booklet, entitled One Answer To Cancer. This makes Dr. Kelley the first (*and only*) doctor ever to be prohibited by court decree from publishing!

Although he appealed the decision to the United States Supreme Court, arguing that his First Amendment rights were being flagrantly violated, the ruling was upheld. He eventually had to move his clinic to Mexico. Not surprisingly, his enzyme/metabolic therapy protocol was put on the American Cancer Society’s Unproven Methods blacklist in 1971 where it remains today. However, One Answer To Cancer can be found here: www.drkelley.com/CANLIVER55.html.

Dr. Kelley died in 2005, but before he died, he wrote a book entitled Cancer: Curing the Incurable Without Surgery, Chemotherapy or Radiation. This book is even better than his first book and is available on Amazon.com. His work is currently being continued by Dr. Nicholas Gonzalez, who runs a clinic in New York City. His website is www.dr-gonzalez.com.

ESSIAC TEA

My grandmother, Helen Cade, “Mama Helen” as we all affectionately called her, was the church visitor for Castle Hills First Baptist Church in San Antonio for over 40 years. She and my mom had been 2 of the 18 charter members of the church way back in 1952. (*The church now has over 10,000 members.*) As the church visitor, Mama Helen’s job was to travel to hospitals and visit sick people ... dying people ... injured people. I remember traveling with her and everywhere she went, to everyone she met, she would say, “Honey, do you know Jesus?” And then she would proceed to give them one of her “pet rocks” on which were painted “Jesus Loves You,” then she would tell them about Jesus’ death and resurrection. What a woman she was! I can only guess that there are literally **thousands of souls** in heaven as a direct result of Mama Helen’s witness for Jesus.

Mama Helen was diagnosed with terminal cancer in 1988. I’m not sure where she learned of it, but almost immediately she began to brew her own Essiac Tea. I remember going to her house in San Antonio and helping her make the tea, fill those amber bottles, and stick them in the fridge. She drank it faithfully, almost as faithfully as she shared the gospel with everyone she met. I say **almost** as faithfully, because I honestly don’t know of anything that she did more faithfully than share the gospel. Anyway, Mama Helen lived another 10 years with her terminal cancer, largely as a result of taking Essiac Tea, in my opinion. I’m not sure why, but she had stopped drinking the tea about two years before she died.

Back in 1922, a Canadian nurse named Rene Caisse noticed some scar tissue on the breast of an elderly woman. The woman told her

that doctors had diagnosed her with breast cancer years before. However, the woman didn't want to risk surgery nor did she have the money for it. Providentially, she had met an old Indian medicine man who told her that he could cure her cancer with an herbal tea. The woman proceeded to tell Caisse about the ingredients in the tea. About a year later, Caisse was walking beside a retired doctor who pointed to a common weed and stated, "Nurse Caisse, if people would use this weed there would be little or no cancer in the world." This "weed" (*sheep sorrel*) was one of the herbs in the medicine man's formula. The doctor had watched his horse cure itself of cancer by repeatedly grazing in a particular part of the pasture where sheep sorrel grew.

In 1924, Caisse wanted to test the tea on her aunt who had been diagnosed with terminal stomach cancer and was given less than six months to live. Caisse asked the physician, Dr. R. O. Fisher, for permission to try the tea on her aunt, and he consented. Her aunt drank the herbal tea daily for two months and recovered. Amazingly, she lived for twenty more years! Caisse also tested the tea on her mother who had been diagnosed with terminal liver cancer and had been given less than two months to live. Remarkably, her mother lived another 18 years!

Dr. Fisher and nurse Caisse immediately began treating cancer patients with the magic tea, which she eventually named "*Essiac*," which is "*Caisse*" spelled backwards. She healed thousands of terminal cancer victims with *Essiac* in her clinic between the mid 1920s and the late 1930s. **At the height of her involvement, Caisse saw up to six hundred patients a week.** The majority of those whom she treated came on referral with letters from their physicians certifying they had incurable or terminal forms of cancer and that they had been given up by the medical profession as untreatable. It was typical for Nurse Caisse to give her patients the *Essiac* treatment at no cost.

After word of her impressive results spread to the United States, a leading diagnostician in Chicago introduced Caisse to Dr. John Wolfer, director of the tumor clinic at Northwestern University Medical School. In 1937, Wolfer arranged for Caisse to treat thirty terminal cancer patients under the direction of five doctors. She

commuted from Canada across the border to Chicago, carrying her bottles of freshly prepared herbal brew.

After supervising eighteen months of Essiac therapy, the Chicago doctors concluded that the herbal mixture “*prolonged life, shrank tumors, and relieved pain.*” So effective were her free treatments that in 1938 her supporters gathered 55,000 signatures for a petition to present to the Ontario legislature to make Essiac Tea an official cancer treatment. She fell three votes short.

Caisse was not aware of the vast influence of Big Pharma and Big Medicine, which were (*and still are*) more interested in making money than in helping people. Essiac was cheap and non-toxic. It could cut into the huge lucrative profits from the “Big 3.” Caisse constantly played cat and mouse with Canadian federal health officials. They demanded clinical tests, but she stubbornly refused to divulge her formula unless she got official assurance that Essiac would not be lost to the people who needed it, since her primary loyalty was to the people who had come to depend on her. The authorities couldn’t give her the assurance she needed, thus she never divulged the formula.

Even the world’s largest cancer research center, Memorial Sloan-Kettering Cancer Center in New York, could not convince Caisse to divulge her formula. A steady stream of doctors visited her in Canada, observing case files and talking to patients, pressuring her to sell them the formula. She was offered huge sums of money to commercialize Essiac, but refused all but minimal amounts of payment for her services. Not surprisingly, Caisse was heavily persecuted and continually threatened with arrest. Finally, fearing prosecution, she closed the clinic in 1942 and went into seclusion.

Rene Caisse died in 1978, at the age of ninety. Before she died, she signed over the rights to the Essiac formula to two parties: Resperin Corporation of Toronto, to test, manufacture and distribute it, and to a long-trusted friend, Dr. Charles Bruschi of Cambridge, Massachusetts, Director of the prestigious Bruschi Clinic and personal physician to former President John F. Kennedy. Dr. Bruschi himself had cancer of the lower bowel, which completely disappeared after Essiac treatments. Bruschi once stated “*I know*

Essiac has curing potential. It can lessen the condition of the individual, control it, and it can cure it.”

On a side note, Dr. Frederick Banting, the co-discoverer of insulin, became interested in Essiac and even offered Nurse Caisse research facilities to test it. He believed that Essiac must somehow stimulate the pancreas into functioning properly. Remember the trophoblast theory of cancer and the pancreatic enzymes?

BEWARE: Due to the increasing popularity of Essiac, numerous “entrepreneurs” on the internet have jumped on the Essiac bandwagon with their own four, six, or eight-herb products. But Caisse never published her formula. The only person she trusted to help her make Essiac was her best friend, Mary McPherson, who knew the formula by heart. Dr. Gary Glum had also learned the formula from one of Caisse’s patients and published it in 1988. According to Dr. Glum, the original Indian formula contained only four herbs. Every herbal formula has its own synergy and therefore creates a specific effect. **Essiac works.** Why change it by adding more herbs that may diminish its proven healing powers?

Anyone can verify, with a computer, the correct Essiac formula that Caisse entrusted to Mary McPherson. Simply visit “The Rene M. Caisse Memorial Room” at www.octagonalhouse.com and click on the “Essiac” hotlink. There you will see this formula:

- 6 1/2 cups cut up Burdock Root (*cut into pea-sized pieces*)
 - For centuries, burdock root has been regarded as an effective blood purifier that neutralizes and eliminates poisons from the body. Studies have shown anti-tumor activity in burdock. Japanese scientists have isolated an anti-mutation property in burdock, which they call the “B factor.” A memo from the WHO revealed that burdock is effective against HIV.
- 1 pound powdered Sheep Sorrel
 - Caisse isolated sheep sorrel leaves as the main essiac herb that dissolves cancerous tumors. Sheep sorrel contains aloe emodin, a natural substance that shows significant anti-leukemic activity. Sheep sorrel

- contains antioxidants, is diuretic and has been used to check hemorrhages.
- 1/4 cup powdered Slippery Elm Bark
 - Slippery elm is well-known for its soothing properties. It reduces inflammations such as sore throat, diarrhea, and urinary problems. It contains beta-sitosterol, which has shown anti-cancer activity.
 - 1 ounce powdered Turkish Rhubarb Root
 - “Turkey Rhubarb” has been shown to have anti-tumor activity. It is diuretic, anti-inflammatory, and anti-bacterial.

The preparation of Essiac Tea is as important as the formula itself. Essiac is a decoction, not an infusion. An infusion is what people do when they put a tea bag in a cup of hot water. Generally speaking, an infusion tends to extract vitamins and volatile oils. A decoction is used to extract minerals, etc. from roots, bark or seeds by boiling for several minutes and then allowing the herbs to steep for several hours. Entrepreneurs often sell Essiac imitations in tincture form (*herbs in alcohol*) or in gelatin capsules; **neither form is Essiac** because Essiac is a decoction.

1. Using a stainless steel pot and lid, boil 1/2 cup of herb mix in one gallon of pure, unchlorinated water for ten minutes.
2. Turn off heat and allow herbs to steep for twelve hours.
3. Heat up tea to steaming, but not boiling. Allow herbs to settle a couple minutes.
4. Strain off hot liquid into sterilized canning jars. The remaining pulp can be used for healing poultices.
5. Refrigerate tea. For long-term storage use the boiling water bath canning method and store in a cool, dark, dry place.

For preventive purposes, people take one to two ounces per day diluted with about 1/2 cup of hot water. Be sure to drink plenty of water (*at least half a gallon*) each day to help flush the toxins out of your system. If you have cancer, you should take Essiac three times a day. Do not eat or drink anything (*except water*) one hour before to one hour after taking Essiac. Essiac tea is compatible with other alternative cancer treatments, except for Cancell. **Do not take Protocol™ with Essiac tea**, since they tend to neutralize each other.

Check out <http://theherbs.info> for more info on Essiac Tea, including numerous quality vendors.

GERSON THERAPY

Gerson Therapy is a metabolic therapy which uses a special diet, along with supplements, and coffee enemas. The first two editions of this book did not contain details on this cancer treatment, but due to additional research over the past couple of years, I now believe that the Gerson Therapy is one of the best cancer treatments available. It is undoubtedly the most basic, the best recognized, the most complete, and the longest existing effective cancer treatment available today. It is also very rigorous, and requires that patients adhere to a very strict protocol in order to succeed.

Dr. Max Gerson was a German refugee physician who came to New York and preached a gospel of pure organic food and farming. Prior to immigrating to the USA, while he was a resident physician in Germany, Gerson was able to cure his own migraine headaches through changing his diet. The foods that Gerson was sensitive to included many of the staples of young German medical students (*creamy fish dishes, spicy sausages, alcohol, salt, and fatty meats*). Later, when he entered private practice, he began prescribing his migraine diet to his own patients and reported great success.

One migraine patient reported that his lupus vulgaris (*skin tuberculosis*) had also cleared up on Gerson's migraine diet. Gerson began to use his dietary approach to cure other lupus sufferers. He even began to have success with treating tuberculosis. A prominent pulmonary surgeon, Dr. Ferdinand Sauerbruch, heard about Gerson's successes and invited him to conduct a clinical trial of his therapy at Sauerbruch's Munich tuberculosis ward.

Gerson's dietary regime was applied to four hundred fifty end-stage tuberculosis patients. At that time, tuberculosis was considered to be "incurable." After the trial, it was reported that four hundred forty-six patients completely recovered. For those of you who like percentages, that's a 99.1% cure rate on terminal patients!

Gerson's dietary therapy quickly became well known in Europe, and it was adopted by many as standard treatment for immune system disorders of all kinds, including tuberculosis. Advocates of the therapy claim many Swiss mountain tuberculosis sanatoria were put out of business by Gerson's discoveries, and are now ski resorts, including Davos, Gstaad and others.

In 1928, Gerson received a call from a woman who was told she had incurable bile-duct cancer. According to Gerson, she begged him to treat her with his migraine and tuberculosis therapy, accepting that he knew nothing about cancer and could not predict the outcome of his treatment. Gerson claimed she totally recovered on his therapy, as did two friends of hers who had cancer. Of course, with any successful cancer treatment, there will be "hit men" from the Medical Establishment that attempt to slander and criticize the provider, and Gerson was no exception.

He embarked on a clinical trial of his therapy that would attempt to silence his critics once and for all. He decided to treat only patients who had been declared "terminal" in writing by at least two specialists, so there was no doubt as to the disease or its prognosis. On April 1, 1933, just six weeks before he was to present the results of his study, Adolf Hitler began arresting Jews and sending them to concentration camps. Gerson literally escaped arrest by accident, and left Germany for good, leaving behind the results of his study.

As a German Jew, Gerson was forced to flee Germany with his family in 1933, first to Vienna and then to Ville d'Avray (*near Paris*) and London. He settled in New York City in 1936. Once in the USA, Gerson began applying his dietary therapy to advanced cancer patients. In 1946, along with five of his cured cancer patients, he testified in court that he had discovered a cure for cancer. On the evening of July 3, 1946 it was announced publicly on radio that Gerson had discovered a cure for cancer. Not surprisingly, this public declaration was condemned by his "holier-than-thou" colleagues in the New York State Medical Society.

After several more years of successful medical practice, but under increased scrutiny, Dr. Max Gerson died suddenly on March 8, 1959 under mysterious circumstances. Charlotte Gerson, his youngest

daughter and founder of the Gerson Institute, stated: *“My father, aged 78, was in perfectly good health when, from one day to the next, he felt awful. They tested his blood and found a high level of arsenic.”* When asked if she had called the police, she replied: *“No, we had our suspicions, but knew from experience that justice would not be done.”*

According to Dr. Gerson, cancer is the result of two things: **deficiency and toxicity**. Our body simply doesn't get enough nutrition on the modern diet and is exposed to too many chemicals and toxins and as a result develops cancer. Gerson believed that cancer could be reversed if the patient would cleanse the body from these toxins and restore the immune system with proper nutrition. As a result of this belief, the underlying foundation of Gerson Therapy is detoxification and rejuvenation of the body, based upon the principle of flooding the body with micronutrients from salt-free, fat-free, organic, vegetarian food, including 13 fresh-pressed fruit and vegetable juices daily. This treatment utilizes a “whole body” approach, unlike toxic conventional treatments, since Gerson did not believe that treating only the localized area of concentrated cancer cells was a good idea.

Pancreatic enzymes are vitally important to the Gerson Therapy. Here's why: Before the body can deteriorate into cancer, all the body's defense systems have to be depressed and out of balance. If your pancreas is working properly and if you have adequate pancreatic enzymes, you cannot develop cancer. As I mentioned in the chapter on nutrition, pancreatic enzymes, specifically trypsin and chymotrypsin, dissolve the protective protein coating which covers malignant tissue and makes it impossible for the body's natural immune system to recognize the cancer cells as foreign. So, in a body with cancer, pancreatic enzymes must be supplemented.

Correlated to its adherence to pancreatic enzymes, Gerson Therapy also holds tightly to the axiom that excess protein in the diet is carcinogenic. As a former competitive bodybuilder, I used to follow the advice of doctors and nutritionists and consume massive amounts of animal protein on a daily basis. For instance, I would typically have 8 small meals of at least 30 grams of protein, comprised primarily of chicken, fish, and eggs. I mistakenly believed

that meat, fish, eggs, and milk products had complete proteins (*containing the 8 essential amino acids not produced in the body*), while all vegetable proteins were incomplete proteins.

However, research at the Karolinska Institute in Sweden and the Max Plank Institute in Germany has shown that most vegetables, fruits, seeds, nuts, and grains are excellent sources of complete proteins. In fact, their proteins are easier to assimilate than those of meat, and they are non-toxic. Whereas the Karolinska researchers also discovered that when meat was heated to 212° (*regardless of whether it was boiled, broiled, fried or baked*) the protein in the meat changed into toxic, cancer-causing amides. Research done at the University of California at Irvine showed that children who eat as few as three hotdogs a week had 10 to 12 times higher incidence of leukemia and brain tumors. In a vast study conducted in China by T. Colin Campbell, PhD., it was found that the groups of people who ate the most animal protein had, by far, the most heart disease and cancer.

One of the reasons to avoid excess protein is that the body stores very little protein. Our kidneys and liver are responsible for getting rid of the protein, so the more protein we eat, the harder the kidneys and liver have to work to excrete it. Gerson was also very interested in treating the liver, since he believed that the liver was actually the most important organ in the body due to the fact that it is the filtration system for detoxification. As a matter of fact, he saw a parallel between the deterioration of the liver and the growth and progression of the cancer!

Due to his concern for liver problems, he was opposed to fasting and instead, his regimen called for fresh pressed juice every waking hour of the day. By drinking the juice, patients receive an enormous flooding of nutrients, minerals, enzymes, and vitamins which start to flush out the kidneys. The nutrients go into the tissues, into the cells and force out the poisons, and all those poisons are released into the blood stream. The liver filters them out. You have to help the liver get rid of them, and there is only one way to do this – by opening the bile ducts. Gerson accomplished this task with his much maligned and ridiculed coffee enemas. Even today, half a century

after his death, he remains a favorite “whipping boy” of the Cancer Industry.

Until recently, I was unaware of the fact that sodium stimulates tumor growth. Also, it’s a fact that all processed foods contain reduced potassium and increased sodium. So, with the Gerson Therapy’s focus on high potassium and low sodium (*in the same ratio which can be found in fresh live foods*), it’s no wonder that all processed foods are forbidden. With the Gerson Therapy, most fats are strictly prohibited since they stimulate tumor growth. However, Gerson was aware that cancer patients do need a certain amount of essential fatty acids. He became aware of the work of Dr. Johanna Budwig in Germany who showed that flaxseed oil, which helps to stimulate the immune system, is well tolerated by cancer patients. As a general rule, with the exception of coconut oil, you should never cook with oils, since their chemical nature changes (*deteriorates*), acrylamides are formed, and they cause health problems. So the flaxseed oil must only be used raw and cold.

The Gerson Institute was established in 1977 in San Diego by Charlotte Gerson, solely for the purpose of educating the public and cancer patients about the Gerson Therapy. Is it any surprise that the corrupt US government does not support the Gerson Therapy? As a matter of fact, it is illegal in the USA to treat and cure patients with the Gerson Therapy. In response, Charlotte opened a hospital in Tijuana, Mexico. You can visit the Gerson Institute’s website (www.Gerson.org) for more information on the Gerson Therapy.

An excellent book on the Gerson Therapy was written by Max Gerson himself and is entitled [A Cancer Therapy: Results of Fifty Cases and the Cure of Advanced Cancer](#). It’s available on Amazon.

INTRAVENOUS VITAMIN C

Vitamin C is essential to the formation of collagen, the protein “cement” that holds our cells together. Think of cells like bricks in a wall. The strength of a brick wall is not really in the bricks, but it is in the cement between the bricks. Collagen is this cement that holds

your cells together. If collagen is abundant and strong, your cells hold together well. If cells stick together, tumors have a tough time spreading through them. Strong collagen can thereby arrest the spread of cancer.

Cancer cells secrete an enzyme called “hyaluronidase,” which helps them eat away at collagen and break out into the rest of the body. This is described in great detail in the book [Hyaluronidase and Cancer](#) by Dr. Ewan Cameron, M.D. In order to prevent the hyaluronidase enzymes from dissolving collagen, Dr. Matthias Rath advocates increased consumption of the amino acids L-Lysine and L-Proline and EGCG (*a polyphenol catechin found in Green Tea*) as companion nutrients with vitamin C. Laboratory trials have demonstrated the effectiveness of the combination of these 4 substances at blocking the hyaluronidase enzymes.

Vitamin C is required for our immune systems to generate and mobilize the leukocytes that fight cancer. Maximum immune function is vital if we want the body to fend off cancer. As I have mentioned, orthodox treatments like chemo and radiation destroy the immune system. In a 1995 publication, several physicians presented evidence that ascorbic acid (*and its salts*) are **preferentially toxic** to cancerous cells. In other words, **vitamin C kills cancer cells while leaving normal cells alone.**

So, it appears that vitamin C not only strengthens the immune system, but it also preferentially kills cancer cells. This is fascinating. Preferential toxicity occurred *in vitro* in multiple tumor cell types. They also presented data suggesting that plasma concentrations of ascorbate required for killing tumor cells is achievable in humans. (Riordan NH, Riordan HD, Meng X, Li Y, Jackson JA. “*Intravenous ascorbate as a tumor cytotoxic chemotherapeutic agent,*” *Medical Hypotheses*, 1995).

And if that’s not enough reason to take vitamin C, then check this out: vitamin C assists with oxygen transport and is a powerful antioxidant. According to Dr. David Gregg, “*Basically, the vitamin C is transported to the lungs in the blood where it is oxidized. It then is transported to the cells where it diffuses to the mitochondria and*

delivers its oxidation potential, powering the respiratory chain, and cycle repeats.”

Dr. Gregg theorizes that the primary effect of the large doses of vitamin C is to serve as an oxygen transport molecule in the blood, substituting for hemoglobin (*which cannot provide oxygen to cancer cells*). He recommends a combination of vitamin C and vitamin E, since vitamin C transports oxygen in the cytoplasm (*water phase*) and vitamin E carries oxygen through the cell walls (*oil phase*).

Dr. K.N. Prasad’s theory is that normal cells require only a minute, precisely controlled amount of antioxidants in order to function. They reject any excess. But among other defects, malignant cells have lost the capacity to regulate their uptake of antioxidants such as vitamin C and E. Antioxidants can therefore accumulate in cancer tissue in levels that can lead to the breakdown and death of malignant cells (Prasad KN. “*Antioxidants in cancer care: when and how to use them as an adjunct standard and experimental therapies*” Expert Rev Anticancer Therapy, 12/2003, 903-15).

Doctors A. Goth and I. Littmann in a paper entitled “Ascorbic Acid Content in Human Cancer Tissue” (*Cancer Research*, Vol. 8, 1948) described how cancer most frequently originates in organs with ascorbic acid (vitamin C) levels below 4.5 mg% and rarely grows in organs with higher levels. Do you see the connection? Remember how hydrogen peroxide is poured on wounds to kill germs? Research published in September of 2005 by Dr. Mark Levine has shown that high-dose intravenous vitamin C can increase hydrogen peroxide (H_2O_2) levels within cancer cells and eradicate the cancer cells. www.pnas.org/cgi/content/abstract/102/38/13604

The awareness that vitamin C is useful in the treatment of cancer is largely attributable to the pioneering work of Dr. Linus Pauling, In 1976, he and a Scottish surgeon, Dr. Ewan Cameron, reported that patients treated with high doses of vitamin C had survived three to four times longer than similar patients who did not receive vitamin C supplements. The study was conducted during the early 1970s at the Vale of Leven Hospital in Loch Lomonside, Scotland. Dr Cameron treated one hundred advanced cancer patients with ten thousand milligrams of vitamin C per day.

The progress of these patients was then compared with that of one thousand patients (of other doctors) who had NOT received vitamin C. The findings were published in 1976, with Pauling as co-author, in the Proceedings of the National Academy of Sciences. The 1976 report emphasized that all of the patients had previously received conventional treatment (i.e. the “Big 3”). The vitamin C patients were reported to have a mean survival time of three hundred days longer than the other patients, with an improved quality of life. Their experiments proved conclusively that vitamin C is a superior treatment for terminal patients versus chemotherapy.

The Cancer Industry was furious with Pauling and Cameron. There was no way that these two “quacks” and their vitamin therapy were going to cut into the chemotherapy **cash cow!** There was too much at stake for the Cancer Industry. Shareholders needed huge profits! The Boards of Directors needed 7-figure salaries and golden parachutes! Children needed Ivy League educations! So, following standard operating procedure, there was a “smear” campaign to discredit Dr. Pauling. The truth about what Cameron and Pauling had discovered had to be crushed. **But they had a big problem:** the results of these tests had already been published in Cameron and Pauling’s book, Cancer and Vitamin C.

So, the Cancer Industry and their cronies quickly went to work. They conducted three bogus studies with “predetermined” outcomes, all of which contradicted the findings of Cameron and Pauling. Here’s their dirty little secret: in all three studies, they failed to follow the selection protocol, failed to follow the treatment protocol, and performed some fancy linguistic and statistical tricks. Is it any wonder that, in the end, the Cancer Industry proudly proclaimed that Cameron and Pauling were quacks and that their research was not to be trusted? However, four totally independent studies used the same treatment protocol and got the same results as Pauling and Cameron. The three bogus studies did **not** use the same treatment protocol and did **not** get the same results.

According to Webster Kehr, *“The Mayo Clinic studies were done specifically to discredit the work of two-time Nobel Prize winner Linus Pauling. Linus Pauling was getting people to believe there was “scientific evidence” for Vitamin C, and he had to be stopped. It is*

totally unacceptable (from the viewpoint of Big Pharma) for our corrupt government to allow **any** scientific evidence for alternative treatments of cancer. Because there **was** scientific evidence for Vitamin C, and because they could not shut-up a two-time Nobel Prize winner, there had to be bogus studies designed to divert people's attention from the valid studies. Once the bogus studies were finished, the media could then take over the suppression of truth and immediately start blacklisting the valid studies." www.cancertutor.com

Dr. Abram Hoffer is commonly credited with being the principal founder of the alternative health movement using nutritional (orthomolecular) treatment methods. During his practice, extending more than forty years, he treated thousands of patients primarily for cancer and schizophrenia, authoring many journal articles and books. As part of this effort, he collaborated with Dr. Linus Pauling in his focus on utilizing vitamin C (with other nutrients) for the treatment of cancer.

How much vitamin C should you take? Studies have shown that in order to pump adequate levels of vitamin C into the cancerous cells, **intravenous** vitamin C (IVC) is the best protocol. Of course, you will need to be under the supervision of a doctor – you don't want to try to give yourself an IV of vitamin C! The key is to be consistent with large quantities of vitamin C. It needs to be taken several times **every day**.

The Bright Spot for Health Clinic, a large research clinic, in Wichita, Kansas, offers IVC therapy. Their website is www.brightspot.org and their phone number is 316-682-3100. For an excellent video on IVC therapy, visit www.internetwks.com/cathcart/Cathcart2low.rm. Dr. Cameron's article entitled "Protocol for the Intravenous Use of Vitamin C in the Treatment of Cancer" is available at this website: www.doctoryourself.com/cameron.html.

Despite voluminous data supporting a positive role of vitamin C in the treatment of cancer, the Cancer Industry continues to suppress the truth. In the words of Dr. Louis Lasagna of the University of Rochester Medical School, "It seems indefensible not to at least try substantial doses of vitamin C in these (terminal cancer) patients."

OLEANDER

In the early 1960s, a Turkish doctor named H. Zima Ozel discovered a group of rural Turkish villagers who were amazingly healthy and disease free, compared to other similar villagers. When he investigated further, he found that the healthy villagers were all taking a folk remedy that had been used in the Middle East for over two millennia. This remedy was based on a common plant referred to in the Bible as the “desert Rose,” or more commonly to most of us, the oleander plant. This plant is a highly toxic plant when ingested raw, but the source of a wonderful remedy when properly prepared.

The term “oleander” refers to two plant species, *Nerium oleander* (common oleander) and *Thevetia peruviana* (yellow oleander). Both species contain chemicals called “cardiac glycosides” that have effects similar to the heart drug digoxin, which can be toxic. However, virtually every substance a person puts in their mouth is toxic if taken in high enough doses. Sugar is toxic if you eat too much of it. So is processed salt.

Let’s get back to our oleander history lesson. After his discovery, Dr. Ozel applied for a patent. In his patent application, he mentioned several case studies as well as one study which included 494 patients. Here is a quote from the patent application: *“Between January 1981 and December, 1985, 494 patients with inoperable, advanced malignant diseases were tested with NOI (injections of oleander). All malignancy had previously been diagnosed at various specialized medical institutions in Turkey and abroad. The malignancies of these patients had progressed to a state where they could no longer benefit from existing anti-tumor therapies. These 494 cases included examples of almost all varieties of malignancies and were found in various organs.”*

These four hundred ninety-four patients experienced improved quality of life as well as regression of cancer, while reporting no notable side effects. The best results were said to be in prostate, lung, and brain cancers. Even sarcomas showed stabilization. Could it be that the oleander plant, when prepared in the correct manner

and administered correctly, is **preferentially toxic** to cancer cells? If you remember, it is widely accepted that there are numerous natural substances that are toxic to cancer cells, but harmless to normal cells. In fact, there are many natural substances that fit into this category. For example, purple concord grapes have more than a dozen such substances. One of the goals of alternative cancer researchers is to find substances that are toxic enough to kill cancer cells, but not so toxic that they kill normal cells.

This is where oleander comes into the equation. As I have mentioned, oleander is toxic. **It should always be handled with gloves.** There are many other safety warnings when dealing with the oleander plant. Rest assured, **it is very toxic...to both** cancer cells and normal cells. But when we are able to dilute it in the appropriate proportions, then it is still toxic to cancer cells but harmless to normal cells! This level of dilution and toxicity is now well-known.

Tony Isaacs has written what is, by far, the **best** ebook on oleander, entitled Cancer's Natural Enemy. If you plan on using this protocol, please visit www.rose-laurel.com and purchase his ebook. It is very inexpensive and very informative. In an email from Mr. Isaacs to Webster Kehr, he stated, *“I have heard nothing but good reports from those who have been using oleander soup or the oleander extract available now at Takesun do Brasil. Cancers gone, cancers in remission, tumors shrinking, etc. And the reports out of South Africa, where the government has embraced the mixture of oleander plus agaricus blazei murrill, pau de arco and cat's claw extract combo (80% oleander) is that every single patient is doing well. HIV-AIDS halted and stabilized or even apparently reversed. And not one single report to date of a serious side effect or adverse reaction to oleander extract. It is a good feeling to be able to help someone.”*

There is a chapter in the ebook titled “The Anti-Cancer and Disease Protocol,” which details an extremely effective program for anyone who wants to have the maximum chances of beating cancer and disease. This chapter includes information on cleaning and detoxification, diet, nutrition, building a strong immune system, and cancer-fighting supplements.

The simple and honest truth is that oleander works incredibly well.

The remedy can be used alone, with other immune-boosting supplements, and even with prescription medications and conventional treatments such as the “Big 3.” From testimonials that I have read, I have learned that combining oleander with chemo or radiation will either eliminate or greatly lessen virtually all of the deleterious side effects, including hair loss!

There are two ways to take the oleander cancer treatment. The highly preferred way is to take it as a capsule or extract, since they have already been mixed to be at a safe level for humans, but are at a toxic level for cancer cells. You can also purchase oleander capsules and extract at www.sutherlandiaopc.com.

The second way to take this product is to make the “oleander soup” yourself. **BEWARE:** If you choose to make your own soup, even though the dilution factor is now well established, you should read and re-read Cancer’s Natural Enemy several times **before** you begin processing a real oleander plant, since the oleander plant is toxic. Even a small amount of the raw material, if ingested, **can cause death.**

OZONE THERAPY

The body can survive weeks without food, days without water, but only minutes without oxygen. Each cell of the body requires an incessant supply of oxygen to feed the chemical reactions that generate energy, detoxify waste products, and sustain production of the structural cell components. Remember Otto Warburg’s Nobel Prize? It was based on his research of cytochromes in cellular respiration. He firmly believed that all degenerative diseases are a result of **lack of oxygen** at the cellular level. He is often quoted as saying, “*Cancer has only **one prime cause**. The prime cause of cancer is the replacement of normal oxygen respiration of body cells by an anaerobic cell respiration.*”

Dr. Warburg pointed out that any substance that deprived a cell of oxygen was a carcinogen. In 1966, he stated that it was useless to

look for new carcinogens, because the end result of each one was the same, cellular deprivation of oxygen. He further stated that the incessant search for new carcinogens was counter-productive because it obscured the prime cause, lack of oxygen, and therefore prevented appropriate treatment. Once the level of oxygen available to a cell drops below 40% of normal, the cell is forced to switch to an inferior method of energy production, called fermentation. The cell then loses its governor on replication because it is self-stimulating with growth factors (such as IGF) in response to **hypoxia**.

What exactly is ozone? Ozone was discovered by Fridereich Schonbein in 1840. It is oxygen in a “*menage á trios*,” an activated form of oxygen with three atoms. (Oxygen is O_2 whereas ozone is O_3 .) Ozone therapy accelerates the metabolism of oxygen and stimulates the release of oxygen atoms from the bloodstream. Over a period of twenty to thirty minutes, ozone breaks down into two atoms of regular oxygen by giving up one atom of singlet oxygen leaving a single, reactive oxygen atom. It is this oxygen singlet that does most of the work for a cancer patient. It alkalizes the cells, kills cancer cells, binds to hydrogen, and destroys bacteria, fungi, and other pathogens. To destroy cancer, what is required is the introduction of massive amounts of singlet oxygen at the cellular level.

Medical ozone is made from pure oxygen mixed with electrical energy (using an ozone generator) to form ozone. **Ozone is germicidal, bactericidal, and fungicidal. What is the difference between ozone therapy and oxygen therapy?** The difference is that ozone (O_3) has one extra molecule of oxygen (oxygen singlet) that doesn't want to be there, so it breaks off and tries to join other elements like carbon monoxide (which is deadly) and changes it into carbon dioxide (which the body knows what to do with). That extra oxygen singlet also oxidizes (destroys) 99% of all toxins.

Our bodies love oxygen, so that extra oxygen singlet is gobbled up by everything that is good in the body and destroys all that is bad, because pathogens like bacteria, viruses, molds, fungus, parasites, and cancer **hate** ozone. After the extra singlet is gone, oxygen (O_2)

is left. Oxygen doesn't destroy toxins, so **ozone therapy is much more effective as an advanced cancer treatment.**

So, how do you get the ozone into the body? One excellent method is via ozone IV (*injecting a fluid saturated with ozone into the blood*) and another effective method is via infusion bottle (*removing part of the blood from the body, saturating this blood with ozone, then putting this oxygen rich blood back into the body*). Perhaps the most effective ozone therapy of all is the ozone sauna, with the dual application of ozone and hyperthermia. Direct injection is powerful, but not nearly as readily available as the ozone sauna, which virtually any person can apply at home to themselves and their family with excellent success.

It is the energy of ozone that does the work. That is why ozone has always been considered an electrotherapy. As Tesla said, oxygen is just the carrier to get electricity into the body. Millions of people in Europe have been treated using ozone therapy, while in the USA and Canada, the treatment remains illegal unless performed by a naturopath (*in Canada*) or a doctor in one of the fourteen “*health freedom*” states. However, it is perfectly legal for any person to treat themselves, since ozone is not a contraband substance.

Ozone stimulates the production of cytokines. Cytokines are “*messenger cells*” such as interferons and interleukins, which “*set off a cascade reaction of positive changes throughout the immune system*” (R. Viebahn Haensler, *The Use of Ozone in Medicine - 3rd English Edition*, page 132). The increased availability of oxygen in turn supports the metabolic and detoxification functions of all organs of the body. As I have already mentioned, unlike the majority of bacteria, fungi, and viruses, God has miraculously designed our bodies to protect themselves against single reactive oxygen. The protection is provided through the cellular production of defensive enzymes (*superoxide dismutase, glutathione peroxidase, catalase and reductase*). These enzymes require a good deal of energy to make, but the weak cancer cell doesn't have the energy to make them. Therein lies its vulnerability to singlet oxygen.

Thus ozone does not harm healthy cells, but has “*highly pronounced bactericidal, fungicidal and virostatic properties and is thus widely*

used in disinfecting wounds, as well as bacterially and virally produced diseases” (R. Viebahn Haensler, The Use of Ozone in Medicine - 3rd English Edition, page 132). This property of ozone is called “selective toxicity” and the end result is that ozone therapy kills harmful bacteria, viruses, fungi, and yeasts but leaves the healthy cells alone.

In the August 22, 1980 edition of the scientific journal SCIENCE, Vol. 209, there was a report written by several M.D.s (Sweet, Kao, Hagar, and Lee) entitled: “**Ozone Selectively Inhibits Growth of Human Cancer Cells.**” It stated, “The growth of human cancer cells from lung, breast and uterine cancers was selectively inhibited in a dose-dependent manner by ozone at 0.3 to 0.8 parts per million of ozone in ambient air during eight days of culture. Human lung diploid fibroblasts served as non-cancerous control cells. The presence of ozone at 0.3 to 0.5 parts per million inhibited cancer cell growth at 40 and 60% respectively. The non-cancerous lung cells were unaffected at these levels. **Exposure to ozone at 0.8 parts per million inhibited cancer cell growth more than 90% and control cell growth less than 50%.** Evidently the mechanisms for defense against ozone damage are impaired in human cancer cells.” The evidence from these doctors’ research is irrefutable.

Both the EPA and the FDA acknowledge ozone’s ability to oxidize over 99.99% of all waterborne pathogens. Ozone has been used for human health since 1860, and is presently employed in over 16 countries. Its widest use is in Germany, where over 7,000 doctors have treated more than 12,000,000 people since World War II. However, as you might expect, the FDA has not allowed testing of ozone, and has actively persecuted physicians who use it.

According to Dr. Hans Nieper, who used ozone in Hanover, Germany, “You wouldn’t believe how many FDA officials or relatives or acquaintances of FDA officials come to see me as patients in Hanover. You wouldn’t believe this, or directors of the AMA, or ACA, or the presidents of orthodox cancer institutes. That’s the fact.” Also, many celebrities and executives traveled to Germany to be treated by Dr. Nieper, including Sir Anthony Quinn, William Holden, John Wayne, Yul Brynner, and Princess Caroline of Monaco.

One clinic that uses ozone therapy is Dr. Frank Schallenberger's Nevada Center for Alternative and Anti-Aging Medicine, located in Carson City, Nevada. The website is www.antiagingmedicine.com. Also, if you decide to use ozone therapy, you should contact Dr. Saul Pressman, whom I call "the Ozone Guru." He moderates the following email group: ozonetherapy@yahoo.com. Just join the group and email Dr. Pressman with any questions. He is incredibly responsive and always willing to help. He also assisted me with the information in this section.

PROTOCEL™ (ENTELEV™/CANCELL™)

Entelev™ was originally conceived and developed by Jim Sheridan of Michigan, who was a chemist, attorney, and devout Christian. He began working on his formula back in the 1930s and continued perfecting it until the 1990s. Initially, Sheridan called his product by the scientific name KC49. However since he believed that the basic idea of his formula was a gift from God, Sheridan eventually renamed his formula "Entelev," which was taken from the Greek word "entelechy" meaning "that part of man known only to God." It was eventually renamed Cancell and is currently resold as Protocol™.

In this chapter, I will use the term Protocol™ to represent the line of products which includes both Entelev™ and Cancell™. Even as a young man, Jim was a devout Christian and constantly prayed for God to direct his steps and give him the ability to use his intellect for the good of all mankind, and even had early aspirations to find a cure for cancer. Little did he know that his prayers would be answered and his dreams would be realized.

A devout Christian, Sheridan credited his formula in part to his advanced studies in chemistry and in part to a dream which he believed came from God. He refused any financial compensation, claiming Entelev™ was "a gift from God to all his children." Mr. Sheridan spent his whole life researching, improving the formula, and trying to bring it to the suffering people of the world. When he could not get his formula approved, he gave the product away for **free**. Such altruism is rarely seen.

What is it and how does it work? Protocol™ is the world's most effective free radical scavenger (antioxidant). It is designed to specifically target anaerobic cells in the body by interfering with the production of ATP energy in **all of the cells** in your body, which in turn lowers the voltage of each cell by between 10% and 20%. The reason that I say that Protocol™ targets anaerobic (i.e. cancer) cells is simple. All the cells of our body have a specific voltage, or electrical charge.

Healthy cells have a very high voltage, while unhealthy (*anaerobic*) cells have a very low voltage, due to the fact that they produce energy via fermentation. **The slight reduction in voltage causes anaerobic cancer cells to shift downward to a point below the minimum that they need to remain intact, thus the cells basically self-destruct and break apart, or “lyse” into harmless proteins.** The healthy cells of the body typically have such a high normal voltage that the slight reduction in voltage caused by Protocol™ does not harm them.

Let's back up a bit, shall we? The process by which our cells produce and distribute energy is called cellular “respiration” or “metabolism.” Most people think of respiration as breathing, but every living cell in the body is technically involved in respiration, because the term “respiration” also refers to a chemical reaction in a cell which involves oxygen and which provides energy to the cell. Remember Dr. Otto Warburg and his findings that cancer cells produce energy via anaerobic respiration?

Crucial to the respiratory system of each cell in our body is a process called “oxidation reduction,” also referred to as the “redox system.” According to Jim Sheridan, *“This system can be thought of as a ladder, with a different chemical reaction taking place on each step...the bottom steps of the ladder involve relatively simple or ‘primitive’ respiratory reactions. The primitive reactions at the bottom of the ladder take place without oxygen being present. The higher respiratory reactions require the presence of oxygen. Generally, for reduction you move down the ladder. For oxidation you move up the ladder.”*

The scientific basis for Protocel™ is to place a **long-term** drain of power on cancer cells. Now, cells undergo short-term drains of power all the time. Back in the 1990s, I was a competitive bodybuilder. Working out with weights causes short-term drains of power to the cells, then the cells nicely recover. But when a cell undergoes a long-term drain of power, despite the fact that the cell is overloaded, respiration will continue, but the balance of the respiration system will eventually be affected. For instance, smoking cigarettes causes a long-term drain of power to the cells in the lungs. This type of condition is called a chronic condition in which the cells work constantly and never rest.

A long-term drain of power causes the cell to move slowly down the rungs of the respiratory ladder. As long as there is a drain of power, the cell's movement down the ladder slowly continues. However, when it reaches a point, which is about 85% of the way down from the top of the ladder, the cell does not fall any further down the ladder and the cell remains “*in balance*.” This is the lowest the cell can go on the respiratory ladder and still have significant similarities to a normal cell and is also the highest point on the ladder that the cell has similarities to a primitive cell. Sheridan called this point the “*critical point*” of the respiratory ladder.

The critical point is the dividing line between differentiated (*normal*) cells and primitive cells, and is the point at which a cell turns cancerous. Once pushed down to the critical point, the cell wants to stay in that new steady state at the 15% point on the ladder. The problem with having a cell in steady state at the critical point is that the body doesn't really recognize the cell, thus it does not know how to deal with it. If the cell were still healthy, it would know how to recharge itself. If the cell were further down the ladder, the body would know how to get rid of it through natural processes. But the cancer cell is walking the line, straddling the fence between normal cells and primitive cells.

One of the chemicals which reduce respiration is catechol. The natural catechols have many different oxidation reduction potentials. Protocel™ was designed to take advantage of the fact that the cancer cell is “*straddling the fence*” by acting like a catechol, inhibiting respiration at the critical point, and effectively forcing the

cell to move further down the respiration ladder so it is completely into the primitive stage. Once the cell is entirely in the primitive stage, the body recognizes it and will attack and dispose of it naturally. In some places (*like the brain*) the body will form a crust like membrane around the primitive cells. There will be the tumor but it is dead and enclosed. In other places (*skin cancer*) the body will effectively digest it in a process called **lysis** (*self-digestion*).

But won't a decrease in cellular respiration also damage normal cells? Plain and simply, the answer is **“no.”** Remember, normal cells are working well within their potential to produce energy as they are near the top of the respiration ladder. Since normal cells work at such a high level of the redox system, if their respiration potential is reduced somewhat, it is no real problem for them.

According to James Sheridan, when taking his formula, *“No special diet is required ... However, do not take mega doses of vitamins C and E while taking Enteleiv/Cancell. The chemical make up of these two vitamins shifts the point on the Oxidation-Reduction ladder where Enteleiv/Cancell works. Since Enteleiv/Cancell was designed to hit hardest at the ‘critical point,’ any shift will reduce the effectiveness of Enteleiv/Cancell.”* <http://alternativecancer.us/how.htm#diet>

Based upon the fact that this protocol's success hinges upon pushing cancer cells further down the respiration ladder, it is clear that you should not use this protocol in conjunction with products that are intended to increase the production of cellular energy. **Products to avoid** include co-enzyme Q10, selenium, alpha lipoic acid, creatine, IGF, spirulina, chlorella, and super algae.

REMEMBER: If you choose this treatment, you **MUST** follow the guidelines of which supplements, foods, and other alternative treatments you can combine with Protocol™. Many people report noticeable results in three to five weeks. In about two months, most people see results. I have heard it said that Protocol™ does not actually *“kill”* the cancer cell per se, but rather enables the body to rid itself of the cancer cells via normal means such as lysis. However, after a long conversation with Tanya Harter Pierce, I believe that Protocol™ actually **does** kill the cancer cells. Regardless of the exact cancer cure mechanism, be patient, as this can take a while.

According to Webster Kehr, “If the Protocol treatment becomes less effective over time, there are a couple of possible reasons. First, is there something you are eating (including supplements) or drinking that is interfering with Protocol? Check this very, very carefully... Second, there may be a more complex problem. The reason Protocol may become less effective is because Protocol may not be able to kill the Multiple-Drug Resistant (M.D.R) cancer cells (especially if the patient has been on chemotherapy). If you think this is the reason you should immediately **add** Paw Paw to your treatment. The Paw Paw will not only kill M.D.R. cells, it will also enhance the effectiveness of Protocol in other ways.”

In the 1970s, the National Cancer Institute started funding Dr. Jerry McLaughlin at Purdue University to find botanical substances that had cytotoxic (cancer killing) potential. He tested and screened over 3,500 species of plants, and found that the acetogenin compounds of the Annonaceae family had the most potential. It is these **acetogenins** that he found to drastically reduce the ATP production of the cells’ mitochondria. He worked with the various species of this family, including the Paw Paw and Graviola. Using some very sophisticated chemical modeling techniques, he found and isolated over fifty acetogenins in Paw Paw and twenty-eight in Graviola.

These acetogenins, which are basically long chains of carbon atoms, effectively reduce the growth of blood vessels that nourish cancer cells and also inhibit the growth of M.D.R. cells. Both Paw Paw and Graviola can both be used to enhance the effectiveness of Protocol™ as they both block ATP production, thus reducing the voltage of the cell until it basically falls apart via apoptosis. However, according to Dr. McLaughlin, Paw Paw is much more effective than Graviola. Tests were done under the direction of Dr. McLaughlin on two leading Graviola products, and these test showed that Paw Paw had between twenty-four and fifty times the cytotoxic potency of Graviola.

The combination of Paw Paw or Graviola with Protocol™ is a powerful “cancer-fighting” cocktail. In order to maximize the effectiveness of this cocktail, they should be taken every six hours, on the hour, twenty-four hours a day, seven days a week. As I mentioned earlier in this chapter, It has been theorized that Paw

Paw and Graviola (*like Protocol™*), were not as effective if they were combined with certain antioxidants. Currently, it is still up for debate. To be safe, I recommend against taking Vitamin C and Vitamin E with these products, since these two antioxidants do increase ATP, thus would negate their effectiveness. In 1997, Purdue University reported that Graviola's acetogenins "*not only are effective in killing tumors that have proven **resistant** to anti-cancer agents, but also seem to have a special affinity for such resistant cells.*"

It's important to note that Protocol™ is a trade marked name for the formulas. Protocol 23™ is the trademarked name for Entelev™ and Protocol 50™ is the trade name for Cancell™ The name Protocol™ was developed shortly before Mr. Sheridan's death.

I must give credit to Tanya Harter Pierce for her amazing research on Protocol™. Much of the information in this chapter comes directly from her research, phone conversations, and emails. I cannot say enough good things about her book [Outsmart Your Cancer](#). It was an excellent source of information on the Protocol™ treatment protocol. If you choose to use Protocol™, then you must purchase her book. It is "**required reading**" and is available at the following website: www.outsmartyourcancer.com.

SODIUM BICARBONATE (DR. TULLIO SIMONCINI)

This protocol was not included in the first or second edition of the book, as I was unfamiliar with it. However, despite the fact that I disagree with the underlying premise of the treatment, I must include it in this chapter, since there have been multitudes of cancer patients that have been completely cured using this protocol. Some of this information comes from Vicente Estoque, and I thank him for his research.

Dr. Tullio Simoncini is a Roman doctor who had developed a unique approach to treating cancer: he uses sodium bicarbonate, a

chemical compound with the formula NaHCO_3 . Of course, you may have long forgotten high school chemistry, and you may not be familiar with sodium bicarbonate . . . but I'll bet you've heard of baking soda!

Baking soda is commonly used as an antacid for short-term relief of an upset stomach, to correct acidosis in kidney disorders, to “alkalinize” urine during bladder infections, and to minimize uric acid crystallization during gout treatment. But according to Simoncini, sodium bicarbonate is unstoppably effective when it comes to cancer tissues. Simoncini's baking soda treatment is based on the theory that “cancer is a fungus,” which is also the title of his book. While I disagree with his premise, namely that cancer is a fungus, he certainly has had excellent success with this protocol.

Perhaps the success is due to the fact that baking soda floods the cancer cells with a shockwave of alkalinity and oxygen, thus reversing the hypoxia which is always associated with cancerous tissue. Or perhaps it works because a comparison of cancer tissue with healthy tissue indicates that cancerous tissue always has a much higher concentration of toxic chemicals and pesticides than normal tissue, and sodium bicarbonate possesses the property of absorbing heavy metals (*chelation*), dioxins, and furans. Perhaps it's a combination of the two. **Or perhaps there is a fungal link to cancer.** In any event, regardless of the cancer kill mechanism, there is no doubt that thousands of cancer patients credit Simoncini's sodium bicarbonate treatment with saving their lives.

The most important side effects of this treatment are thirst and weakness, unlike traditional treatments such as chemotherapy. According to Dr. Simoncini, *“Chemotherapy, in fact, destroys everything. It is a given fact that it dramatically exhausts the cells of the marrow and of the blood, thus allowing a greater spreading of the infection. It irreversibly intoxicates the liver, thus preventing it from building new elements of defense, and it mercilessly knock out nerve cells, thus weakening the organism's reactive capabilities and delivering it to the invaders. This is mainly because it is not clear how it affects the colonies, and because by strongly debilitating the organism such intervention makes the invasion of the mycetes faster and more ferocious.”*

Dr. Simoncini believes that the best way to try to eliminate a tumor is to bring it into contact with sodium bicarbonate, as closely as possible, using oral administration for the digestive tract, enemas for the rectum, douching for the vagina and uterus, intravenous injection for the lung and the brain, and inhalation for the upper airways. Breasts, lymph nodes and subcutaneous lumps can be treated with local perfusions. The internal organs can be treated with sodium bicarbonate by locating suitable catheters in the arteries (*of the liver, pancreas, prostate, and limbs*) or in the cavities (*of the pleura or peritoneum*). Simoncini theorizes that the sodium bicarbonate destroys the fungal colonies at the heart of cancerous tumors.

He also has reported on cases of brain tumors (*both primary and metastatic*) that stop growing after therapy with a 5% sodium bicarbonate solution. He also reports success with prostate cancer, intestinal cancer, stomach cancer, bladder cancer, breast cancer, cancer of the spleen, liver cancer, lung cancer, oropharyngeal cancer, peritoneal carcinosis, pancreatic cancer, and other cancers.

According to Dr. Simoncini, this protocol can be self-applied in certain types of cancer (*oral, esophageal, stomach, rectal, intestinal*) if the cancer is limited to the organ and has not metastasized. However, he does recommend the supervision of a doctor in these cases. In all other cases, the assistance of a doctor is mandatory (*to administer the infusions, etc*).

Again, while I disagree with the premise that cancer is a fungus, there are numerous correlations and similarities between the two. There are 400,000 species of fungi, out of which 400 are pathogens. In 1990, Elizabeth Moore-Landecker revealed fungi and their mycotoxins are able to cause genetic variations and mutations. The fact that mycotoxins (*fungus toxins*) can cause cancer is not up for grabs.

In the American Cancer Society Textbook of Clinical Oncology, 2nd ed. 1995, it states “*mycotoxins are genotoxic carcinogens, and exposure begins in utero and in mother’s milk, continuing throughout life; these conditions favor the occurrence of disease.*”

Dr. Doug Kaufman has noted many similarities between cancer and fungus. Let's have a look at some fascinating facts which he points out:

- Both cancer cells and fungi can metabolize nutrients anaerobically (*without oxygen*)
- Both cancer cells and fungi must have sugar in order to survive and will die in the absence of sugar
- Both cancer cells and fungi produce lactic acid
- Both cancer cells and fungi can be impacted by antifungal medicines

In his book, The Germ that Causes Cancer, in total agreement with Dr. Simoncini, Kaufman hypothesizes that cancer is a deep-rooted fungal infection that our immune system fails to recognize. Kaufman also believes that antibiotics, many of which begin as fungi, can contribute to the development of cancer. He hypothesizes that perhaps many cases of cancer are actually misdiagnosed and are in reality fungal infections/overgrowths. Fungal infections not only can be extremely contagious, but they also go hand in hand with leukemia (**every oncologist knows this**). For example, in 1999, Dr. Meinolf Karthaus watched three different children with “leukemia” suddenly go into remission upon receiving a triple antifungal drug cocktail for their secondary fungal infections.

According to Dr. Simoncini, “...my methods have cured people for 20 years. Many of my patients recovered completely from cancer, even in cases where official oncology had given up.” So, what is his **cure rate**? Dr. Simoncini gives the following statistics: “if the fungi are sensitive to the sodium bicarbonate solutions and the tumour size is below 3 cm, the percentage will be around 90%, in terminal cases where the patient is in reasonably good condition it is 50%.”

Dr. Simoncini has a heart that really loves people and his desire is to cure everyone from cancer. His intentions are quite noble – he is a man of honor and integrity. I believe it is fitting to conclude this section of the book with a quote from Dr. Simoncini: “My deep wish is to make this therapy available to all humanity . . . it is my firm hope that soon, the fundamental role of fungi in the development of neoplastic disease is acknowledged, so that it is possible to find, with

the help of all existing forces of the health establishment, those anti-mycotic drugs and those systems of therapy that can quickly defeat, without damage and suffering, a disease that brings so much devastation to humanity.”

Dr. Simoncini can be reached at t.simoncini@alice.it and his website is www.cancerfungus.com.

VITAMIN B₁₇

When dad died back in 1996, I began my cancer journey. The first alternative cancer treatment which I discovered was Vitamin B₁₇, also known as Laetrile. I saw a video of a champion arm wrestler named Jason Vale who had been cured of cancer by eating the seeds from apples and apricots (*which contain vitamin B₁₇*) and read lots of good information on his website. (See page 383 for more information on Jason.) The logic and science of how and why vitamin B₁₇ kills cancer cells was fascinating to me. Laetrile therapy is based upon the theory that cancer is result of a nutritional deficiency, and is based upon the trophoblast theory of cancer.

In the 1940s, Dr. Ernst T. Krebs, Sr. and his son (*Dr. E.T. Krebs, Jr.*) and other doctors were involved in researching Beard’s thesis on the trophoblast theory of cancer and they affirmed that he was correct. In 1949, the elder Krebs wrote a paper on the pregnancy toxemias and the role of the pancreas and trophoblast in these disorders. The following year, Dr. Krebs and his son published a paper The Unitarian or Trophoblastic Thesis of Cancer, in the Medical Record, New York.

In the following years, the Krebses investigated co-enzymes, and the possibility that cancer results from a vitamin deficiency disease. In the early 1950s, they theorized that cancer was caused by the lack of an essential food compound in modern-man’s diet, identified as part of the nitriloside family which is found in over 1200 edible plants. Krebs learned of the kingdom of Hunza in the Himalayan Mountains of Northern Pakistan, who were said to be “cancer-free.”

Doctors Krebs knew that they ate huge quantities of apricots, but they did not believe that the fruit contained any cancer fighting substances. Until they learned that the Hunzakuts also eat the pits of the apricot seeds, which are one of the richest sources of nitrilosides!

Nitrilosides are especially prevalent in the seeds of apricots, peaches, apples, millet, bean sprouts, buckwheat, and other fruits and nuts, including bitter almonds. Dr. Krebs was able to extract certain glycosides from plants which contained nitrolosides, and eventually applied for a patent for the process of producing a metabolite form of these glycosides for clinical use. He named it “Laetrile.” (**LAE**-vo-mandeloni**TRILE**-beta-glucuronoside).

It took several years and actual clinical testing around the world before a model was proposed rationalizing the utility of Laetrile in the prevention as well as the treatment of cancer, when it received the name “Vitamin B₁₇.” Now, it is important to remember that a vitamin is a **co-enzyme**, which basically means that it must be associated with an enzyme in order for the enzyme to function optimally. We know that the pancreatic and other enzymes are reliant upon several essential co-factors and co-enzymes. Let’s remember this co-enzyme information as we learn a little bit more about the Hunzakuts.

The Hunzakuts consume between 100-200 times more B₁₇ in their diet than the average American, due mainly to eating the seeds of apricots and also lots of millet. Interestingly, there is no such thing as money in Hunza. A man’s wealth is measured by the number of apricot trees he owns. And the most coveted food is the pit of the apricot seed, one of the highest sources of B₁₇ on earth. Visiting teams of doctors found the Hunzakuts to be cancer free. One of the first medical teams to study the Hunza was headed by world-renown British surgeon Dr. Robert McCarrison. Writing in the AMA Journal January 7, 1922 he reported: “*The Hunza has no known incidence of cancer. They have an abundant crop of apricots. These they dry in the sun and use largely in their food.*”

But why haven’t you heard of vitamin B₁₇? It seems so simple! Well, the fact of the matter is that the Cancer Industry has suppressed

this information and has even made it illegal to sell B₁₇. Big Medicine has mounted highly successful “scare” campaigns based on the fact that vitamin B₁₇ contains quantities of “deadly” cyanide. This is patently false. Studies show that vitamin B₁₇ is harmless to healthy tissue.

Here’s why: each molecule of B₁₇ contains one unit of hydrogen cyanide, one unit of benzaldehyde and two of glucose (sugar) tightly locked together. In order for the hydrogen cyanide to become dangerous it is first necessary to unlock the molecule to release it, a trick that can only be performed by an enzyme called beta-glucosidase, which is present all over the human body only in minute quantities, but in huge quantities at *only one place*: **cancer cells**.

Thus the hydrogen cyanide is unlocked only at the cancer site with drastic results, which become utterly devastating to the cancer cells since the benzaldehyde unit unlocks at the same time. The cancer cells get a double whammy of cyanide and benzaldehyde! Benzaldehyde is a deadly poison in its own right, but when it teams up with cyanide, the result is a poison 100 times more deadly than either in isolation. **The cancer cells are literally obliterated!**

But what about danger to the rest of the body’s cells? Another enzyme, rhodanese, always present in far larger quantities than the unlocking enzyme beta-glucosidase in healthy tissues, has the ability to completely break down both cyanide and benzaldehyde into a silicate, which is much like aspirin. It contributes greatly to pain control. Interestingly, malignant cancer cells contain no rhodanese at all, leaving them completely at the mercy of the two deadly poisons. This whole process is known as selective toxicity, since only the cancer cells are specifically targeted and destroyed. Amazing, huh?

Now remember that I earlier referred to vitamin B₁₇ as a co-enzyme and said that this therapy is based, in part, on the trophoblast theory of cancer? The trophoblast theory focuses on the importance of pancreatic enzymes (*trypsin, chymotrypsin, and amylase*) to digest the protective coating around cancer cells. **Here’s the connection between this theory and vitamin B₁₇:** In the presence of certain

inhibitors in our blood, trypsin is inactivated and must be acted upon by hydrogen cyanide to become active again. On this basis, vitamin B₁₇ acts as a co-enzyme to trypsin, since it provides hydrogen cyanide, a harmless molecule, which reactivates the trypsin which is necessary to digest the protective coating of cancer cells. Fascinating, isn't it?

The hundreds of clinical studies conducted by many competent physicians around the world, including those directed by Dr. Ernesto Contreras at the Oasis of Hope Hospital in Mexico, give us complete confidence that B₁₇ therapy poses no threat to normal cells. This is **bad** news for the Cancer Industry. Apricot seeds are cheap...real cheap...not nearly as expensive as their latest chemotherapy drug cocktail.

The longest and most famous laetrile tests ever performed were run for nearly five years at the USA's most prestigious cancer research center, Memorial Sloan-Kettering Cancer Center in New York. Dr Kanematsu Sugiura, the preeminent cancer researcher in America, headed the team of researchers. At the conclusion of the trials, on June 15, 1977, they released a press statement. The press release read; *“Laetrile was found to possess neither preventative, nor tumor-regressent, nor anti-metastatic, nor curative anticancer activity.”*

So that is it then, right? **Wrong**. When a journalist asked Dr. Sugiura *“Do you stick by your belief that laetrile stops the spread of cancer?”* He replied, *“I stick.”* He was then asked why Sloan-Kettering was against using laetrile to fight cancer. Sugiura answered *“I don't know. Maybe the medical profession doesn't like it because they are making too much money.”*

Dr. Lloyd Schloen, a biochemist at Sloan-Kettering, also performed test on laetrile, but he had also included proteolytic enzymes to his injections and reported **100% cure rate** among his albino mice. This data had to be buried. Sloan-Kettering took action quickly. They performed their own tests which were designed to contradict Dr. Schloen's findings. They then changed the protocols of the tests and amounts of laetrile to make certain that they failed. Not surprisingly, the tests failed, and that is what they reported. They couldn't let the word out that laetrile had been proven to be a

natural, effective cure for cancer. This would have spelled economic disaster for the Cancer Industry.

The most effective method of B₁₇ treatment has been six grams, intravenous once a day, usually given for three weeks. You should also add **zinc**, since it is the transportation mechanism for B₁₇ in the body. Biochemists and researchers have found that you can give massive doses of B₁₇ to a patient, but if the patient was deficient in zinc, none of the B₁₇ would get into the tissues of the body. Also important with B₁₇ therapy are **pancreatic enzymes**, which form the first layer of defense the body has against cancer. If you have a low supply of these digestive enzymes then it will be difficult for B₁₇ to work. Also, emulsified vitamin A is usually used as an additional supplement to B₁₇ therapy. And laetrile therapy is best used in conjunction with a very strict nutritional regimen, oftentimes with a raw foods diet.

If you have cancer and are considering B₁₇ therapy, I recommend that you strongly consider visiting the Oasis of Hope in Tijuana, Mexico. One of the principal proponents of laetrile was Dr. Ernesto Contreras, who opened this clinic in 1963. Since that time, tens of thousands of American citizens with cancer have traveled to the Oasis of Hope, for treatments that have been outlawed by the Cancer Industry in the United States. Dr. Ernesto Contreras passed away of natural causes on October 14, 2003 at the age of eighty-eight. Today, Oasis of Hope is directed by his son, Dr. Francisco Contreras. You can visit their website at www.oasisofhope.com.

The Oasis of Hope is my most highly recommended cancer clinic, as they employ strict nutritional regimen along with laetrile therapy, all under the supervision of an oncologist. Oasis of Hope is a high-tech medical facility that employs cutting-edge technology, such as digital CT scanners and state-of-the-art touch screen ventilators. Doctors have access to electronic medical files through a wireless LAN, which allows them to access patient records. Patients surf the web on broadband workstations and keep in touch with loved ones via digital telephone lines. The Oasis of Hope is comparable to the top hospitals in the USA. If you have any questions about admissions, please call 1-888-500-HOPE.

If you want to take B₁₇ as a preventative, Dr. Krebs suggested a minimum level of fifty milligrams per day for normal, healthy adult. Personally, I take one or two of the one hundred milligram B₁₇ pills every evening before I go to bed.

I purchase my B₁₇ either from Medicina Alternativa: www.tjsupply.com or CytoPharma: www.cytopharma.com. Over the past decade, I have purchased B₁₇ from both companies, and both have proven to be reliable sources. A bottle of one hundred pills (*100 milligrams per pill*) is right around \$20.

Lastly, here's a **bit of trivia**: the bitter almond tree, a wonderful source of nitrilosides, was banned from the United States in 1995.



STEP OUTSIDE THE BOX

CHAPTER 7

2 COMMON CANCERS & DR. CLARK

“MAMMOGRAMS INCREASE THE RISK FOR DEVELOPING BREAST CANCER & RAISE THE RISK OF SPREADING OR METASTASIZING AN EXISTING GROWTH”
-DR. CHARLES B. SIMONE

There are multitudes of various types of cancers, and the purpose of this book is not to address specific cancers, but rather to educate the reader on the particular non-toxic alternative cancer treatments that work on the majority of advanced cancers. With this being said, I have included two sections in this chapter on specific cancers: **breast cancer and skin cancer**. I have chosen these two cancers for differing reasons. I chose breast cancer since there are specific activities which women can **avoid** which will greatly reduce their chance of developing breast cancer. I chose to elaborate on skin cancer since it is so common and there are excellent non-toxic alternative treatment protocols which work exclusively with cancers of the skin. This chapter concludes with a section on Dr. Hulda Clark.

BREAST CANCER

Each year, over 225,000 women will be diagnosed with breast cancer and almost 25% of these women will die of the disease. The USA has one of the highest breast cancer rates in the world. Fifty

years ago, only one in twenty women were diagnosed with breast cancer. Now, the number is one in seven. Since it is so common among women, I have devoted an entire section of the book to breast cancer.

Every October begins the media blitz known as National Breast Cancer Awareness Month. Pink ribbons abound and the message you keep hearing is, “*Get Your Mammogram!*” High profile companies like Avon and Revlon have joined ranks along with the Dallas-based Susan G. Komen Foundation’s “Race for the Cure.” One of the many mottos of the Breast Cancer Awareness Month is “**Early Detection is Your Best Protection.**”

So, I guess we’re all ready to wave our pink ribbons, put on those jogging shoes, and hit the roads, right? Wait a minute! Before we all get swept away in an emotional whirlwind, we need to look at a few facts about breast cancer. First of all, who profits from breast cancer? I know it sounds cynical, but hey, this entire book is focused on cutting through the propaganda and getting to the truth. And truth is oftentimes obscured by the emotions of the disease. So, let me ask you a question. Did you know that the primary sponsor of Breast Cancer Awareness Month is AstraZeneca? This Big Pharma player masterminded the initial event in 1985.

AstraZeneca is the company that manufactures the controversial and widely prescribed breast cancer drug, Tamoxifen. In his book, Indicted: Cancer Research, Dr. Tibor J. Hegedus, PhD says: “*Tamoxifen is given to women with breast cancer to block the entrance of estradiol into the tumor cells dependant upon this hormone to stimulate growth. When the hormones are blocked from reaching their primary targets, they are forced to travel to other organs.*” This, in turn, stimulates proliferation of cells in the lining of the womb, and in certain cases causes endometrial cancer!

Remember the section on what causes cancer? Remember Dr. Stephen Ayre’s quote on Insulin Growth Factor (IGF)? According to L.R. Wiseman, a pathologist at the Royal Victoria Infirmary, “*Tamoxifen stimulates cell proliferation by sensitizing cells to proliferative effects of IGF.*” In her article entitled “*Tamoxifen, Tears, and Terror,*” Betty Martini writes, “*IGF is a hormone designed to*

make things grow up, calves and babies, it also stimulates and accelerates cancer in sensitized women, those taking Tamoxifen. One of the reasons for the uproar in Monsanto marketing the bovine growth hormone which is injected into cows is the outrageous increase in IGF which will yield a firestorm of cancer from the milk. A chemical company is selling us a gasoline named Tamoxifen to put out the fire.” www.holisticmed.com/toxic/tamoxifen.shtml.

In his book Milk: The Deadly Poison, Robert Cohen states “The single most disturbing aspect of rBGH from a human safety standpoint, concerns Insulin-like Growth Factor (IGF), which is linked to breast cancer.” According to Dr. Samuel Epstein, M.D., “IGF is not destroyed by pasteurization, survives the digestive process, is absorbed into the blood and produces potent growth promoting effects.” Epstein says it is highly likely that IGF helps transform normal breast tissue to cancerous cells, and enables malignant human breast cancer cells to invade and spread to distant organs.

Do you get the picture? Can you imagine anyone using both the rBGH milk and Tamoxifen? In a 1994 article, Betty Martini wrote “Tamoxifen has been tested and retested for more than 15 years. The testers admitted fraud, many contraindications were just ignored, test results were limited in duration and after-effects not tallied, though women sickened and died from them. The tests didn’t prove the stuff works, so they’re doing them over again, with your money. They’ll keep testing until they can figure a way to rig the results in favor of healthy women buying the poison for a disease we don’t have, but the drug will give it to us!”

In April 1996, the World Health Organization declared Tamoxifen to be a carcinogen, but AstraZeneca continues to market this toxic drug. On May 16, 2000, the *New York Times* reported that the National Institute for Environmental Health Sciences listed substances that are known carcinogens. Tamoxifen was included in that list! Taking a carcinogen to stop the spread the cancer is like playing “Russian Roulette” with a fully loaded machine gun! The journal *Science* published a study from Duke University Medical Center in 1999 showing that after two to five years, tamoxifen actually **initiated** the growth of breast cancer!

It is less known that AstraZeneca also makes herbicides and fungicides. One of their products, the organochlorine pesticide, Acetochlor is implicated as a causal factor in breast cancer. Millions of tons of toxic substances are now released into the environment each and every year. Yet only three percent of the 80,000 chemicals in use have been tested for safety. (Sharon Batt, “Cancer, Inc”, *Sierra Magazine*, September-October 1999, p. 36) These toxic time bombs are found in our water, air, and soil.

Why is there such a deafening silence when it comes to environmental toxicity, carcinogens found in herbicides, pesticides, plastics, and other toxic chemicals that are known to cause cancer... especially breast cancer? Did you know that the American Cancer Society was founded with the support of the Rockefeller family in 1913? Members of the chemical and pharmaceutical industry have long held important positions on the ACS board of directors. Could that have any bearing on the *curious silence* concerning environmental causes of cancer? Just a thought....

Sadly, breast cancer has become the darling of corporate America. Companies use the pink ribbon to sell their products and boost their image with consumers as they boost their bottom line. Meanwhile, breast cancer rates continue to rise every year. There can be many contributing factors to breast cancer, and this chapter is by no means comprehensive, but I have focused on three main causes of breast cancer: **1) Mammograms, 2) Antiperspirants, and 3) Bras.** You might find this list quite startling but you will begin to understand as I outline the role each of these plays in breast cancer development.

CAUSE #1: MAMMOGRAMS

“Mammograms increase the risk for developing breast cancer and raise the risk of spreading or metastasizing an existing growth,” says Dr. Charles Simone, former NCI associate in immunology and pharmacology. www.mercola.com/2000/oct/29/breast_cancer_awareness.htm

A mammogram is an X-ray picture of your breast that can allegedly reveal tumor growths otherwise undetectable in a physical exam.

Like all X-rays, mammograms use doses of ionizing radiation to create this image. Radiologists then analyze the image for any abnormal growths. Is mammography an effective tool for detecting tumors? Many physicians say “no.” In a Swedish study of 60,000 women, seventy percent of the tumors detected by mammograms turned out to be false positives. These “false positives” are not only emotional and financial strains on the victims, but they also lead to many superfluous and invasive biopsies. (Lidbrink, E., et al. *British Medical Journal*, February 3, 1996, pp. 273-276).

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

According to Dr. Russell L. Blaylock, M.D., one estimate is that annual radiological breast exams increase the risk of breast cancer by 2% a year. So over 10 years the risk will have increased 20%. In his book, *The Politics of Cancer*, Dr. Samuel Epstein, M.D., states “Regular mammography of younger women increases their cancer risks. Analysis of controlled trials over the last decade has shown consistent increases in breast cancer mortality within a few years of commencing screening. This confirms evidence of the high sensitivity

of the premenopausal breast, and on cumulative carcinogenic effects of radiation.” (*The Politics Of Cancer*, p. 539).

In 1995, the British medical journal *The Lancet* reported that, since mammographic screening was introduced in 1983, the incidence of ductal carcinoma in situ (DCIS), which represents twelve percent of all breast cancer cases, has increased by **328%**, and **200%** of this increase is due to the use of mammography. Why, then, does conventional medicine keep recommending mammograms? **Do the math:** a \$150 mammogram for all seventy million U.S. women over forty is a whopping **\$10 BILLION** per year industry.

There is a superior alternative: **advanced thermography**. This procedure does not use mechanical pressure or ionizing radiation, and can detect signs of breast cancer years earlier than either mammography or a physical exam. Thermography is able to detect the possibility of breast cancer much earlier, because it can image the early stages of angiogenesis. Angiogenesis is the formation of a direct supply of blood to cancer cells, which is a necessary step before they can grow into tumors.

Thermographic breast screening is **brilliantly simple**. Thermography measures the radiation of infrared heat from a woman’s body and translates this information into anatomical images. Normal blood circulation is under the control of the autonomic nervous system, which governs unconscious body functions. To screen for breast cancer, a thermographer blows cool air over a woman’s breasts. In response, the autonomic nervous system reduces the amount of blood going to the breast, as a temperature-regulating measure. However, the pool of blood and primitive blood vessels that cancer cells create is not under autonomic control and is unaffected by the cool air. It will therefore stand out clearly on the thermographic image as a “hot spot.”

CAUSE #2: SHAVING & ANTIPERSPIRANTS

Research shows that one of the leading causes of breast cancer could be the use of antiperspirants. The human body has a number of areas that it uses to purge toxins from the body, these are,

behind the knees, behind the ears, the groin area, and the underarms. The toxins are purged from the body in the form of sweat (*perspiration*). The main problems with antiperspirants is that, as the name clearly suggests, they prevent you from perspiring, thus inhibiting the body from purging toxins from the underarm area.

Where do the toxins go? Well, that's the problem. These toxins do not just magically disappear. Instead, the body deposits them in the lymph nodes below the arms since it cannot sweat them out. This causes a high concentration of toxins and leads to cancer. Numerous clinical studies, dating back decades, have shown that nearly all breast cancers occur in the upper outer quadrant of the breast. This basic observation has now become textbook fact. Guess what... this is precisely where the lymph nodes are located!

In 2004, Dr. Kris McGrath, a Chicago allergist, performed a study published in the *European Journal of Cancer Prevention* which he claims is the first to find a connection between antiperspirants, underarm shaving, and cancer. He studied 400 Chicago-area breast cancer survivors and found that women “*who performed these underarm habits more aggressively*” had a diagnosis of breast cancer **twenty-two years earlier** than the non-users and theorized that substances found in deodorants, such as **aluminum chlorohydrate**, were entering the lymphatic system through nicks in the skin caused by shaving. www.nbc5.com/health/2747353/detail.html

There are several excellent brands of aluminum free deodorants available now. However, be sure that the deodorant you choose does not contain parabens. Parabens are used as preservatives, and on the label they may be listed as methyl paraben, ethyl paraben, propyl paraben, butyl paraben, isobutyl paraben or E216. Here's why: researchers have also found traces of parabens in **every sample** of tissue taken from twenty different breast tumors. Studies suggest that parabens (*found in underarm deodorants and other cosmetics*) can seep into the tissue after being applied to the skin. This finding concerns researchers since parabens have been shown to be able to mimic the action of the female hormone estrogen, which can drive the growth of human breast tumors.

Men are much less likely to develop breast cancer prompted by the use of antiperspirants, because the antiperspirant is more likely to be caught in the underarm hair, rather than directly applied to the skin. However, women who shave their underarms increase the risk of cancer by causing barely visible nicks in the skin, which allow the chemicals to enter easily into the body through the underarms.

CAUSE #3: WEARING A BRA

The connection between bras and the development of breast cancer was reinforced in a study conducted on the Fiji Islands. In 1997, medical anthropologist Sidney Singer compared the incidence of breast cancer in two groups of women in Fiji. Half of the women wore bras and the other half went without. The diet, environment and lifestyle of both groups were the same. Singer discovered that those who wore bras had the same rate of breast cancer as American women. Those who went bra-less experienced practically no breast cancer whatsoever. In her book entitled Dressed to Kill: The Link Between Breast Cancer and Bras, Sydney Singer and Soma Grismaijer presented some startling statistics.

Are you ready for this?

- Women wearing a bra twenty-four hours a day had a **three in four** chance of developing breast cancer
- Women wearing their bras more than twelve hours a day, but not to bed, had a **one in 7** chance of developing breast cancer
- Women wearing bras less than twelve hours a day had a **one in 152** chance of developing breast cancer
- Women who rarely or never wore bras, had a **one in 168** chance of developing breast cancer

Why? According to Dr. David Williams, M.D. *“wearing a bra at least 14 hours a day tends to increase the hormone prolactin, which decreases circulation in the breast tissue. Decreasing circulation can impede your body’s natural removal of carcinogenic fluids that become trapped in the breast’s sac-like glands (lymph nodes). These glands make up the*

largest mass of lymph nodes in the upper part of your body's lymphatic system." www.shirleys-wellness-cafe.com/breastcancer.htm

Apparently, the restrictive nature of bras inhibits the lymphatic system (our internal network of vessels and nodes that flushes wastes from the body) from doing its job. The mammary glands are filled with lymphatic vessels that move from the breast, through the axillary lymph nodes under the armpit, over the collar bone, to the thoracic duct. This is how the breast drains toxins and keeps its internal environment clean. **However, if something impedes the cleansing process, an imbalance occurs and the estrogen by-products become destructive molecules called free radicals that begin cellular damage which leads to breast cancer.**

The correlation between bras and breast cancer is **four times greater** than smoking is to lung cancer! Pushup bras are said to be the most restrictive. If you cannot discontinue wearing a bra, consider wearing one as little as possible, and use a bra that allows some breast motion, without cutting tightly under and along the outer edges of the breasts where the milk ducts are located.

Now get the picture in your mind of the topics just discussed; we have a constricted lymphatic system causing a toxic backup in the mammary glands, which (in some cases) gets presented annually to a clinic to get squished and assaulted with X-rays. This sounds like a perfect scenario to produce cancer, doesn't it?

Dr. Lorraine Day, M.D., was diagnosed with invasive breast cancer and had a lumpectomy of a small tumor. But the tumor soon recurred, became very aggressive and grew rapidly. As a physician, Dr. Day was well aware that physicians are more afraid of cancer than patients are, because doctors know that chemotherapy, radiation and surgery are not the answer to cancer. Rather, she used Gerson Therapy to cure her cancer.

If you are interested in more information about how Dr. Day cured her cancer, she has a very informative website: www.drday.com. She is also a very committed Christian.

SKIN CANCER

Skin cancer is usually associated with a limited set of risk factors connected to ultraviolet (UV) radiation. These include excessive sun exposure (*especially during adolescence*), red or blonde hair, and fair skin. More than 1.5 million skin cancers are diagnosed yearly in the U.S. alone. According to the Skin Cancer Foundation, as of 2006, about one in five Americans and one in three Caucasians will develop skin cancer in their lifetime. Skin cancer is the **most common of all cancers**, representing one out of every three new cancers.

There are two main types of skin cancer:

1. Skin cancer in moles (*malignant melanoma*)
2. Non-melanoma skin cancer (*basal cell carcinoma* and *squamous cell carcinoma*)

Melanoma is the **most serious** form of skin cancer. Melanoma is a malignant tumor that originates in melanocytes, which are cells that produce the pigment melanin that colors our skin, hair, and eyes and is heavily concentrated in most moles. If you have melanoma which has metastasized to other parts of the body, then you need to seriously consider a strong Stage IV cancer treatment. Once metastasis has occurred with melanoma, it is very serious and usually deadly, especially if treated with the “Big 3.” The treatments mentioned in this chapter are not applicable to malignant melanoma that has metastasized. *Let me repeat myself.* The treatments mentioned in this chapter are **not** applicable to malignant melanoma that has **metastasized!**

There are two non-melanoma skin cancers: **basal cell carcinoma** (BCC) and **squamous cell carcinoma** (SCC). BCC is a cancer that begins in the deep basal cell layer of the epidermis (*the outer layer of the skin*). It is the most frequent type of skin cancer and is six to eight times more common than malignant melanoma. BCC is a slow-growing cancer and it never spreads to other parts of the body. SCC begins in the squamous cells of the epidermis and is not as common as BCC, however it grows **much faster** than BCC especially when

located near the eyes, ears, mouth, or the pubic area. Chronic exposure to sunlight is the cause of almost all BCCs and SCCs, which occur most frequently on exposed parts of the body (*the face, ears, neck, scalp, shoulders, and back*). Occasionally, they develop in non-exposed areas.

The external treatment of skin cancer with **escharotic** pastes and salves actually seeks out and destroys cancer cells. Escharotic pastes and salves are caustic compounds that are applied externally on the skin over the skin cancer. They successfully erode the tissue and eventually destroy and remove the underlying tumor. Empirical case studies to date show that escharotic salves have successfully removed (*cured*) every malignant carcinoma, adenocarcinoma (i.e. *breast cancer*), and even melanoma, to which it has been applied.

The two most respected and well-known authorities in the use of the escharotic approach were American doctors J. Weldon Fell and Frederic E. Mohs. Dr. Fell was a faculty member at New York University and later was one of the founders of the New York Academy of Medicine. In the early 1850s, he moved to London and built up a very successful cancer treatment practice based on escharotic therapy using bloodroot (*sanguinaria canadensis*) and zinc chloride as the foundation. Bloodroot is one of the most beautiful eastern North American woodland herbs and was commonly used to treat cancer by the Native Americans.

Dr. Frederic Mohs called his approach “*chemosurgery*” and used an adhesive paste. His was more an integrative approach that combined the use of the escharotic paste with surgical tumor removal. His contribution was enormous as he put the procedure on a very sound, scientific footing, with a tremendous amount of research. He wrote a medical text entitled *Chemosurgery: Microscopically controlled Surgery for Skin Cancer* which was last published in 1978. The medical “*soundness*” of his approach was underscored in a 1990 report that stated he had a verifiable and documented 99% success rate in his treatment of skin cancers!

The cancer-killing concoction of zinc chloride, bloodroot, and other substances was recreated in the 20th century and named **Cansema Black Topical Salve**. Cansema is a topical ointment that, when

applied to skin cancer, kills the cancer cells and creates an “eschar” (*a pus formation*). The body then expels the scab and leaves a pit in the skin. Over the next few weeks, the pit heals over, usually leaving a slightly discolored area where the lesion was removed. Typically, this area will heal over within a period of several months, making it difficult to tell that a cancer was removed from the site.

Alpha Omega Labs **used to be** the top American manufacturer of Cansema. However, on September 17, 2003 the FDA effectively suspended the activities at the Alpha Omega Labs fulfillment center in Louisiana and arrested owner Greg Caton. In all, Mr. Caton estimates that the FDA stole (*I mean “confiscated”*) \$250,000 worth of materials and \$400,000 worth of buildings.

Yes, the FDA, heavily populated by former (*and future*) Big Pharma executives, has a long history of aggressively attempting to close down businesses that produce natural cancer treatments, even if (*or perhaps that should be especially if*) the treatments work. Oftentimes, this involves raiding, arresting, prosecuting, and imprisoning the owners of the companies. Terrorist-type raids have become far too common in the realm of alternative cancer treatments. www.goodhealthinfo.net/cancer/fda_panacea.htm

At the current time, the only way to get the official Cansema formula, that I know of, is from CentreForce, an Australian company who ships to the U.S. Their website is www.health.CentreForce.com. However, please note the following quote from their website: “The TGA (Australian equivalent of the FDA) in Australia have prevented Centreforce Australia from providing you with Cansema Salve treatment for Humans, untill such time as the product has been included in the ARTG (Australian Register of Therapeutic Goods) for human therapeutic use.”

Similar to Greg Caton at Alpha Omega Labs, if they try to sell Cansema for human use, the owners at CentreForce could face jail terms. However, CentreForce Black Salve is still available **for animals**. Again, directly from their website: “Although The TGA have prevented us from supplying Cansema Black Salve for Human Therapeutic use, **the ingredients are the same as the Animal version and these instructions prevail for all Animals.**”

So, if you need to purchase Cansema for your dog or your cat, then this is the place for you! Apparently, it works really great on cancer in cats and dogs, but not humans (*sarcasm intended*). It's sad when you have to play these kind of word games in order to sell a product that cures cancer, isn't it?



During the summer of 2008, I had a couple of places on my face (*one on my nose and the other between my eye and ear*) which I suspected were BCC. No matter what I did, they wouldn't go away. I used Cansema on them for about a week, and they both fell off. You can see pictures (*to the left*) of what they looked like before, and then a picture (*bottom left*) of what my face looks like now.



Another recommended vendor is BloodrootProducts.com located in Montana and the product is called Cansema Salve Deep Tissue. What makes this product interesting is the fact that it contains DMSO. The manufacturers have found that the DMSO has increased the transdermal properties of Cansema for applications where greater depth through the dermal layers is either desirable or necessary. This is nothing new, as we have already seen how DMSO acts as an effective “carrier” agent for other substances.



Warning: Do not take cancer salves internally. To learn more, you should visit the following

website which contains numerous frequently asked questions about Cansema: www.alphaomegalabs.com/faq410.htm

Vitamin C is another viable treatment for skin cancer. When vitamin C comes into contact with skin cancer, it hardens the tumor and forms a crust, such that the scab falls off in a couple of weeks or so depending on how big the tumor is and how aggressive you get with the vitamin C. The solution is made by adding 1/8 teaspoon of pure vitamin C crystals to one teaspoon of water (*a ratio of 1:8*). If you add any more vitamin C, it will not dissolve. This should make enough solution to last all day. If more is made than is needed you should store it in a closed container in the refrigerator.

The treatment is to apply the mixture (*using a cotton swab or Q-Tip*) to the tumor. This should be done two or three times a day. It is best to put a bandage or other cotton covering over the tumor after each treatment, if possible. Since vitamin C (*ascorbic acid*) is also anti-infective and is used topically and IV for burn patients, you would be curing the cancer and fighting infection at the same time. The recommended form of vitamin C crystals comes from the Life Extension Foundation: www.lef.org/newshop/items/item00084.html

According to Dr. William M. Wassell, M.D., “So we see that blood concentrations of 2+mg/ml vitamin C are **tumorcidal**, (*i.e. they kill tumors*) and we are applying a solution of 500mg/ml directly in contact with the tumor cell surface. This solution is **250X stronger** than the concentration required in blood to be tumorcidal. Apparently enough gets absorbed through the surface to kill the tumor.” www.cancertutor.com/Cancero2/VitaminC.html

Another alternative cancer treatment for skin cancer is colloidal silver. It can be purchased from many vendors. I used to have a colloidal silver generator and made my own colloidal silver, so I am very familiar with this product.

Two things to look for with colloidal silver are 1) purity of silver and 2) the size of the silver particles. The higher purity and smaller size will yield the best colloidal silver. The reason is that the smaller the bits of silver, the more surface area of silver touches the cancer cells. The more surface area, the better.

Ever wonder what two of the “3 Wise Men” in the Bible were thinking? I mean, if I was going to bring a gift to celebrate the birth of my Savior, I would probably bring platinum or gold. But one wise man brought **myrrh** and another brought **frankincense**. What are these anyway? Frankincense and myrrh are both resins (*dried tree sap*) that come from trees of the genus *Boswellia* (frankincense) and *Commiphora* (myrrh), which are common to Somalia. Well, researchers at Virginia Tech’s college of veterinary medicine recently presented findings to the ACS about the effectiveness of treating skin cancer in horses with frankincense. Apparently, frankincense oil was a valuable treatment for wounds 2,000 years ago. It may prove to be a valuable skin cancer treatment for humans, since horses with malignant melanoma have several similarities to humans with the same disease.

Frankincense is “*carrier oil*” in that it penetrates membranes and cell walls. Frankincense is one of the few substances known to cross the blood barrier. A cancerous cell wall loses its ability to transfer substances across the membrane. Therefore, not all herbs or medications can effect a cancerous cell. However, carrier agents like frankincense, DMSO, and very alkaline minerals like cesium are highly penetrable across the membranes and have the opportunity to act on a cancerous cell or a brain tissue that is separated by the blood brain barrier.

Myrrh may actually have some amazing medical capabilities, scientists are now discovering. Researchers at Rutgers University have found two compounds in myrrh that are strong painkillers, another compound that helps lower cholesterol, and most recently, a potent anti-cancer agent. What makes myrrh such an exciting player in the anti-cancer field is not only how well it kills cancer cells in general, but how it kills those that are resistant to other anti-cancer drugs. “*The myrrh compound definitely appears to be unique in this way; it is working where other compounds have failed,*” says Dr. Mohamed M. Rafi, an assistant professor in the department of food science at Rutgers.

Myrrh is believed to work by inactivating a protein called Bcl-2, a natural factor that is overproduced by cancer cells, particularly in the breast and prostate. When levels of this protein go too high, say

experts, it not only promotes the growth of more abnormal cells, it can also make those cells resistant to anti-cancer drugs. In Dr. Rafi's laboratory research, the myrrh compound was able to inactivate the protein in a line of breast tumor cells known as MCF-7, cells that in the past were particularly resistant to treatment.

So, those wise men might have been on to something, huh?

DR. HULDA CLARK

A book on cancer would not be complete without including at least a summary of Dr. Hulda Clark's work. Her Doctorate is in biophysics and cell physiology, and she has written the books The Cure for All Cancers, The Cure for All Diseases, and The Cure for HIV and AIDS.

To make it easier to understand Dr. Clark's work, I will briefly give you an outline of her methods, which are, in essence, very simple. Basically, through many years of research, Dr. Clark has discovered that there seemed to be two predisposing factors involved with every case of cancer she encountered. One is the presence of a parasite, the human intestinal fluke, also referred to as "*Fasciolopsis buski*." The other is the presence of various solvents and toxins within the body (*including isopropyl alcohol*) which, combined with the parasites, set up the needed conditions for the onset of cancer. Isopropyl alcohol (*in trace amounts*) can be found in bottled water, cold cereals, sodas, shampoos, hair sprays, cosmetics, aftershave, sodas, coffee, and processed foods.

Dr. Clark is best known for a device which she called "*the Zapper*," which was basically the result of an accident. The zapper came about when Clark's son decided to build a battery-operated frequency generator in order to help Clark's patients kill the human intestinal fluke, a parasite that Clark claims is always detected in the liver of cancer victims. However, when the battery-powered generator was first used, all detected pathogens were killed at once. Clark said that this had never happened before, and that after further experimentation, they discovered that battery operation itself was responsible for this amazing breakthrough. Namely,

battery operation meant that the frequency went from positive to zero voltage, instead of positive to negative voltage as in the A/C powered generators. This was Clark's famous "positive-offset" wave, meaning that finding the specific frequency to kill each pathogen is no longer necessary. Simply using a frequency in the range that kills microorganisms, with a positive offset wave, will kill or devitalize a wide variety of microorganisms (*including parasites, bacteria, viruses, and fungi*) in about an hour.

She has an extensive list of common every day items which contain traces of cancer causing chemicals such as arsenic, barium, cobalt, lead, radon, and tin. In order to avoid these chemicals, Dr. Clark recommends the following "radical" actions:

- change your copper water pipes to plastic,
- get rid of possible asbestos sources (*hair dryer & clothes dryer*),
- remove all chemicals from your house,
- have your house tested for radon,
- board your pets with a friend,
- remove all possible formaldehyde,
- remove all possible arsenic (*wallpaper glue, bug killers, lawn chemicals, etc.*),
- and check your home for exposed fiberglass.

And that's just the tip of the iceberg! I don't know about you, but **that's enough to make my head start spinning!**

One interesting similarity between Dr. Clark's theories and other theories on cancer relates to mycotoxins (*fungus toxins*). Earlier in the book, I mentioned a book written by Dr. Doug Kaufman entitled The Germ that Causes Cancer, in which Kaufman hypothesizes that cancer is a deep-rooted fungal infection that our immune system fails to recognize. In parts of Africa, aflatoxin (*the #1 mycotoxin*) is considered the number one cause of liver cancer due to the eating of moldy food. The liver seems most susceptible to damage from aflatoxin when isopropyl alcohol is consumed in ordinary food stuffs, and the intestinal fluke enters the field, paving the way for cancer. The difference between persons who accumulate isopropyl alcohol and those who metabolize it promptly is the presence of **aflatoxin** in the former. We eat aflatoxin every day, as it is found in bulk grains, brown rice, overripe fruit, and in most nuts and nut

butters. Basically, according to Dr. Clark, if you are eating out of the grocery store, you are eating aflatoxin every day, thus making your body more susceptible to cancer.

Dr. Clark recommends washing all foods with ozonated water, since ozone can render any toxin less toxic, kill all forms of molds, and eliminate parasite eggs found on garden vegetables. You simply fill the kitchen sink with tap water, drop in an air stone (*a ceramic aerator at the end of a plastic tube which is attached to an ozonator*), and bubble ozone gas through the water for 10 minutes, while the vegetables, grains, or beans soak. She has tested and verified that this cleans up this situation, making the food suitable and safe for consumption.

Dr. Clark also theorizes that all cancers are in some way involved with freon gas that leaks out from our refrigerators. It gets into our bodies and just lays dormant, making whatever organ susceptible to cancer development. However, ozonated water can actually mobilize this toxin unlike anything else. By drinking ozonated water, not only is the intestinal tract cleaned up of yeasts like *Candida*, and bacteria like salmonella, but once in the blood, freon (CFCs) can be mobilized and removed from the body.

How do you get rid of parasites? Clark claims that 3 herbs can rid you of over 100 types of parasites, without so much as a headache and without nausea. These “miracle” herbs are:

- **Black Walnut Hulls** (*from the black walnut tree*)
- **Wormwood** (*from the Artemisia shrub*)
- **Common Cloves** (*from the clove tree*)

These three herbs must be used **together**. Black walnut hull and wormwood kill adults and developmental stages of at least 100 parasites. Cloves kill the eggs. Only if you use them together will you rid yourself of parasites. If you kill only the adults, the tiny stages and eggs will soon grow into new adults. If you kill only the eggs, the million stages already loose in your body will soon grow into adults and make more eggs. **They must be used together as a single treatment.**

Despite the fact that her treatment actions are overwhelming, Dr. Clark's theories about the cause of cancer are not that radical. In her book *The Cure for All Cancers*, Dr. Clark devotes over 200 pages to cover over 100 case studies. It is truly fascinating reading. At least three dozen of her case studies followed her instructions **meticulously** and were cured. Dr. Clark also includes dozens of cases of patients who failed to follow her regimen, thus lending credibility to the book.

According to Dr. Clark, the killing of all parasites and their larval stages together with removal of isopropyl alcohol and carcinogens from the cancer patient's lifestyle results in remarkable recovery, generally noticeable in less than one week. Dr. Clark says, *"How can propyl alcohol in shampoo get into your body in significant amounts? The skin is more absorbent than we realize, and time and time again I see cancer victims who have gone off every body product except their favorite shampoo. They harbor propyl alcohol until they make that final sacrifice. It is better, to switch shampoos than to not need any due to radiation and chemotherapy!"*

Not surprisingly, despite Clark's outstanding credentials, years of research, and concern for patients' health, Clark has been heavily persecuted by the Medical Establishment. She has been laughed at, labeled a quack, and forced to move her practice to Mexico. Unfortunately, for now, the best cancer doctors are "criminals" in the USA, and those wanting to continue to practice must move their practices out of the country. You see, a publicized cure for cancer would cost Big Pharma too much money. And sadly, **when it's money versus a patient's life, money usually wins.**



STEP OUTSIDE THE BOX

CHAPTER 8

SPOILED ROTTEN

"THERE IS ONE MAJOR CAUSE OF DISEASE AND THIS IS ACIDOSIS (LOW pH). DO YOU KNOW THAT ITS MAJOR CAUSE IS PUTREFACTION OF FECAL WASTE REABSORBED INTO YOUR SYSTEM? THIS CAUSES TOXEMIA WHICH MEANS DIRTY BLOOD . . . THE ONLY WAY FOR YOUR BLOOD TO BECOME TOXIC IS BY REABSORBING YOUR OWN TOXIC FECAL WASTE FROM THE LARGE INTESTINE."
-DR. DARRELL WOLFE

In the last chapter, I mentioned Dr. Hulda Clark and her parasite cleanse. This chapter, entitled "Spoiled Rotten," will be devoted entirely to cleansing (*detoxification*), which is in reality the most important yet overlooked part of a cancer treatment protocol. Let me repeat myself: **Cleansing is the most important yet overlooked part of an effective cancer treatment/prevention protocol.**

According to Dr. Darrell Wolfe, "*the 'intestinal well-being' of the average person amazes me as I walk through the busy crowds of downtown this morning. As a health practitioner of 25 years I shake my head at the obvious. For a society so advanced and in search of health breakthroughs, why can't we see, feel, or smell the obvious? We are the nation of the **spoiled rotten.***"

What exactly does Dr. Wolfe mean by the above statement? Statistics show that the average person is overweight, and 25% of us are carrying around an extra twenty-five pounds of not just weight, but toxic waste. It is truly amazing how many men look like they are

pregnant! Have you ever wondered how a man's belly could get so huge? Especially when the rest of his body is relatively thin? Well, what we are really dealing with is the large intestine (*which is a muscle*) that lacks tone, has fallen down, and bulges out of the abdomen, filled with stagnant waste material. Did you know that the average person (*even those that don't look pregnant*) has around 10 pounds of fecal matter putrefying (*i.e. rotting*) within their bodies? As Dr. Wolfe so aptly stated, many of us are **spoiled rotten**.

WHAT IS CLEANSING/DETOX?

Detoxification is the process of clearing toxins from the body or neutralizing or transforming them, and clearing excess mucus and congestion. A poor diet, poor digestion, a sluggish colon, reduced function in the liver, and dismal elimination from the kidneys all lead to increased toxicity and a lack of oxygen at the cellular level. As I have mentioned numerous times throughout this book, the lack of oxygen at the cellular level creates the perfect environment for anaerobic microbes such as bacteria, parasites, viruses, and fungi to rapidly propagate. These microbes can be many, many times smaller than our body's cells, so our cells literally become infected by these microbes and eventually cause our cells to either die, or "*morph*" into cancer cells.

Once the body (*specifically the liver, gallbladder, kidneys, and bowels*) loses its ability to process all the toxins and pollutants we are bombarded with every day, the body's oxygen supply dwindles, the immune systems begin to collapse, the body's pH becomes more and more acidic (*i.e. acidosis*), and we have the perfect breeding ground for deadly microbes and parasites. These microbes are the end result when our body's immune system has lost the ability to protect its cells from carcinogens.

These viruses, bacteria, parasites, and fungi act as the actual catalyst for **cancer** and nearly all other diseases. By "*hijacking*" a healthy aerobic cell, these bacterium and virus invaders start exhausting the cell's oxygen and energy supply, until the cell either dies or mutates into an anaerobic cell. This anaerobic cell (*i.e. cancer cell*) now relies on fermenting sugar to produce energy.

Again, the battle with cancer is truly fought at the cellular level. If you can cleanse the body of these microscopic invaders while radically changing the body's internal terrain back to a healthy one in a relatively short period of time. This is why cleansing is so vitally important to all of us.

DEATH BEGINS IN THE COLON

According to Dr. Darrell Wolfe, *“Your body is a temple for your spirit and emotions to find balance in the physical plane, but it must be in a healthy state in order accomplish that balance. That healthy state is delivered to you along an amazing assembly line know as **The Digestive Tract**. It starts at the mouth and goes down the esophagus to the stomach and then to the small intestine, which is five to seven feet long. In total we are looking at thirty to thirty-two feet of intestines. That’s a long way for your food to travel. Everything has to be digested in its proper time . . . the process of eating and digestion is a work of art, simple and effective.”*

He continues, *“Improper eating throws all sense of discipline and rules out the window causing grief, and eventually disaster to your body. Most people are only conscious of the first five inches of the process, only aware of the taste and texture from the mouth to the throat. So what we have is five inches of delight followed by thirty feet of misery.”*

At the writing of this third edition, my children are eight, six, and two years old. They run around all day long, and they almost **never** get tired. Why do you think they have so much energy? Yes, they are young, but most importantly, they are **not toxic**. They have not had 40+ years of absorbing toxic waste migrating from stagnant fecal debris in their large intestine polluting their blood, lymph, organs, and tissue cells.

Do you have really bad breath? If you do, it is **not** caused solely from what you ate at breakfast! It could also be a result of what you ate last month...or last year! Remember that hot air rises and it is rising from your abdomen and out through your mouth. **Does anyone have a mint??** Don't be fooled... mints, toothpaste, and mouthwash

are only temporary measures which mask the symptoms and never get to the real root cause, which is your own toxic internal manure pile.

Why do people use underarm deodorant and perfumes? **To hide the truth.** The truth is they stink. Why does body odor increase as we age? The answer is – we are **spoiled rotten**. We rot from the inside out. You should know that almost all deodorants and perfumes are toxic and harmful to your body, even some of the so-called natural products. As I discuss later in the book, many underarm deodorants may be a contributing factor to lymph problems and breast cancer.

Why do many people avoid going to the bathroom in public? Because of the foul stench they leave behind. Imagine walking into your own house and being confronted by a rank smell and not knowing where it was coming from. You would not rest until you found it. I'm sure you wouldn't spray deodorizers through the house to mask the odor. However, even if you change your diet and start eating properly, you will never have vibrant health if you don't clean out your personal “sewer pipes.” Perhaps the most important statement in this entire chapter is this: **you will not have rotting if you understand the art of cleansing.**

However, most people do not want to talk about their putrefying fecal matter. They stick their head in the sand hoping it will go away. **A toxic colon is the breeding ground for disaster.**

According to Dr. Darrell Wolfe, “There is one major cause of disease and this is acidosis (low pH). Do you know that its major cause is putrefaction of fecal waste reabsorbed into your system? This causes toxemia which means dirty blood. Let me pose a question to you. Do you believe that you could have systemic candida, chronic fatigue, headaches, sore throat, skin disorders, heart disease, gout, arthritis, sinus problems, even cancer - without your blood being dirty and toxic? The list of illnesses is endless. The only way for your blood to become toxic is by reabsorbing your own toxic fecal waste from the large intestine.”

Is it any wonder that we oftentimes hear the phrase, “**Death Begins in the Colon**”?

THE “DOMINO EFFECT”

Let me talk about the “*domino effect*.” What is the major cause of toxemia (dirty blood)? **Absorption of toxic fecal waste from the large intestine (colon).** So if you can get the large intestine operating properly, you won’t absorb the fecal toxic waste. That is not the case with 99% of the population. When the blood becomes overburdened by these deadly toxins and poisons, the liver has to pick up the overload. Your liver already does over 500 different functions for the body and now must pick up the slack and handle the toxic waste from the large intestine. The liver works overtime until it becomes chronically fatigued and then the body starts experiencing an array of negative side effects. So, it’s off to the doctor’s office and he tells you that you’re OK and that this is just “*normal for your age*.”

In reality, it’s not normal. What has happened is that the liver had to do much more than its share because of the toxic blood situation caused by the encrusted fecal waste in the large intestine. Now the liver must pass on this burden of toxic waste caused by a sluggish large intestine (*colon*) to the kidneys. But the kidneys aren’t so happy about taking on this extra burden. They already felt the added pressure for the last few years due to the colon being dysfunctional prior to the liver plight. Nevertheless, the kidneys do their best, but as time goes on, chronic low back pain sets in due to these unwanted toxic poisons. Other symptoms are showing from the over-worked kidneys like sweaty palms, bags under the eyes, frequent urination, and bladder infections. The kidneys are now taking the brunt of this toxic waste. Where does it go from here? To the holding tank called the bladder.

This is what Dr. Wolfe calls the “*domino effect*.” First toxic colon, then the blood, liver, kidneys, bladder and now the lymph system become toxic.

So, the million dollar question is this: **How do we get our internal sewer system back in order?**

The answer is . . . **CLEANSING and DETOX!**

THERE IS AN ORDER

If you detox the blood with a clogged liver, where do the toxins go? So, you must detoxify the liver **before** you detoxify the blood. Next, if you detoxify the liver, but forget about your toxic colon, it will just get clogged again. Because of our fast-food American diets, our colons are, for the most part, stuffed with toxins that are straining our immune systems. Therefore, first you should cleanse the colon, then rid your body of parasites, then cleanse the kidneys, then the liver and gall bladder, then the rest of the body and the blood. This is the most intelligent order to follow.

This sequence is highly recommended by many natural health practitioners and medical doctors alike.

- 1) Colon cleanse
- 2) Parasite Cleanse
- 3) Kidney Cleanse
- 4) Liver/Gall Bladder Cleanse
- 5) Blood Cleanse

STEP ONE: THE COLON CLEANSE

In the words of Henry Wheeler Shaw: ***“A good reliable set of bowels is worth more to [us] than any quantity of brains.”*** I agree wholeheartedly with Mr. Shaw! The Royal Society of Medicine did a major study and found that a dysfunctional large intestine (*aka colon, bowels*) is the major contributor to 85% of all disease and illness. A dysfunctional colon is the major fuel to the fire of all illness and disease, including cancer. And until this organ gets your full attention and cooperation, not only will you not prevent or reverse illness, you will remain sick and tired of being sick and tired.

Dr. John Harvey Kellogg, famous surgeon and the father of Kellogg’s Corn Flakes, believed that the colon was the origin of most health problems, hence his creation of a bran cereal to aid in colon

function. He maintained that 90% of disease is due to improper functioning of the colon.

Did you know that your large intestine is often referred to as the “mother of all organs”? It is the first organ developed in the fetus. Why? **Because it is the most important.** Without a proper waste disposal (*sewer system*), life would cease to exist before it even gets started. Just picture the disaster we would face if our cities’ sewer systems backed up into our streets and homes. But isn’t that exactly what has happened with the “internal sewer system” of many people today, as we have become breathing cesspools of toxic bacteria, gases, viruses, fungus, and worms, living off stagnant, rotting waste? We are **spoiled rotten.**

Americans have the highest incidence of colon-rectal cancer of any nation in the world. It is now killing more Americans than ever before in history. Many people think it’s a dirty subject and some think it’s embarrassing, but cancer and death are worse, so let’s talk about preventing it. According to the U.S. Health Service, over 90% of Americans are walking around with clogged colons. The saying “you are what you eat” is categorically correct and all the more reason to cleanse and detoxify the body. When the bowel and/or colon is impacted, problems arise such as constipation, hemorrhoids, diverticulitis, ulcerative colitis, colon cancer, and a plethora of other ailments.

According to Dr. Richard Schulze, *“The first step in everyone’s health program should be stimulating, cleaning and toning all the elimination organs, and the bowel is the best place to begin.”* Dr. Schulze states that cleansing the colon (*bowel*) happens in three steps. First, get the bowel regular (*one bowel movement per meal*). Next, clean the toxic, putrid waste from the pockets, bends and folds of the colon. Finally, be sure to keep the colon clean through daily maintenance. www.risingstarlc.com/schulze.htm.

Dr. Schulze readily admits that after twenty years of clinical experience, he’s found that eighty percent of all maladies, whether arthritis, acne, multiple chemical sensitivity, or cancer were cleared up within two weeks of cleaning the bowel. One of the best colon cleanses on the market today was created by Dr. Schulze and is

called Intestinal Corrective Formula (#1 & #2). You can find it at www.herbdoc.com.

Many people mistakenly believe that a two to four week cleanse is sufficient to restore their health. **They are wrong.** Daily maintenance of the digestive tract is imperative and necessary to re-establish and preserve your wellbeing. The goal should be **colon regeneration and maintenance.** If you've ever done a colon cleanse, you probably felt great for about a month but then you went back to normal. What happened? **Your internal sewer system got backed up again, didn't it?** The key is to keep the colon clean and not get clogged up again.

Not only must we cleanse, but we must re-establish a strong immune system in the digestive tract with the proper friendly bacteria (*flora*). Without this friendly flora being present, life as we know it would not exist. Most people have had the friendly bacteria in their digestive tract destroyed due to harsh chemicals, tap water, poor diet, antibiotics, and other toxins. Soil based micro-organisms (SBOs) have the highest integrity of all friendly bacteria for the proper re-establishment of a healthy digestive tract.

And remember, the “golden rule” for effective digestion (*i.e. a clean colon*) is **never mix a protein and a starch.** Meat requires protein enzymes for digestion and potatoes require starch enzymes. When these enzymes are put together they neutralize each other and your food putrefies (*rots*). Instead of being digested by enzymes, it putrefies with bad bacteria.

STEP TWO: THE PARASITE CLEANSE

In the last chapter, I detailed Dr. Hulda Clark's parasite cleanse, so this section is just to reiterate the importance of a good parasite cleanse. Most people believe parasites are only a serious problem in third world countries, but nothing can be farther from the truth.

Scientists have identified over **three hundred** types of parasites thriving in the USA today, including but not limited to the following: pinworms, tapeworms, hookworms, ringworms, whipworms,

roundworms, and heartworms. The USDA tells us that the average cubic inch of beef contains up to twelve hundred larvae. **It is estimated that over ninety percent of Americans suffer from parasites and don't even know it.** When symptoms appear, the worms/parasites have probably been in your system for **over a decade!**

According to Dr. Hazel Parcells, *“Make no mistake about it, worms are the most toxic agents in the human body. They are one of the **primary underlying causes of disease** and are the most basic cause of a compromised immune system.”* www.frequencyrising.com

Parasites are scavenger organisms living within us, aiding many serious health ailments to develop, including cancer. Parasites thrive in the intestinal tract, liver, pancreas, and brain where they become “obese” when fed their favorite diet of sugars, processed and junk foods, toxins, and excessive carbohydrate consumption. The danger of these uninvited visitors exists in that they become extremely toxic and even deadly, as waste materials are expelled into the host body, their eggs hatch and larvae grow in tissue all over the body.

Parasites have three main goals/effects within the human host:

- Grow fat on your nutrition
- Drink your blood
- Overload you with their waste, which is then reabsorbed into your bloodstream, weakening the entire immune system function

See the previous chapter for details for Dr. Clark's parasite cleanse. In addition to her parasite cleanse, you can purchase an excellent parasite cleanse from Dr. Schulze at www.herbdoc.com. Another good parasite cleanse is available at www.frequencyrising.com. You can take the parasite cleanse along with your colon cleanse or after it, just as long as it is completed before you begin your liver cleanse. **Just be sure that you don't skip the parasite cleanse.**

According to Dr. Ross Andersen, N.D., *“Other prominent physicians agree with me; that in human history, the **parasite challenge is likely***

the most unrecognized of all endemic problems. *Because they cannot be seen and rarely present immediate symptoms, they remain invisible as a cause or contributing factor to what can be a serious disorder.”*

STEP THREE: THE KIDNEY CLEANSE

Why is kidney cleansing important? Every day, your kidneys process the blood and help to sift out waste products (*like mercury, lead, arsenic, copper, and other toxins*) and extra water. The waste and extra water become urine. The urine then flows to your bladder through the ureters. Your bladder stores urine until you go to the bathroom. When your kidneys become overloaded with toxins, diseases of the kidneys and bladder can happen as you are unable to discharge the waste and urine from your body. Crystals form in urine from various salts that build up on the inner surfaces of the kidney. Eventually these crystals become large enough to form kidney stones. A kidney cleanse is a procedure which is used to dissolve deposits inside the kidneys that can lead to kidney stones.

We now know that hard minerals (*mainly from tap water*) cannot be assimilated by our bodies, thus they begin to build up in our kidneys and other organs, contributing to many diseases, including cancer. According to Dr. Charles Mayo (of the Mayo Clinic), *“Water hardness’ is the underlying cause of many, if not all, of the diseases resulting from poisons in the intestinal tract. These (hard minerals) pass from the intestinal walls and get into the lymphatic system, which delivers all of its products to the blood, which in turn, distributes to all parts of the body. This is the cause of much human disease.”*

There are hundreds of herbal recipes, and many different homeopathic remedies used for cleansing kidney stones. One popular way to cleanse kidney is to a watermelon cleanse. Just purchase a few huge watermelons and eat them all throughout the day. Another popular kidney cleanse is celery seed tea. Just pour boiling spring water over a tablespoonful of freshly ground celery seeds and allow it to steep. Celery seed tea is very potent in case of kidney stones and chronic kidney diseases. Celery seeds have a direct action on the kidneys, increasing the elimination of

water and speeding up the clearance of accumulated toxins from the joints. Celery seed tea is oftentimes combined with dandelion root to increase the efficiency of elimination by both the kidneys and the liver. However, if you are pregnant, do not drink celery seed tea since it is a uterine stimulant!

Probably the most popular kidney cleanse is Dr. Clark's kidney cleanse found here: <http://curezone.com/clark/kidney.asp>. Also, Dr. Schulze's kidney cleanse is available at www.herbdoc.com.

STEP FOUR: THE LIVER & GALL BLADDER CLEANSE

I have heard it said, ***“Don't tell your girl you love her with all your heart. Tell her you love her with all your liver.”*** That seems odd, doesn't it? But when you consider that the liver performs over a thousand tasks daily and filters every drop of blood that flows through it, I guess you can see that it makes sense.

The liver produces chemicals to combat viruses and bacteria, supports phagocytosis (*cell-eating*), and produces antihistamines to neutralize substances that promote the growth of cancer. It is such a powerhouse that scientists estimate that up to 80% of the liver can be damaged without producing any symptoms! **Plus, the liver regenerates itself every 6 weeks!** This is truly amazing! In his 1994 article entitled “The Liver, Laboratory of Living,” Dr. Leo Roy, M.D. states, *“No disease, especially degenerative diseases including cancer and AIDS, could survive longer than a few weeks in the presence of a healthy liver”* (*Immune Perspectives*, Summer 1994).

In his book, *The Liver And Cancer*, Dr. Kasper Blond of Vienna, Austria refers to the liver as the *“gateway to disease.”* In the book, he states, *“No other stimulus is necessary (for the growth of cancer) than a metabolic toxin which has not passed the liver filter or has not been neutralized owing to liver failure.”* He later states, *“Cancer of the lung is not caused by nicotine, but by the alimentary toxins having bypassed the liver filter.”* Remember the baseball star Mickey

Mantle? He was diagnosed with lung cancer while awaiting a liver transplant. Do you see the connection?

There are many ways to clean and maintain your liver, but the best liver flush I have seen is the 5 day liver and gallbladder flush from Jon Barron. You can find it at www.jonbarron.org. Another good liver flush is from Dr. Schulze at www.herbdoc.com. Drink a quart of organic, unprocessed, apple juice each day for 3 days. You don't have to fast during this period, but it is recommended that you do fast. On the evening of the 3rd day, drink 8 ounces of organic, cold pressed, extra virgin olive oil. **This is brutal!** Stir it up (*along with the juice of one lemon*) and drink it down quickly. Then grab a small trashcan and lie in a fetal position, curled up on your right side for ½ hour. Keep the trashcan by your face just in case you vomit. The next morning, you should find a few small green or black objects in your stool. These are gallstones.

There is science behind the liver & gallbladder cleanse. Apple juice is high in malic acid, which acts as a solvent to weaken adhesions between solid globules. The organic olive oil stimulates the gallbladder and bile duct to contract and expel its contents. Dr Schulze claims our diets are just too sweet, that we must get some bitter herbs and greens to stimulate the bile flow. He recommends eating some parsley or kale (*or any bitter herb/green*) just prior to a meal to get the bile flowing. Beet juice, alfalfa juice, wheat grass juices are a delight for the liver.

STEP FIVE: CLEANSE YOUR BLOOD

The blood stream is our “*River of Life.*” We very seldom give even a second thought to the blood that is coursing through our bodies until we have had an injury and this precious fluid flows out before our eyes. Then, as we frantically stop the bleeding, we notice that it is a red color so we figure we are blessed with “*good blood.*”

One of the first things we can do to improve the circulatory system is to clean out the channels through which the blood flows. Do to faulty digestion and the use of hard water, the walls of arteries, veins, and capillaries become coated with inorganic waste materials.

This waste forms a lining that does not allow the cell structure of the veins and arteries to be fed properly, so these originally soft pliable tissues become hard and lose their elasticity. Then, like an “old” rubber hose, they cannot expand or contract with ease and they become, through weakness, ballooned out, or brittle and then break, as in varicosity. The heavy use of breads, pastries, and refined sugars leach out the calcium from the veins and arteries and when there is a calcium deficiency we have weakness, which allows malfunction.

When the colon, kidneys, and liver have deteriorated in their ability to keep the blood clean of waste, the blood then cannot perform its many functions adequately. Oxygen distribution to the cells of the body is curtailed, the immune system is busy with having to handle some of the excess contaminants in the blood, and degenerative disease is the end result. So, again, we are back to where we started... **cancer is always associated with a lack of oxygen at the cellular level.**

There are actually several ways to cleanse your blood. One of the most effective is to take digestive enzymes between meals or before bed. Within a matter of minutes the enzymes enter the bloodstream and begin cleaning the debris out of the blood and stimulating the immune cells. But I also recommend that you use an herbal blood cleanser to remove toxic residues from the blood so that it is hostile toward cancer and tumors. The great blood cleansing herbs are as follows: red clover, burdock root, chaparral, poke root, and sheep sorrel. These are the herbs you will find in the famous blood cleansing formulas such as Hoxsey tea, Essiac tea, and Dr. Schulze’s formula. They literally **drive tumors out of the body.**

Jon Barron has an excellent blood cleanse available at his website: www.jonbarron.org. According to him, the best way to take this type of formula is as an herbal tincture, which concentrates the herbs up to 30 times. Take between 4 and 12 droppersful a day (*depending on your need*) in juice. Take rest days as needed, but finish the entire bottle. Repeat as often as needed.

NOTE: Much of this chapter was excerpted (*with permission*) from Dr. Darrell Wolfe’s article entitled “Spoiled Rotten.”

PART 3

DIET

NUTRITION

SUPPLEMENTS

&

EXERCISE



STEP OUTSIDE THE BOX

CHAPTER 9

NUTRITION & CACHEXIA

“DON’T BOTHER LOOKING IN THE HISTORY BOOKS FOR WHAT HAS SLAUGHTERED THE MOST AMERICANS. LOOK INSTEAD AT YOUR DINNER TABLE...WE EAT TOO MUCH OF THE WRONG THINGS AND NOT ENOUGH OF THE RIGHT THINGS.”
- DR. ANDREW SAUL

FIGHT IT OR FUEL IT

I have devoted several chapters to nutrition and diet, since one’s diet is the most important piece of the cancer treatment puzzle. Let me reiterate: **diet is the most important piece of the puzzle.** Beginning on an alternative cancer treatment protocol is like putting wood into the fireplace (i.e. *your body*). Once that wood catches fire and starts burning, the fire is going to kill the cancer cells that have colonized in your fireplace. However, eating a poor diet is like pouring water on that same fire. A bad diet will destroy many alternative cancer treatments. In fact, many scientific studies have proven that diet alone can cause cancer. So, if you want to reverse your cancer, then you must reverse your diet, since it is one’s diet that actually “cures” cancer since it builds the immune system and balances our “internal terrain.”

The truth be told, **many people have actually cured their cancer by doing nothing more than changing their diet.** The cancer diet is just as important as the cancer treatment. As I have compared many

effective alternative cancer treatments to those that were less effective, it is evident that even a small “glitch” in the cancer diet can interfere with the effectiveness of the particular treatment. If the diet is fueling the cancer cells, then they are very resistant to most treatments. Just remember this: ***if the diet is not fighting the cancer, then it is fueling the cancer.*** There is no middle ground.

It is the diet, ***not the treatment,*** that will provide a long-term cure for cancer, since the diet builds the immune system and balances the internal terrain. Both of these things are essential to have long-term success in fighting cancer. Much too often people think they are cured of cancer when the tumor is gone or when the cancer cells are dead. They then revert to their old way of life, their old diet, their old vices, and the cancer returns. What we must remember is that some internal condition allowed the cancer to grow initially, and if that internal condition returns, due to poor diet, then the cancer will also return.

The human body is made the most common elements found on earth. In Genesis, we read the story of the creation of the world and the Garden of Eden. We read in Genesis 2:7 that God “*formed man out of the clay of the ground and blew into his nostrils the breath of life.*” What did God use to create Adam? God made him from the richest top soils on earth. I am 100% convinced that every element was present in the soil which God used to make Adam, and their fruits and nuts and grains and vegetables grew in these same soils. But then Adam fell, and so did our environment...

With the top soils in America having been depleted of 90% of their mineral value, the needless chemicals and hormones that are added to our soils and foods, and the processing that destroys the vitamins and digestive enzymes, making them more acidic, it’s no wonder we have an epidemic of degenerative disease. In researching his book, Nutrition Under Siege, Alex Jack examined data published by the USDA ARS Nutrient Data Laboratory and concluded that a comparison of the data “*show(s) a sharp decline in minerals, vitamins and other nutrients in many foods since the last comprehensive survey published over twenty years ago,*” which he attributes to “*a steady deterioration in soil, air, and water quality.*” These elements, which

are now missing from the average American diet, are **crucial** to the maintenance of good health and to life itself.

A hundred years ago, cancer was virtually unknown, but today it seems like everyone has someone in their family who has died of this dreaded disease. What has changed? Have our bodies changed? Or have we depleted our soils of essential nutrients? Have we changed what we put into our bodies? And have these foods we ingest, in turn, altered our internal terrain in such a way as to make us more susceptible to disease?

In his article entitled “*Beating Cancer With Nutrition*,” Dr. Patrick Quillin provides us with a tremendous analogy: “*Fungus grows on the bark of a tree due to the favorable conditions of heat, moisture and darkness. You can cut, burn and poison a fungus all you want, but as long as favorable conditions persist, it will return. Similarly, cancer develops in a human when conditions are right. Documented factors that favor tumor formation include toxic burden, immune suppression, malnutrition, mental depression and elevated blood glucose. . . Unless we correct these cancer inducers, cytotoxic therapies are doomed to failure.*” What Dr. Quillin is saying is that we need to focus on the cancer **causes** rather than **symptoms**.

The lack of minerals and vitamins in the soil, the chemicals in our foods, drinking sodas, microwaving foods, eating junk foods, processed foods, foods contaminated with pesticides, and fake-foods are just a few of many dietary factors which have tainted our internal terrain, primarily altering our pH balance, and providing fertile soil for cancer to grow. ***Our acidic, junk-food, fast-food, empty-calorie diet is one of the primary villains in the rise of cancer.***

As I mentioned, there is no middle ground. Either the food we eat is fighting cancer, or it is fueling cancer. Thus, the food we eat can be grouped into 1 of 2 categories:

1. Food that **fuels** cancer: Either by feeding cancer cells or preventing our immune system from killing cancer cells. These foods include the following: mycotoxins (toxic fungus), acidic foods, sodas, sugar, trans-fats, coffee, MSG, sodium nitrite,

aspartame, processed foods, foods with pesticides, pasteurized milk & cheese, refined flours, fluoride, chlorine, etc.

2. Food that ***fights*** cancer: Either by killing cancer cells, balancing our pH, or preventing cancer from spreading through nutrients, enzymes, vitamins, and minerals. These foods include the following: spring water, apples and their seeds, apricots and their seeds, purple grapes and their seeds, raspberries, blueberries, strawberries, cantaloupe, carrots, broccoli, peppers, tomatoes, avocados, garlic, lemons, limes, coconut oil, flax seeds, flax oil, raw walnuts, chlorella, spirulina, herbs, etc.

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

The key to a successful “cancer diet” is to eat foods from Category 2 and avoid foods from Category 1. **Simple, right?** Not in 21st century America! A century ago, we didn’t have much processed food. Families would eat fresh fruits and veggies, fresh bread, fresh nuts,

fresh grass-fed beef, fresh eggs, and wash it down with mineral-rich well water or raw cow's milk. But today, mom is just too busy to cook. So, for breakfast, everyone has a few donuts. Mom and dad wash them down with coffee while the kids have a big fat glass of pasteurized chocolate milk. For lunch, it's a trip to the fast food restaurant for a cheeseburger and french fries with a soda and ice cream for dessert. And then dinner consists of pizza, chips, and beer or sodas, with a candy bar before bed.

Do you see a problem here? Unfortunately, the typical American diet is about 95% of the foods from Category 1. So, what are the problems with eating a diet of mainly Category 1 foods? To begin with, all of the Category 1 foods are highly acidic, thus causing an imbalance in our pH level. Let's take a look at french fries: we skin potatoes then slice them thin to expose their surface area, then we freeze them, then deep fry them in trans-fatty oil, and finally we glob on the salt. In the end, there is no fiber, no nutrition, and no minerals. **There is nothing left but a wad of undigestible, highly acidic waste.** Is it any wonder that some of us are barely making it from day to day? Our internal terrain is in horrible shape!

Secondly, the Category 1 foods are deficient in enzymes. Since enzymes will make food spoil quickly, the best way to keep foods from spoiling and give them a longer "shelf life" is to remove or destroy the enzymes. But "*aren't enzymes important?*" you may ask. **They absolutely are.** An important role that enzymes play in the human body is in food digestion. But our processed foods today are missing these vital enzymes.

ENZYMES, VITAMINS, & MINERALS

In the previous chapters, we have learned about the importance of keeping our body's pH in an alkaline state. Now, let's review some basic nutrition science. The chemistry of digestion is really simple; with all the three major types of food being protein, carbohydrates, and fats. We digest these three types of food into their usable forms: proteins into amino acids, carbohydrates into glucose, and fats into fatty acids. But remember, the important thing is not how

much food we eat, but rather how much food we **digest**. And how do we digest food? **Enzymes**.

But what's an enzyme? I just knew you were going to ask that! An enzyme is a catalyst. But what's a catalyst? I remember my high school chemistry teacher, Mrs. Reed, who taught us the definition of a catalyst. Just in case you've had a momentary memory lapse, a catalyst is a substance which causes a chemical reaction to take place without, itself, becoming a part of that chemical reaction. There are numerous enzymes within the body that are responsible for the hundreds of chemical reactions which must take place in order to keep the body functioning normally. But by themselves, enzymes are just pieces of the digestive puzzle. For enzymes to actually perform thousands of tasks, they need help from vitamins and minerals (co-factors). The enzyme and the co-factors orchestrate themselves in a complicated biochemical opus called a "complex." It is the **enzyme complex** that brings about the essential enzyme activity.

According to Dr. Tim O'Shea, "vitamins, minerals, and enzymes need each other, like the three legs of a stool. In the wacky marketplace of today's food supplements, it's like we're assaulted on all sides by people screaming **Vitamins!**, others yelling **Minerals!**, and others hollering **Enzymes!** as though each one alone were the Magic Bullet that can cure anything. The real ideas are cooperation, synergy, and co-factoring. Nothing exists in isolation in the body. An enzyme without co-factors has no enzyme activity. Enzymes are known to have very specific jobs to do. Their activity is compared to keys that must fit certain locks. Enzymes are long-chain proteins held together in very specific shapes by hydrogen bonds."

He continues, "Think of a ball of string which is held in a very weird shape by tiny strips of Velcro. If anything happens to the Velcro-like bonds, the enzyme protein unravels, losing its shape. Without the shape, the key can no longer fit the lock. Then it's no longer an enzyme - just another foreign protein. And what do foreign proteins cause in our body? Right - inflammation. Immune response. And that's exactly the meaning of **auto-immune**. The body now attacks itself because it senses there's an alien on board. **Self has become not-self.**"
www.thedoctorwithin.com

If the bonds are broken, the enzyme collapses, and can no longer do its specific job. Such a collapsed enzyme is said to be **denatured**. Free radicals, heating above 112°, processing, canning, genetic engineering, and fluoride are just a few things which can cause an enzyme to become denatured. Interestingly, the enzymes in raw food actually digest up to 75% of the food without the help of the enzymes secreted by the body.

There are three major classes of enzymes: metabolic enzymes (*enzymes which work in blood, tissues, and organs*), food enzymes from raw food, and digestive enzymes. There are also three main categories of digestive enzymes: 1. Protease (*for protein digestion*), 2. Amylase (*for carbohydrate digestion*), and 3. Lipase (*for fat digestion*).

Without enzymes, there is no life. Organic raw fruits and vegetables are awesome. They contain enzymes, some contain nitrilosides, and they are chock full of vitamins and minerals. However, as I have mentioned, cooking vegetables destroys their enzymes. At 112°F, enzymes are destroyed. **A good rule of thumb is to eat it raw:** raw fruits, raw vegetables, and raw milk. Cooking destroys enzymes and so does pasteurization. As I've mentioned, Pasteur was dead wrong. And pasteurization renders milk useless. You may as well drink a glass of white paint.

America is an obese nation. The CDC states that one out of every three Americans is considered obese (i.e. *weighs 30% more than his normal weight*). Ever wonder why? Well, part of it is that we are a nation of gluttons and sluggards. Self-control is considered passé. However, part of the reason for America's obesity is the fact that our diet typically is 90% cooked foods. Hog farmers learned a long time ago that hogs get fat twice as fast if they are fed cooked food. Cooking destroys what? You got it... **enzymes**.

Our white blood cells involved in the immune response are called *leukocytes*. Remember, all of us have cancer cells in our bodies, but these cells have a protein coating which keeps the leukocytes from killing them. However, God has a solution for this! The two enzymes most responsible for breaking down animal proteins (*proteolytic enzymes*) are **trypsin** and **chymotrypsin**. These enzymes are

produced in the pancreas. In a healthy person's body, these enzymes destroy cancer cells by breaking down the protein coating around the cell, and then the leukocytes attack the remaining cancer cell and destroy it.

Overcooking meat also destroys its enzymes. A major problem with overcooked meat is that is high in protein content and zero in food enzyme content (*unless it is rare*). So, we need our pancreatic enzymes to digest the protein. As I mentioned, we have a limited supply of these enzymes, and if they are being used to digest animal protein, then little or none is left to break down the protein coating on cancer cells. We have destroyed the natural enzymes in the meat by overcooking it and are forced to recruit our limited supply of pancreatic enzymes to digest the meat. However, if we're eating grass-fed beef or buffalo, then these animals have likely been grazing on grasses which contain ample amounts of nitrilosides.

What are nitrilosides? This is another term for vitamin B₁₇, which destroys cancer cells. Cancer cells, and only cancer cells, contain an enzyme called beta-glucosidase that converts nitrilosides into two molecules of glucose, one molecule of benzaldehyde (*a poison*), and one molecule of hydrogen cyanide (*another poison*). Since only cancer cells contain beta-glucosidase, this chemical conversion takes place only at cancer cells.

Another enzyme, rhodanese, always present in far larger quantities than the unlocking enzyme beta-glucosidase in healthy tissues, has the ability to completely break down both cyanide and benzaldehyde into a silicate, which is much like aspirin. It contributes greatly to pain control. Interestingly, malignant cancer cells contain no rhodanese at all, leaving them completely at the mercy of the two deadly poisons. **Only the cancer cells are specifically targeted and destroyed.** This is truly amazing.

DIET & DISEASE

Now, one of the major problems with most physicians is that they know virtually nothing about nutrition. Some medical schools teach on nutrition for a couple of weeks, but most doctors have never had

a course on nutrition. According to Dr. Phillip E. Binzel, “My biggest problem (at first) was understanding nutrition. In four years of medical school, one year of internship, and one year of...residency, I had not even one lecture on nutrition.”

Just take a look at most doctors and you will realize that they are generally very unhealthy people. Dr. Neal Pinckney, M.D. states “I found out that doctors typically aren’t given much training in nutrition and that some so-called nutrition experts are not well qualified in that field. A large sample of physicians were asked how much training they got in nutrition in medical school. The average was less than three hours, with many having only one hour or less. That’s out of nearly 3,500 hours of medical training. The truth is that doctors may get their nutrition information from the same newspapers and TV programs we do, and unless they have taken extra training in nutrition, **they may not know much more about nutrition than the rest of us.**”

Dr. Patrick Quillin is an expert at the relationship between diet and disease. He is dead on accurate when he preaches that we need to focus on the **root cause** of diseases rather than treating the symptoms: “Mrs. Jones might be suffering from metastatic breast cancer because, in her case, she is still hurting from a hateful divorce of 2 years ago, which drives her catecholamines into a stress mode and depresses her immune system; she goes to bed on a box of high sugar cookies each night; she has a deficiency of fish oil, zinc, and vitamin E; and she has an imbalance of estrogen and progesterone in her body. Her oncologist may remove the breasts, give her Tamoxifen to bind up estrogen, administer chemo and radiation; but **none of these therapies deals with the underlying causes of the disease.** And it will come back unless these driving forces for the disease are reversed.” www.patrickquillin.com

Our bodies are like cars. If we put high quality fuel into our car, the engine will run smoothly and quietly, it will perform better, and it will last longer. However, if we start filling the tank with diesel fuel, jet fuel, kerosene, rubbing alcohol, or lamp fuel, then we are bound to have some serious problems with the car’s engine. Eventually, our car will begin to make funny noises, overheat, and eventually won’t even start when we turn the key. A **good** car mechanic would quickly diagnose the problem: **low quality fuels are causing engine**

problems. A **bad** car mechanic would tell you that there is no correlation whatsoever between the fuels you put in the car and the performance you get out of the car. Unfortunately, when it comes to diagnosing “engine problems” in our bodies, many doctors are like bad car mechanics. They just don’t see the relationship between proper fuel (*nutrition*) and optimal performance (*good health*).

THE “CACHEXIA CYCLE”

Cancer’s main devastating effect on the body is cachexia, which is basically the “wasting away” of the body characterized by weight loss and eventual debilitation. According to the National Cancer Institute, *“It is estimated that **half of all cancer patients experience cachexia**, the rapid loss of a large amount of weight along with fatigue, weakness, and loss of appetite. Cachexia is a serious problem among many patients who have advanced cancer.”*

Dr. Harold Dvorak, former chief of pathology at Beth Israel Hospital in Boston, states *“In a sense, nobody dies of cancer. They die of something else – pneumonia, failure of one or another organs. Cachexia accelerates that process of infection and the building-up of metabolic poisons. **It causes death a lot faster than the tumor would, were it not for the cachexia.**”*

Cachexia is caused by the inefficient glucose burn resulting from **anaerobic** respiration. The cancer cell ferments the glucose and produces lactic acid, then the liver converts the lactic acid back to glucose (*a process called gluconeogenesis*), which also consumes enormous amounts of energy. Thus, the cancer cells convert glucose to lactic acid, the lactic acid travels to the liver, the liver converts the lactic acid back to glucose, which then travels back to the cancer cells...and so on. This cachexia cycle consumes an enormous amount of energy and may cause the body to start “*eating*” its own muscles and bones in order to feed the cancer cells.

Dr. Joseph Gold was a research scientist for NASA, a US Air Force officer, and an M.D. When he completed his distinguished military

career, he embarked on a mission with one goal, to answer the question: *Is there a chemical way to inhibit gluconeogenesis and stop cachexia?* In 1969, Dr. Gold heard biochemist Paul Ray deliver a paper explaining that hydrazine sulfate could shut down the enzyme necessary for the production of glucose from lactic acid. Many would say that this was “pure luck” or “coincidence,” but I would say that it was “**Divine Providence!**” He immediately tested hydrazine sulfate on mice and found that, as he suspected, it inhibited gluconeogenesis, thus reversing the cachexia cycle. **Voila!** Gold had discovered a perfect way to starve the cancer.

In the early 1970s, Dr. Gold met with the National Cancer Institute in an effort to begin clinical testing on hydrazine sulfate. During this meeting, he gave them his research files, discussed the recommended dosages, and detailed a list of those things that should **not** be used during therapy, such as alcohol, sleeping pills, and tranquilizers. Dr. Gold explicitly warned the NCI that patients could **die** if they were taking tranquilizers. So, what happened? The NCI tested it, did not follow the protocol, purposely sabotaged the study, killed off all the patients, and issued a paper stating that it was “worthless.”

So, **what’s the rest of the story?** Instead of following the protocol of sixty milligrams of hydrazine sulfate per single dose, the hospital performing the study engaged in underdosing and overdosing patients. In some instances, patients were being given only between one and five milligrams per day. Others who were started on the correct dosage and were showing improvements were abruptly switched to between ninety and one hundred milligrams per single dose, wiping out their good responses.

Also, it turns out that none of the NCI patients were warned about the fact that tranquilizers were a “**no no.**” Under pressure from the General Accounting Office (GAO) investigators, doctors who conducted one of the NCI trials admitted in a letter to the *Journal of Clinical Oncology* that virtually all (94%) of the subjects had taken tranquilizers while receiving hydrazine sulfate. Despite those admissions, the GAO still managed in its report to declare that the NCI’s trials “were not flawed.” **Huh? Not flawed?** That’s kind of like

stating that a car has a burned up motor, four flat tires, and no brakes, nevertheless it is ready for use on the highway.

According to Dr. Gold, the “*NCI’s actions with respect to hydrazine sulfate, characterized by intimidation, coercion, steadfast opposition, and possibly clinical trial-rigging, are truly one of the most shameful, scandalous medical undertakings in this country’s history, depriving vast numbers of people of their health, happiness, and lives.*” Every properly conducted, controlled clinical trial performed in accordance with internationally accepted standards of scientific conduct, **without exception**, has indicated efficacy and safety of hydrazine sulfate. The largest study of hydrazine sulfate, conducted on 740 cancer patients in the Soviet Union, found that it produced stabilization or regression of the tumor in 50.8% of the patients. <http://alternativecancer.us/hydrazinesulfate.htm>

Due to the fact that hydrazine sulfate inhibits gluconeogenesis, it causes tumors to stop growing, stop spreading, and oftentimes shrinking them and/or causing them to disappear. Webster Kehr accurately points out that the action of **hydrazine sulfate** is to stop the cachexia cycle **in the liver**; whereas **cesium chloride** stops the cachexia cycle **at the cellular level**.

Here is Dr. Gold’s Hydrazine Sulfate Protocol:

- One sixty milligram capsule every day for the first three days (at or before breakfast)
- One sixty milligram capsule twice a day for the next three days (at or before breakfast and before dinner)
- One sixty milligram capsule three times a day thereafter (approximately every eight hours beginning with breakfast)

This protocol is based on a patient weight of one hundred twenty pounds and above; for a patient below one hundred twenty pounds, half dosages have been reported effective. Generally it is reported that hydrazine sulfate is most effective when administered by itself (no other medications given for thirty minutes before or after administration of hydrazine sulfate) before meals. If adequate response is made on two capsules daily, patients have been reportedly maintained on this dosage schedule and not increased.

Best efficacy with hydrazine sulfate has been reported by maintaining daily treatment for forty-five days **followed by an interruption for one to two weeks**, then reinstatement of treatment. In addition, it has been reported that there is an incompatibility of hydrazine sulfate with ethanol, barbiturates, and tranquilizers. Patients receiving hydrazine sulfate should thus avoid alcoholic beverages, tranquilizers, and barbiturates.

Additionally, the patient must maintain a low carbohydrate diet (i.e. *don't eat sugar*). Remember, you are trying to starve the cancer, not treat it to a buffet dinner! Remember, **sugar feeds cancer**. So when the doctor tells the cancer patient (*who is wasting away from cachexia*) to eat whatever he can to put weight on, whether it be ice cream or candy, the doctor may as well have given him a gun with one bullet. **The worse thing that a “terminal” cancer patient can do is eat whatever he wants.**

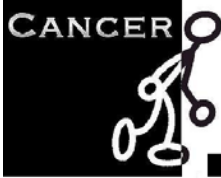
Warning! Hydrazine sulfate is an MAOI (*Monoamine Oxidase Inhibitor*) which inhibits an enzyme that breaks down monoamines (*serotonin, norepinephrine, and dopamine*) which control our moods. However, MAOIs also metabolize the amino acid tyramine. When taking an MAOI, tyramine is not broken down, and eating foods with tyramine can raise your blood pressure and heart beat and can a horrible headache. So, when you are taking hydrazine sulfate, do **NOT** eat foods containing tyramine such as aged, fermented, or pickled foods (*such as most cheeses, lunch meats, hot dogs, yogurt, wines, and beers*).

Also off limits are lima beans, fava beans, lentils, snow peas, soy beans, yeast extracts/brewer's yeast, sauerkraut, bananas, avocados, canned figs, raisins, red plums, raspberries, pineapples, chocolate, caffeine, peanuts, almonds, and pumpkin seeds. (*This is not a comprehensive list.*) In general, any high protein food that has undergone aging should be avoided. Also, any over-the-counter cold or allergy remedy should also be avoided. Usage of Vitamin C should be restricted to 250 mg/day and Vitamin B₆ should be avoided altogether.

Important: Hydrazine Sulfate is frequently used with other alternative cancer treatments, which we will discuss later in the

book, which may or may not have food/supplement/drug restrictions. Keep in mind that hydrazine sulfate also has a long list of prohibited foods. If you begin to get bad headaches, the chances are that you have eaten foods containing tyramine. As always, you should check with your doctor or nutritionist if you have a question.

My recommended vendor of hydrazine sulfate is found here: www.essense-of-life.com/moreinfo/petproducts/hydrazinesulfate.htm. I know that it is advertised for pets, but it is the highest quality. And please remember that hydrazine sulfate should be taken in **exact doses** because it is a drug. Overdosing can do more harm than good.



STEP OUTSIDE THE BOX

CHAPTER 10

HEALTHY HERBS & FOODS

"LET FOOD BE YOUR MEDICINE AND MEDICINE BE YOUR FOOD."
-HIPPOCRATES

The above quote by Hippocrates hits the nail on the head when dealing with cancer prevention. In my opinion, **what you eat (and what you don't eat) are the most important factors in preventing cancer.** Eating a bad diet is like putting water in your car's gas tank. Our food is what fuels our body, and without proper nutrition, it is impossible to get maximum results from other alternative cancer treatments.

As a matter of fact, oftentimes the **cause** of cancer is the foods we consume. Let me put it another way. Many people who get cancer get it because of the things they have eaten. That's right. Improper dietary choices have created an internal terrain which feeds cancer cells. In fact, many scientific studies have proven that diet alone, meaning the foods that were eaten, caused cancer.

Thomas Edison is quoted as saying, "*the doctor of the future will no longer treat the human frame with drugs, but rather will cure and prevent disease with nutrition.*" If he had replaced both instances of the word "will" with "should," then he would have been correct. Doctors **should** cure and prevent disease with nutrition. Unfortunately, most doctors still believe that drugs are the answer and completely overlook nutrition. This chapter highlights the best foods/drinks which everyone should add to their cancer-fighting arsenal. They are listed in alphabetical order.

COCOCHIA™ BARS & COCOPURE™ CHOCOLATE TEA

I think it's only fitting to begin this chapter with two delicious chocolate “snacks.” To be honest, chocolate is one of life's most misunderstood foods. Too often it's considered an unhealthy indulgence, rightly so if you're talking about milk chocolate bars, chocolate candies, chocolate ice cream, or chocolate syrup. However, just the opposite is true when you eat or drink a pure cocoa extract. Believe it or not, pure cocoa froths with many cancer preventing compounds.

Do you know that many of the most popular “healthy” energy bars on the market are in all likelihood just as bad for your health as regular candy bars? Many energy bars contain pasteurized milk and soy protein, two foods that can cause significant damage to your tissues every single time you eat them. However, there is one snack bar which is just as good for you as it is yummy: **CocoChia™ bars**.

These bars deliver four powerful “superfoods” (*raw cocoa, coconut, chia seeds, and almonds*) in a great-tasting, convenient form. And the ingredients are **100% organic**. The unprocessed whole chia seeds provide a steady, slow-burning source of energy, while the organic coconut gives essential fats the body needs. Organic raw almond butter, micro-encapsulated probiotics, non-GMO brown rice protein, Therasweet™, and organic cocoa round out the healthy ingredient list, providing excellent nutrition and great flavor with no sugar added or alcohol.

CocoChia™ bars are high in fiber and gluten-free, making them a good choice for many people who have digestive disorders. They also are low in calories and have a low glycemic rating, making them a good choice for those who are looking to reach and maintain their ideal weight and those who have trouble regulating their blood sugar and insulin levels. My family absolutely **loves** to snack on CocoChia™ Raw Food Bars. You can purchase CocoChia™ bars at www.livingfuel.com.

About a year ago, I discovered a healthy hot chocolate drink which my wife absolutely loves: **CocoPure™ Chocolate Tea**. Each cup of CocoPure™ has 4,000 milligrams of concentrated cocoa, but that's not all. In addition, the health benefits of cocoa have been further fortified by adding resveratrol, green tea, and soluble fiber. This unique combination of nutrients supports cardiovascular health, arterial health, increased blood flow, digestive health, and the immune system.

Studies on the nutrients in CocoPure™ have been published in the *Journal of the American Medical Association*, *American Journal of Physiology*, *Heart and Circulatory Physiology* to name a few. CocoPure™ is available at www.newvitality.com.

CURCUMIN

Curcumin, a substance in the spice turmeric (*which is ingredient in curry*), has several cancer-fighting properties. A study found that in laboratory, curcumin can actually repair DNA that has been damaged by radiation. This is very good news, because one cannot avoid all radiation sources. According to University of Chicago scientists, curcumin inhibits a cancer-provoking bacteria (*H. pylor*) associated with gastric and colon cancer (Magad GB, *Anticancer Research*, Nov-Dec 2002).

Curcumin can also protect cells against xenoestrogens because it can fit to the same receptor as estrogen or estrogen-mimicking chemicals. In a study on human breast cancer cells, curcumin reversed growth caused by a certain form of estrogen by 98%, and growth caused by DDT by 75%. Another study found that a mixture of curcumin and soy isoflavones inhibited halted breast cancer growth that was induced by DDT and certain environmental pollutants by 95% (*in vitro*).

Yet another anti-cancer property of curcumin is that it is a powerful antioxidant. It can therefore protect our bodies from free radicals that damage DNA. This is also why turmeric (*which contains curcumin*) can be used for preserving foods. Tests in Germany, reported July 2003, found that “*all fractions of the turmeric extract*

preparation exhibited pronounced antioxidant activity.” Turmeric extract tested more potent than garlic, devil’s claw, and salmon oil (Journal of Pharmacy & Pharmacology, July 2003).

In their latest of a series of reports, scientists at M. D. Anderson Cancer Center in Houston state, “Curcumin can suppress tumor initiation, promotion and metastasis. Pharmacologically, curcumin has been found to be safe. Human clinical trials indicated no dose-limiting toxicity when administered at doses up to 10 g/day. All of these studies suggest that curcumin has enormous potential in the prevention and therapy of cancer.” (Aggarwal, BB et al, Anticancer Research, Jan-Feb 2003). And in the June 1998 issue of *Molecular Medicine*, researchers at Harvard Medical School published their findings that curcumin inhibits angiogenesis (the formation of new blood vessels) which tumors use to nourish themselves as they spread.

Since curcumin is found in the spice turmeric, and turmeric is the principal ingredient in curry, you can enjoy the protective benefits of curcumin by just adding curry spice to your foods.

FRESH ORGANIC VEGETABLE JUICE

I have separated fresh vegetable juice from the plant foods category, even though the juice comes entirely from fresh organic plant foods, since fresh vegetable juice can be a meal in and of itself. Most people have compromised intestines due to eating junk food for years and years, thus they have a difficult time absorbing nutrients. Juicing our plant foods is the equivalent of pre-digesting them, thus we are able to absorb more nutrients. Fresh vegetable juice is also a fantastic way to alkalize our inner terrain, and it is a tremendous source of enzymes. Since fruits and vegetables are juiced raw, the enzymes remain alive.

Fresh juicing may be the answer for those of you who just don’t like to eat raw vegetables. I know that if you’re used to hamburgers and fries, that the thought of eating a fresh salad with broccoli, carrots, cucumbers, beets, and celery may not be the most appetizing thought, so fresh juice is an excellent alternative to eating the

recommended three to four pounds of fresh, raw vegetables per day. Juicing is simply the most practical way to meet your daily needs of fresh vegetables and fruit.

We try to juice every morning. Our juice usually includes organic carrots, beets, apples, celery, and cucumbers. The children love it. I usually drink about half of my juice, then I add the pulp into the other half. The benefit of this is that it adds fiber to the juice, which serves as a fertilizer to healthy bacteria in the colon. Drink the juice **immediately** after juicing, since the nutrients and enzymes begin to deteriorate from exposure to oxygen and light.

A tremendous cancer fighter is **wheatgrass juice**. According to Webster Kehr, “*If we look at oxygen as a bullet to kill cancer cells, then we should look at wheatgrass as a shotgun blast at treating cancer. The number of ways it deals with cancer is incredible. First of all it contains chlorophyll, which has almost the same molecular structure as hemoglobin. Chlorophyll increases hemoglobin production, meaning more oxygen gets to the cancer. Selenium and laetrile are also in wheatgrass, both are anticancer. Chlorophyll and selenium also help build the immunity system. Furthermore, wheatgrass is one of the most alkaline foods known to mankind. And the list goes on.*” Wheat grass juice has been shown to cleanse the lymph system, restore pH balance, build the blood, and remove toxic metals from the cells. It also contains chlorophyll, which has a chemical structure similar to hemoglobin that helps transport oxygen in the blood.

GARLIC

There has been more written about the wonderful benefits of **garlic** than any other food source known. Its history dates back 3,500 years. Hippocrates, the father of medicine, was the first to write that garlic was an excellent medicine for eliminating tumors. Recent studies on garlic have shown that it kills insects, parasites, bad bacteria, and fungus. It also eliminates various tumors, lowers blood sugar levels, lowers harmful fats in the blood, and prevents clogging of the arteries.

It has been discovered that the diallyl sulfide in garlic reduces the formation of carcinogens in the liver (*Cancer Research*, 1988; 48:23). In addition, ajoene, another major compound of garlic has been shown to induce apoptosis in human leukemic cells (Dirsch VM et al, “Ajoene, a compound of garlic, induces apoptosis in human promyeloleukemic cells,” *Molecular Pharmacology*, March 1998).

It is interesting to note the similarity between diallyl sulfide and dimethyl sulfide (DMSO), which is covered in detail later in the book. According to Dr. David Gregg, “They both consist of one sulfur with two organic molecules attached. In the case of dimethylsulfide two methyl groups (CH₃) are attached, in the case of diallyl sulfide, to allyl groups (C₃H₅) are attached...there is an equilibrium established between dimethylsulfide (no oxygen attached), DMSO (one oxygen attached to the sulfur) and MSM (two oxygen’s attached to the sulfur). Because of this equilibrium, this set of molecules can act as an effective oxygen transport system. Since diallyl sulfide is a very similar molecule and the same bonding sites are available on the sulfur, one would expect it to behave in a similar manner, and it seems to... this would suggest that one of the major anticancer contributions of diallyl sulfide (and thus garlic) is to enhance oxygen transport to the cancer cells.” www.krysalis.net/cancer2.htm

We eat garlic in almost everything – dips, salad dressings, sauces, soups, wraps, you name it. But remember...**cooking kills garlic’s cancer-fighting properties**. There are cases on record where cancer was beaten with a good detox program and garlic alone. Here’s a powerful anti-cancer concoction: blend up some raw broccoli, garlic juice, onions and ginger. If you can stand the taste, it’s one of the most potent cancer fighting concoctions anywhere – and the ingredients are available at your local grocery store.

GINGER

Ginger is one of the most heavily consumed dietary substances in the world and has been shown to inhibit tumor growth. Plants of the ginger family have long been credited with therapeutic and preventive powers and have been reported to have anti-cancer activity. The substance called 6-gingerol is the main active

compound in ginger root and the one that gives ginger its distinctive flavor. At least two recent studies suggest that 6-gingerol suppresses proliferation of human cancer cells through the induction of apoptosis.

As for the form of ginger to be taken, it is **essential** that it contain the key ingredient, which is 6-gingerol. Gingerol is sensitive to heat and when ginger is cooked the cancer-fighting potency of the gingerol is drastically reduced. Therefore, please do not waste your precious time taking ginger flavored foods and tea. Use only products that are certified or guaranteed to contain 6-gingerol. Two types of product fit these requirements. The best appears to be ginger root powder in capsules. Enough for one treatment usually costs less than \$10. The other product is the alcohol extract of ginger, which is sometimes difficult to obtain and very expensive.

I have recently been corresponding with a formerly Stage IV cancer patient who cured his cancer with ginger. For a 150 pound person, he recommends taking between 4 and 6 grams of ginger root powder per day. The ginger root should be taken for one to three days. His exact words are *“I had previously been using ginger root powder in 500mg capsules for stomach upset. But then tried it successfully at a higher than label dosage instead of anti-biotic. When prostate cancer spread to and blocked my colon, I tried ginger. I took up to six capsules, four times a day. I was very lucky. It worked!”*

GRASS-FED BEEF

BEEF? Not just beef . . . **GRASS-fed** beef.

Before the introduction of harvested grains as feed, cattle thrived on lush green grasses. Much like human consumption of greens, these fertile green grasses provide cattle with the most complete and balanced diet, promoting healthy growth without excessive fat production. As a result of their 100% grass diet, the meat from these cattle has the perfect ratio of omega-6 to omega-3 fatty acids, and it is rich in conjugated linoleic acid (CLA). A great many studies have shown CLA fights cancer in lab animals.

In a recent study feeding rats small amounts of CLA shrank mammary tumors by 45%. Scientists added very small amounts of CLA to breast cancer cells growing in a culture. By the 8th day, the CLA had killed 93% of the cells. And a group of Finnish researchers found that women who consumed the most CLA in their diets had a 60% lower risk of breast cancer than those who consumed the least. (www.drstallone.com/cancer_article19.htm) CLA also stimulates the immune system, improves insulin sensitivity, improves blood lipid levels, improves lean body mass to fat ratios, and has no known practical toxicity levels.

Modern farming practices have led to a steady decline in the amount of CLA supplied in the diet over the past half century. Today's dairy products have only around 25% of the CLA content they used to have around 1960. A good case could be made that the cancer, heart disease, diabetes, and obesity epidemics we are now experiencing are largely due to the decline of CLA in the diet. As a matter of fact, part of the Biblical rationale for avoiding the eating of "unclean" scavenger animals (*lobster, shrimp, shellfish, pigs*) may have been due to the fact that these animals supply very little CLA. Unfortunately, if you go to the supermarket to purchase beef, you will get beef that has been **GRAIN**-fed. As a result the omega-6 to omega-3 ratio will be completely out of whack and you will not be getting the CLA content that you would from **GRASS**-fed beef.

We also love to eat **GRASS**-fed *buffalo*. North Dakota State University conducted a study on the nutritional differences between grass-fed and grain-fed buffalo. The results of that study showed that grass-fed buffalo had Omega-6 to Omega-3 ratios of 4:1, while the grain-fed buffalo had ratios of 21:1. Additional studies clearly indicate that the longer cattle are fed grain, the greater their fatty acid imbalance. For instance, after 200 days in the feedlot (*typical in the USA*), grain-fed cattle have Omega-6 to Omega-3 ratios in excess of 20:1.

HEALTHY OILS & FATS

Coconut oil is the healthiest oil you can consume. **Period.** One of the most impressive features of coconut oil is that it is extremely

rich in lauric acid (about 50% by volume). The only other abundant source of lauric acid found in nature is in human breast milk. A great deal of research has established the fact that lauric acid is used by humans to destroy viruses, and various pathogenic bacteria and microbes such as yeasts, fungus, bacteria, parasites, and molds.

According to Mary Enig, the nation's leading expert on fats and oils: *“Coconut oil has a unique role in the diet as an important physiologically functional food. The health and nutritional benefits that can be derived from consuming coconut oil have been recognized in many parts of the world for centuries...coconut oil provides a source of antimicrobial lipids for individuals with compromised immune systems, and is a non-promoting fat with respect to chemical carcinogenesis.”* www.westonaprice.org/knowyourfats/coconut_oil.html

Coconut oil contains no trans-fats and about 2/3 of the saturated fat in coconut oil is made up of medium-chain fatty acids (MCFAs). By contrast, most common vegetable or seed oils are comprised of long-chain fatty acids (LCFAs), which put strain on the pancreas and the liver, are predominantly stored in the body as fat, and harden the arteries with cholesterol. The MCFAs in coconut oil have antimicrobial properties, are beneficial to the immune system, are easily digested for quick energy, and cause weight loss. ***That's right...eating coconut oil will help you lose weight!***

Over 50% of Americans are overweight. One of the paramount benefits of coconut oil lies in its ability to stimulate your metabolism. Back in the 1930s, Dr. Weston Price, a dentist, traveled throughout the South Pacific, examining traditional diets and their effect on dental and overall health. He found that those eating diets high in coconut products were healthy and trim, despite the high fat concentration in their diet.

Then in the 1940s, farmers found out (*by accident*) that when they tried using inexpensive coconut oil to fatten their livestock, it didn't work! Instead, coconut oil made the animals lean! Since then, many animal and human research studies have demonstrated that replacing LCFAs with MCFAs results in both decreased body weight and reduced body fat percentage. So, by changing the fats in your

diet from the unsaturated LCFAs found in vegetable or seed oils to the MCFAs in coconut oil, you will lose weight!

We've all heard the rhetoric about saturated fat being unhealthy, but this is complete nonsense. The saturated fat in coconut oil is actually health promoting. How did that rumor get started? Well, it was based on some flawed studies performed almost 50 years ago. The studies used hydrogenated coconut oil, and the myth was perpetuated by the vegetable oil industry (*aided by the FDA*) back in the 1980s. Are you shocked? I'm not...

The fact of the matter is that *all* hydrogenated oils are bad, since they have been chemically altered. But virgin coconut oil is wonderful for the human body. That is the only coconut oil we consume. As a matter of fact, we use so much coconut oil that we purchase it a gallon at a time! According to Dr. Bruce Fife, "*coconut oil is the healthiest oil on earth.*"

Olive oil is the only vegetable oil that can be consumed fresh pressed. The beneficial health effects of olive oil are due to both its high content of monounsaturated fatty acids and its high content of antioxidants. Studies have shown that olive oil offers protection against heart disease by controlling LDL ("*bad*") cholesterol levels while raising HDL ("*good*") levels. No other naturally produced oil has as large an amount of monounsaturated as olive oil. We use olive oil all the time in salad dressings and vegetable medleys.

When buying olive oil you will want to obtain a high quality **extra virgin** olive oil. The oil that comes from the first "pressing" of the olive is cold pressed (i.e. *extracted without using heat or chemicals*) is awarded "*extra virgin*" status. This is the best oil because it is handled less, thus it is closer to its natural state and contains higher levels of antioxidants, vitamin E, and phenols. However, while I recommend that you include olive oil as a healthy part of your diet, you should **not** cook with olive oil, as heat can damage the fatty acids and create toxins called acrylamides. If you are going to cook with oil, use coconut oil, since it does not undergo toxic chemical changes when heated. We love making french fries with coconut oil. Also, Charlene makes some really great fried green tomatoes too.

Fish oil contains the most beneficial form of omega-3 fatty acids. However, due to the fact that over half of the U.S. burns coal to generate electricity and 80,000 pounds of mercury is dumped into the oceans every year, most fish is poisoned with toxic mercury. So, in order to get the essential fatty acids, we take fish oil (*summer time*) and cod liver oil (*winter time*). Since cod liver oil is high in vitamin D, which is chiefly supplied by sunshine, it is best to take during winter months when we get less exposure to sunshine. During the summer, we get plenty of vitamin D from the sun, so we take fish oil. The kids love taking their fish oil every night before bed.

Avocados are an excellent source of fats. According to the late Dr. Robert Atkins, “*avocados are not only nourishing they are a heart promoting, cancer fighting fruit that offers unequalled health benefits.*” Not only are avocados a rich source of omega-6 fatty acids including oleic acid, which has recently been shown to offer significant protection against breast cancer, but these fruits also contain the highest amount of the carotenoid lutein of all commonly eaten fruits, as well as measurable amounts of related carotenoids (*zeaxanthin, alpha-carotene and beta-carotene*) plus significant quantities of tocopherols (*vitamin E*). In a laboratory study published in the January 2005 issue of the *Journal of Nutritional Biochemistry*, an extract of avocado containing these carotenoids and tocopherols inhibited the growth of both androgen-dependent and androgen-independent prostate cancer cells.

However, when researchers tried exposing the prostate cancer cells to lutein alone, the single carotenoid did not prevent cancer cell growth and replication. Not only was the whole matrix of carotenoids and tocopherols in avocado necessary for its ability to kill prostate cancer cells, but the researchers also noted that the significant amount of monounsaturated fat in avocado plays an important role. Carotenoids are lipid (*fat*)-soluble, which means fat must be present to ensure that these bioactive carotenoids will be absorbed into the bloodstream. Just as God intended, avocado delivers the whole health-promoting package. We eat avocados almost every day, in salads, in “*Daddy Dip*,” in raw pies, by themselves, and in salad dressings. They are absolutely delicious and provide us with an excellent source of natural omega-6 fatty acids.

PLANT FOODS

When it comes to which foods offer the best cancer “*medicine*,” nothing beats plant foods, due to the fact that they contain scores of enzymes and thousands of phytochemicals. “*Phyto*” means plant, thus phytochemicals are plant chemicals, including vitamins and minerals. However, there are thousands of other phytochemicals other than vitamins and minerals which are contained in plants.

One well-known phytochemical is beta-carotene, which gives carrots and sweet potatoes their bright orange color. Beta-carotene is actually a member of a family of phytochemicals called carotenoids, which give fruits and vegetables their bright colors. Research indicates that phytochemicals lower our risk of cancer. It’s important to keep in mind that **only plants** (*fruit, vegetables, nuts, seeds, grains, legumes*) contain phytochemicals.

Plant foods, especially the green leafy vegetables, contain enzymes which enable the body to detoxify (*cleanse*) itself more efficiently and eliminate cancer causing substances. Green plant foods contain chlorophyll, which has a chemical structure similar to hemoglobin that helps transport oxygen in the blood. Plant foods are also loaded with antioxidants, which help protect the body against oxidation. As we discussed earlier, our cells use oxygen and glucose to produce ATP, our energy supply. However, free radicals are a by-product of this chemical reaction. Free radicals, also called oxidants, cause oxidation, which damages the cell walls. Oxidation is like rust on your car.

The health benefits of regularly eating plant foods are nothing short of miraculous. Based on the latest health research, there is no doubt that plant foods can reduce the risk of cancer, and even if you already have cancer, plant foods help you recover and stay healthy. There are literally **thousands** of studies telling us that plant foods reduce the risk of getting cancer and also prevent the recurrence of cancer.

We absolutely love raspberries, strawberries, blackberries, and blueberries. All of these berries contain a variety of phytochemicals

and antioxidants. Berries are also rich in many vitamins and minerals, including zinc, calcium, and magnesium and zinc – minerals that most Americans lack. All of these berries also contain ellagic acid, a compound which prevents cellular mutations and is an anticarcinogen. Clinical tests also show that ellagic acid prevents cancer cells from inhibiting the p53 gene to cause cell apoptosis.

Interestingly, cherries contain the monoterpene *perillyl alcohol*, which can induce tumor cell death. In 1999, Michigan State University scientists discovered that cherries' dark coloring material is an outstanding source of antioxidants known as “*anthocyanins*.” In fact, the antioxidant activity of tart black cherries is greater than of vitamin E, which is the “*benchmark*” antioxidant. Cherries also contain pain-relieving compounds (*cox inhibitors*). Finally, cherries contain surprisingly high levels of melatonin, a hormone previously thought to be produced only by the pineal gland in the brain. Melatonin is part of the body's natural way of regulating sleep which also has anti-cancer properties.

Organic germanium is really the sesquioxide form of a very prevalent trace mineral. Germanium sesquioxide or “Ge-132” is a strong oxygenation booster with remarkable abilities. **It not only will oxygenate your entire body when swallowed, but it can also do this through the skin when germanium salts are dissolved in water.** Ge-132 not only boosts oxygenation but spares oxygen as it **chelates** toxic metals such as mercury, lead and cadmium from your body.

Ge-132 is able to restore normal function to T-cells, lymphocytes, NK (*natural killer*) cells, and stimulate the production of antibodies. It is believed to severely limit metastasis of cancers and tumors and most importantly, because it is completely secreted from the body there is absolutely **no toxicity** and there are **no side effects**. Germanium is found in many plants such as garlic, ginseng, aloe, and alfalfa so if you are not familiar with the word “*germanium*” do not be alarmed.

All three of my children love apples, and have learned to eat the seeds as well. The seeds contain nitrilosides (*Vitamin B₁₇*) which has been shown to kill cancer cells. Fresh sprouts are also a favorite of

ours – they are a whole food. We eat them on sandwiches and salads. Sprouting grains and vegetables also increases their alkalinity. We also love to use fresh herbs. Several herbs, such as Sheep Sorrel and Black Walnut (*two ingredients in Essiac Tea*), are known to be strong cancer fighters. Also, turmeric, which contains curcumin, is a spice that fights cancer.

We have begun to love a mixture of tomatoes, red peppers, avocados, onions, garlic, oregano, cilantro, lime juice, and extra-virgin olive oil. I put it in the food processor for about thirty seconds and then we spread it on vegetables and flax crackers. The kiddos affectionately call this mixture “Daddy Dip.” This mixture is highly alkalizing to the body, and it also tastes great. Why do we combine these specific veggies?

- Tomatoes – contain lycopene, which is a powerful antioxidant and carotenoid, and also very alkaline
- Red peppers – high in vitamin C and beta carotene and very alkaline
- Avocados – an excellent source of Omega-3 fats and very alkaline
- Garlic – contains diallyl sulfide (*chemically similar to DMSO*) and ajoene (*induces apoptosis in cancer cells*) – a powerful oxygen transport enhancer and anticarcinogen – also one of the most powerful antifungals in the world.
- Oregano – extremely potent antioxidant and alkaline as well
- Cilantro – helps remove (*chelate*) heavy metals
- Lime juice – adds a “zest” to the mixture and highly alkaline
- Olive Oil – contains vitamin E, vitamin A, chlorophyll, magnesium, and a ton of other nutrients.

Two important things to remember about plant foods: 1) eat them **raw** - cooking over 112° destroys the enzymes, and 2) eat **organic** fruits and vegetables (*if possible*) - conventionally grown plant foods have likely been sprayed with toxic pesticides.

However, if **you can't find organic produce**, don't use that as an excuse to go back to pizza and beer. Go ahead and buy the conventional produce and wash it well in warm, soapy water.

RAW MILK

RAW MILK? Yep, raw. Not pasteurized. Pasteurization has its roots in the false germ theory of Louis Pasteur.

God gave us pure milk in a natural raw form that is loaded with goodies that boost our natural immune systems as well as give us many essential enzymes, vitamins and minerals that keep our digestive systems and bodies working at the optimum levels of health. But the man-altered, pasteurized milk we buy at the store is a devitalized, enzymeless, nutritionless food. Unlike the propaganda we hear on television, pasteurized milk is incapable of rebuilding or maintaining bones and teeth as it is **not** a good source of calcium (*since the enzyme phosphatase which is required to absorb calcium is destroyed during the pasteurization process*).

Studies also have shown that lipase (*an enzyme in milk which helps fat digestion*) is totally destroyed by pasteurization, which also diminishes vitamin content, destroys vitamins B₁₂ and B₆, kills beneficial bacteria, and is associated with allergies, increased tooth decay, colic in infants, growth problems in children, osteoporosis, arthritis, heart disease, and cancer. In the words of Dr. Timothy O'Shea, pasteurized milk is equivalent to “*liquid formica*.” To learn about the huge difference between **raw** and **pasteurized** milk, check out www.newtrendspublishing.com/USOMilk/Chapter15.pdf.

The bottom line is that **raw milk** is the only healthy milk to consume since it contains all the vitamins and minerals in their most pure and healthy form. It also contains many beneficial bacteria and enzymes that aid digestion, making it a wonderful addition to a healthy lifestyle.

Another benefit to raw milk is that you can rest assured that the animal hasn't been injected with rBGH (*recombinant Bovine Growth Hormone*). In the words of Maris Abelsen, “*Recombinant Bovine Growth Hormone (rBGH) increases levels of cancer causing hormones and other dangerous chemicals in milk. It was the first genetically engineered drug to be widely marketed through the food supply, and*

the few long term studies that have been done raise serious questions about its safety. We've got to stop it, now."

SPROUTS

Sprouts are one of the most complete and nutritional foods on the planet. They are rich with vitamins, minerals, proteins, and enzymes and deliver them in a form which is easily assimilated and digested. Interesting, since sprouts are **live** foods, they will continue to grow slowly and their vitamin content will actually increase after you harvest them. Compare this with store-bought vegetables and fruits, which start losing their vitamin content as soon as they're picked and often have to be shipped thousands of miles.

Researchers at Johns Hopkins University School of Medicine have discovered that three-day old broccoli sprouts have exceptionally high amounts of a natural cancer-fighting compound called sulforaphane glucosinolate (SGS) which is an indirect antioxidant. SGS works as a catalyst through boosting the body's own antioxidant systems by promoting the production of a variety of protective enzymes.

Sprouting is a very effective way to add raw foods to your diet. If you can supply a jar, some screen or netting, and rinse the sprouts twice a day, you can grow delicious, organic sprouts in less than a week. Growing your own sprouts means having your own private supply of fresh organic vegetables every day from a couple square feet of counter space. And seeds can multiply up to fifteen times their original weight.

Growing sprouts is easy and takes only a few minutes of care per day. Just add water. No special lights are required. One pound can grow in only twelve inches of space depending on how you are setup. Common seeds for sprouting include alfalfa, broccoli, cabbage, fenugreek, garbanzos, lentils, peas, radish and red clover.

Be sure to refrigerate your completed sprouts. Ideally you want to eat them right after you pick them. Those sprouts are still growing in your plate! That's what I call "**fresh**"!

WATER

Although it concludes the chapter, water is probably the most important topic. Without food, most humans will die in a month. Without water, we're dead in less than ten days. Water makes up over 70% of the body, around 90% of the blood, and about 85% of the brain. The problem with most of us is that we have been sold a bill of goods – when you're thirsty, drink a soda, or the latest “sports drink” (*chock full of sugar, by the way*). Americans drink coffee and sodas and beer and anything else we've been conditioned to buy, but most of us forget to drink enough **water**.

Many people drink distilled or osmotic water, but in my opinion, this is **dead water**. Yes most of the toxic chemicals have been removed, but also missing are the alkaline minerals and oxygen...especially in the case of distilled water, since it is “acidic.” My family drinks tap water that has been filtered with our Big Berkey water filter, which filters out lead, arsenic, chlorine, fluoride, etc. All that remains is pure water. We used to drink bottled water, but the plastic leaching was a concern to us, so we switched to filtered water.

If you are thirsty, it means your cells are already dehydrated. A dry mouth should be regarded as the last outward sign of dehydration. That's because thirst does not develop until body fluids are depleted well below levels required for optimal functioning. Some statistics show that as much as 90% of us are walking around in a chronic state of dehydration. One way to tell if you're dehydrated is to check the color of the urine. If it's dark all the time, you're probably dehydrated. The easiest way you can improve your health is to **drink more pure water**.

Physicians rarely promote the curative properties of water, but the late Dr. Fereydoon Batmanghelidj, M.D. (*aka “Dr. Batman”*) studied water's effect on the human body and found it to be one of the best pain relievers and preventative therapies in existence. His pioneering work shows that Unintentional Chronic Dehydration (UCD) contributes and even produces pain and many degenerative diseases that can be prevented and treated by increasing water intake on a regular basis.

Dr. Batman was born in Iran in 1931, and he practiced medicine in the UK before returning to Iran where he played a key role in the development of hospitals and medical centers. When the Iranian Revolution broke out in 1979, Dr. Batman was placed in the infamous Evin Prison as a political prisoner for thirty-one months. It was there he discovered the healing powers of water.

One night, Dr. Batman had to treat a fellow prisoner with crippling peptic ulcer pain. With no medications at his disposal, Dr. Batman gave him two glasses of water. Within several minutes, his pain completely disappeared. He was instructed to drink two glasses of water every three hours and became absolutely pain free for his four remaining months in the prison. While in prison, Dr. Batman successfully treated over three thousand fellow prisoners suffering from stress-induced peptic ulcer disease with **water alone**.

While in prison he conducted extensive research into the medicinal effects of water in preventing and relieving many painful degenerative diseases. Evin Prison proved an ideal “*stress laboratory*,” and despite his being offered an earlier release, Dr. Batman chose to stay an extra four months in prison to complete his research into the relationship of dehydration and bleeding peptic ulcer disease. The report of his findings was published as the editorial of the *Journal of Clinical Gastroenterology* in June 1983.

On his release from prison in 1982, Dr. Batman escaped from Iran and came to America. He wrote his ground-breaking book *Your Body’s Many Cries for Water* in 1992, which has been translated into fifteen languages and continues to inspire readers worldwide. In his book, he stated that a dry mouth is not a reliable indicator of dehydration. The body signals its water shortage by producing pain. Dehydration actually produces pain and many degenerative diseases, including asthma, arthritis, hypertension, angina, adult-onset diabetes, lupus, and multiple sclerosis.

Dr. Batman’s message to the world was, “*You are not sick, you are thirsty. Don’t treat thirst with medication.*” Learn more about Dr. Batman and his amazing research at www.watercure.com.



STEP OUTSIDE THE BOX

CHAPTER 11

SUPER SUPPLEMENTS

"I WILL NEVER EAT ANOTHER MEAL WITHOUT TAKING
A PLANT ENZYME SUPPLEMENT." -DR. DICK COUEY

*H*ave you ever heard someone say that taking vitamins and minerals and other supplements is useless and will only give you "expensive urine"? If I only had a nickel for each time I have heard that! It kills me when I hear someone say something this naïve. A statement like this reveals a profound ignorance of the medical literature on the value of supplements.

Now, the truth is that a percentage of most supplements is excreted in the urine. But this does not mean that they are not useful. The important factor is not whether you excrete some of the various nutrients, but rather what these nutrients do on their way through your body. Let's look at water. Of course you excrete much of the water that you consume. If you didn't, you would look like the Pillsbury Dough Boy! You excrete some through the urine, some through sweat, and some as vapor in your breath. The fact that you excrete it does not mean that you do not need to drink the water! Have you ever heard someone say that you don't need to drink water because you're just going to excrete it anyway? That would be ludicrous to say, wouldn't it?

The fact of the matter is that the most expensive urine in the world is created by taking multiple **overpriced prescription drugs**, not vitamins and supplements. With more than 40% of the U.S. population now on prescription drugs, the drug content in human

urine is now so high that trace amounts of antidepressant drugs can be found in public water supplies! Compared to prescription drugs, supplements are cheap prevention, and the truth is that supplements are essential to a well-balanced, cancer-fighting, optimally-nutritious diet. This chapter contains several of the most potent and essential supplements I recommend. I suppose a few of them could have been included in the previous chapter, but that's a reflection of the fact that some of the best supplements actually are considered to be foods. I have listed them in alphabetical order.

ALGAE (CHLORELLA & SPIRULINA)

Chlorella is a “miracle whole food” which gets its name from the amount of chlorophyll it possesses. It is a single cell algae, and actually contains **more chlorophyll per gram than any other known plant**. Chlorophyll is one of the greatest food substances for cleansing the bowel and other elimination systems, such as the liver and the blood, and it also is instrumental in transporting more oxygen to the body and the brain. In addition, the “mysterious” Chlorella Growth Factor (CGF) speeds up the healing rate of any damaged tissue, including cancerous tissue.

In addition to amplifying the immune system's response to cancer cells, chlorella acts as a preventative measure against cancer by raising blood levels of the protein albumin. According to Earl Mindell's Supplement Bible, “Numerous studies have documented that a low albumin level is a marker for serious illnesses such as cancer and heart disease. They point to test-tube studies confirming that raising albumin levels can both prevent cancerous changes and extend the life span of human cells.”

In a Japanese study, scientists placed lab mice on a chlorella regimen for 10 days and then injected the mice with three types of cancer. Amazingly, over 70% of the mice injected with chlorella did **not** develop cancer, while 100% of the untreated mice **did** develop cancer and died within 20 days. In his book Treating Cancer with Herbs, Dr. Michael Tierra writes, “I recommend chlorella to all cancer patients regardless of any other green drink they might use ... It is

virtually a complete food in itself. It acts as both a powerful nutrient and a detoxifying food.”

Chlorella also helps in balancing your body’s pH level, helps remove toxic heavy metals, and contains a wide array of vitamins, minerals, and enzymes. It also stimulates the production of red blood cells and even eliminates bad breath. And it is safe for children. In a study conducted on identical twins, the one given chlorella grew much faster, healthier, and had fewer sicknesses than the twin who was not given chlorella.

Spirulina is a blue-green algae found in alkaline, warm-water lakes. It contains concentrations of nutrients unlike any other single grain, herb, or plant. Spirulina is around 70% complete protein, with all essential amino acids in perfect balance, and also provides high concentrations of many other nutrients, chelated minerals, trace elements, and enzymes. It has the essential fatty acids, gamma-linolenic acid (GLA), linoleic acid, and arachidonic acid. Spirulina is virtually the only vegetarian source of vitamin B₁₂, which is needed for healthy red blood cells. It also has substantial amounts of chlorophyll, although not as concentrated as chlorella, and it has been shown to boost the immune system. Perhaps most importantly, lab studies have shown that spirulina polysaccharides can work to repair damaged genetic material, thus spirulina possesses important antineoplastic (*cancer-fighting*) attributes.

Some scientists speculate that the “manna” of the wandering Israelites, which God provided for them each morning, and was described as tasting “like wafers made with honey” may have been a form of dried, dormant spirulina. Of course, this is pure speculation, but it’s an interesting theory, nonetheless. The ability of spirulina to grow in hot and alkaline environments ensures its sanitary status, as no other organisms can survive to pollute the waters in which this algae thrives. Unlike the stereotypical association of microorganisms with “scum” and “germs,” spirulina is actually one of the cleanest, most naturally sterile foods found in nature. Its adaptation to heat also assures that spirulina retains its nutritional value when subject to high temperatures during processing and shelf storage, unlike many plant foods that rapidly deteriorate at high temperatures.

If you want more information on chlorella and spirulina, I strongly recommend the online book entitled Superfoods for Optimal Health: Chlorella and Spirulina, written by Mike Adams, The “Health Ranger.” It is available for free here: www.chlorellafactor.com. We purchase our chlorella and spirulina from www.iherb.com.

APPLE CIDER VINEGAR

I am sure you’ve heard the old saying, “*An apple a day keeps the doctor away.*” This could very well have a lot of merit. Apples are among the healthiest fruits available to us, and they are the central ingredient in apple cider vinegar (ACV). Hippocrates was said to have used ACV as a health tonic, and American soldiers are said to have used it to combat indigestion, pneumonia, and scurvy.

ACV is a type of vinegar made by the fermentation of apple cider. During this process, sugar in the apple cider is broken down by bacteria and yeast into alcohol and then into vinegar. ACV is a powerful detoxifying and purifying agent. The amino acid in ACV is an effective antiseptic and antibiotic, whereas the acetic acid can aid in treatment of various fungal and bacterial infections.

ACV breaks down fatty, mucus, and phlegm deposits within the body. By breaking down these substances, ACV improves the health and function of the vital organs of the body (*such as the kidneys, bladder and liver*) by preventing excessively alkaline urine. It also oxidizes and thins the blood, which is important in preventing high blood pressure.

One day last year, Charlene had numbness and tingling in her foot, resulting in excruciating pain and making it difficult to walk. To remedy this, we combined ACV with blackstrap molasses, which contains many vitamins and minerals. She drank this concoction three times that day, and by the next morning, the pain had subsided and the numbness was nearly gone. She was back out walking and running with the children within two days, pain free and happy. She definitely is a “believer” in daily doses of ACV with blackstrap molasses. **We’re happy to say that it definitely works!**

Top doctors have revealed that the combination of garlic, ACV and honey is a “wonder potion.” In a study of arthritis victims, Dr. Angus Peters of the University of Edinburgh's *Arthritis Research Institute* found that a daily dose of ACV and honey reduced pains by ninety percent. Also, a daily dose of garlic and ACV has proved to be a powerful fat destroyer and weight reducer, according to Dr. Raymond Fish of London's famous *Obesity Research Center*. Dr. Hen Lee Tsno writes in China's respected *Journal of Natural Medicines*, “...patients given this miracle drink before breakfast showed a remarkable reduction in high blood pressure and cholesterol in less than a week.”

Beware... not all ACVs are created equal! Many commercial ACVs have been pasteurized, filtered, refined, or distilled in order to make the product look good. Unfortunately, this extra processing destroys much of the healthy goodness and thus many of the apple cider benefits that were in the product in the first place. The best type of ACV to use is one made from cold pressed, organically grown whole apples, in which no chemicals or preservatives have been added. We purchase Bragg ACV, which is raw and organic.

COLLOIDAL SILVER

Colloidal silver is a solution of extremely fine (*submicroscopic*) particles of pure silver suspended in water by a positive electric charge on each particle. The particles remain suspended throughout the solution because these positive-charged particles repel each other with a greater force than gravity. A powerful germicidal, silver is an exceptional metal in that it is non-toxic to the human body, but lethal to over 650 disease-causing bacteria, viruses, fungi, parasites, and molds. The daily ingestion of colloidal silver is like having a second immune system.

I remember my granddad telling me that they used to put silver dollars into milk to keep it fresh longer, before they had refrigerators. It is well known that the ancient Greeks knew the medical value of silver. They realized that families who ate from silver utensils rarely were sick and had few infections. This knowledge passed on to kings, emperors, sultans, and their families

and members of their royal courts. They ate from silver plates, drank from silver cups, used silver utensils, and stored their food in silver containers.

As a result of this use, the silver rubbed off and mixed with their foods and drinks. As a general rule, they were much healthier than the “peasants” who ate with dishes made of earthenware and utensils made of iron. This is why royalty became known as “blue bloods,” since their skin had a blue tint from the accumulation of minute traces of pure silver. This is also where the phrase “born with a silver spoon in your mouth” arose.

While studying regeneration of limbs, spinal cords and organs in the late 1970s, Robert O. Becker, M.D., author of *The Body Electric*, discovered that silver ions promote bone growth and kill surrounding bacteria. The March 1978 issue of *Science Digest*, in an article, “Our Mightiest Germ Fighter,” reported: “Thanks to eye-opening research, silver is emerging as a wonder of modern medicine. An antibiotic kills perhaps a half-dozen different disease organisms, but silver kills some 650. Resistant strains fail to develop. Moreover, silver is virtually non-toxic.” The article ended with a quote by Dr. Harry Margraf, a biochemist and pioneering silver researcher: “Silver is the best all-around germ fighter we have.”

How does it work? The presence of colloidal silver near a virus, fungus, bacterium or any other single celled pathogen disables its oxygen metabolism enzyme. In other words, it disables the pathogen’s “chemical lung” so that it cannot breathe. Within a few minutes, the pathogen suffocates and dies, and is cleared out of the body by the immune, lymphatic, and elimination systems. Unlike pharmaceutical antibiotics (*which destroy beneficial bacteria and enzymes*), colloidal silver selectively targets pathogens, and leaves healthy tissue alone.

Taken orally, colloidal silver is absorbed from the mouth into the bloodstream, then transported quickly to the body cells. Swishing the solution under the tongue briefly before swallowing may result in faster absorption. In three to four days, the silver may accumulate in the tissues sufficiently for benefits to begin. Colloidal silver is eliminated by the kidneys, lymph system, and bowels.

Prior to 1938, colloidal silver was used by physicians as a mainstream antibiotic treatment and was considered to be a “cutting edge” treatment for a variety of ailments. Not surprisingly, however, Big Pharma moved in and caused colloidal research to be set aside in favor of financially lucrative drugs. Some of the best colloidal silver available on the internet can be purchased from Kurt Wilson and Survival Enterprises. His website is www.se1.us.

GLYCONUTRIENTS

Science has recently made a remarkable discovery, a new class of missing nutrients, called “glyconutrients,” which is a broad term used to describe around 200 naturally occurring biologically active plant sugar molecules (*monosaccharides*) found in nature. From these, researchers have identified a small group of **eight essential glyconutrients** which are crucial to the proper structure and function of our 600 trillion cells.

These glyconutrients combine with proteins and fats to create glycoproteins which coat the surface of virtually every cell in the body, thus forming a complex messaging system for “cell-to-cell” communication. If the cells do not have enough of the eight essential glyconutrients, then they cannot make the correct glycoproteins, and the cell-to-cell messages become disrupted. Subsequently, the immune system cannot effectively wage an offensive against bacterial and viral pathogens or rapidly dividing cancer cells. The result is the onset of disease.

Unfortunately, our modern diet is commonly providing only two of the eight essential glyconutrients (*glucose and galactose*). So, it is important to supplement your diet with a product that contains all eight (*glucose, galactose, mannose, fucose, xylose, N-acetylglucosamine, N-acetylgalactosamine, & N-acetylneuraminic acid*).

Aloe Vera contains the eight essential glyconutrients which ensure that internal networking (*cell-to-cell communication*) is swift and accurate. In addition to the glyconutrients, several enzymes (*endonucleases, hydrolases, esterases, and lipases*) are produced from the glyconutrients of aloe vera. The clinical use of aloe began

in the 1930s with reports of successful treatment of x-ray and radium burns. In 1976, researchers isolated aloe emodin, a compound that showed significant antileukemic activity. However, all aloe products are not created equal. Many manufacturers of aloe products use high heat and filtering processes, thus destroying the chains of molecules during the manufacturing process. This results in inferior products.

Aloe Immune is an excellent aloe product with all 8 essential glyconutrients in a dehydrated powder rather than a freeze or spray dried powder, or diluted juice form. Aloe Immune is also less expensive than many other products on the market today. You may remember the story of Neal DeOul who cured himself of cancer with T-Up (*an aloe vera concentrate*) and cesium chloride. To order Aloe Immune, please visit www.doctorjadams.com/AloeVera.html.

Another excellent glyconutrient product is Garden of Life's **RM-10**. It is comprised of 10 organically grown and fermented medicinal mushrooms, cat's claw, and aloe vera. The formula was developed by Jordan Rubin, N.M.D., founder of *Garden of Life*, in an effort to save the life of his grandmother, Rose Menlowe, who was diagnosed with metastatic cancer of the ovaries, colon, lymphatic system and appendix. Rose credits her recovery to use of the RM-10 formula, found here: www.gardenoflife.com/detail_rm10.shtml.

Himalayan goji berries are an excellent source of glyconutrients. Goji polysaccharides were proved to be exceptional source of the essential sugars like xylose, glucose, mannose, and galactose. Himalayan goji juice is now undergoing intense scrutiny as a cancer treatment in Tibet, Mongolia, China, Japan and Switzerland.

It has been found that the fruit, as well as an extract from the goji leaves, can kill many kinds of malignant cells in vitro. In vivo studies and human studies are proving to be highly promising as well. Himalayan goji juice also contains approximately 124 parts per million of organic germanium, which has been demonstrated to have anti-cancer activity.

IP6

IP6, also known as inositol hexophosphate or phytic acid, is composed of inositol (*one of the B vitamins*) bound with six molecules of phosphorous and is found naturally in seeds, bran, whole grains, and legumes. IP6 is one of nature's most effective cancer fighters. IP6 selectively removes iron from cancer cells, which effectively deprives them of their primary growth factor. However, IP6 does not remove iron from red blood cells which are tightly bound to hemoglobin. Unlike cancer drugs, healthy cells are not affected with IP6, so IP6 has very low toxicity. (Delilliers GL, *British J Haematology* 117: 577–87, 2002).

Why is the iron-chelation so important? Because iron is needed by cancer cells to produce new DNA. Also, excess iron stored in tissues promotes insulin resistance, leading to high levels of both glucose and insulin, neither of which is beneficial for cancer control. IP6 removes excessive copper, needed to produce new blood supplies for the cancer. IP6 also removes heavy metals such as mercury, cadmium, and lead, while not removing beneficial minerals such as potassium and magnesium. It activates NK cells, promotes cell differentiation (*turning cancer cells into more normal cells*), reduces tumor sizes, and helps the tumor suppressor gene p53 that is often defective in cancers. There have been numerous studies that conclusively prove IP6 is an effective and non-toxic cancer fighting molecule.

Since the late 1980s, Dr. Abulkalam Shamsuddin, a scientist at the University of Maryland School of Medicine, has been the pioneer researcher of IP6. He discovered that when properly combined with inositol, IP6 forms two molecules of IP3 in the body. Inositol, the backbone structure of IP6, has six carbon atoms that are capable of binding phosphate molecules; when all six carbons are occupied by six phosphate groups IP6 is formed. However, when only three of the carbon groups are bound by phosphate it is called IP3. This chemistry is important because although IP6 is gaining all the attention, it is really IP3 that is doing all the work. IP3 plays an important role inside the cells of our bodies. It basically functions as an “on/off” switch for human cancers according to in vitro studies.

When IP₃ levels are low (*as in cancer cells*), the cells replicate out of control. That basically is what occurs in cancer. When cancer cells are bathed in a broth of IP₃, they literally “turn themselves off.” This action reflects the central role that IP₃ plays in controlling key cell functions, including replication and the communication between cells.

Dr. Shamsuddin has discovered the correct ratio of IP₆ and inositol to ensure the formation of IP₃ within the body. He recommends taking a daily dose of 800 to 1,200 milligrams of IP₆ along with 200 to 300 milligrams of inositol as a general preventative measure. In patients with cancer or at high risk for cancer, he recommends a dose in the range of 4,800 to 7,200 milligrams of IP₆ along with 1,200 to 1800 milligrams of inositol. This should be taken on an empty stomach.

“LIVING FUEL RX” SUPER GREENS & SUPER BERRY

Living Fuel’s “*Super Greens*” contains concentrated sources of vitamins, minerals, proteins, essential fats, enzymes, co-enzymes, herbs, botanical extracts, and soluble and insoluble plant fibers from fresh, high-quality, mostly organic, non-GMO, nutrient-rich foods and supplements. Super Greens is a whole, raw, wild crafted, complete, foundational “**super food.**” It is a blend of organic, all natural foods that have been optimized with the most bio-available and usable nutrients. This product combines the nutrients of more vegetables and fruits than you could possibly eat. It even includes chlorella, spirulina, and probiotics.

Living Fuel’s “*Super Berry*” will also provide you total nutrition and great taste, but rather than getting the greens in the “*Super Greens*,” the “*Super Berry*” contains whole organic strawberries, raspberries, blueberries, and cranberries. Living Fuel provides you with high quality nutrition and has more potassium than bananas, more calcium than milk, more fiber than oatmeal, more friendly bacteria than yogurt, more protein than six eggs, and more vitamins,

minerals, and antioxidants than a whole day's supply of fruits and vegetables.

Those concerned about their health, and those with allergies and other condition, can confidently consume either of these products because they have no GMO, no pesticides, no sugar, no wheat, no dairy, no eggs, no maltodextrin, no fillers, no artificial colorings, no irradiation, no herbicides, no soy, no yeast, no whey, no nuts, no preservatives, no artificial colors, and no hydrogenated oils! **Whew!**

In my opinion, there are no other supplements comparable to Living Fuel's "Super Greens" and "Super Berries." Both can actually be used either as a supplement or a meal replacement. They are head and shoulders above the pack.

MELATONIN

Did you know that if you sleep with a nightlight, you are increasing your risk of cancer? It has been shown that light exposure at night suppresses your production of **melatonin**. This, in turn, can lead to increased risk of cancer.

So, what exactly is melatonin? Melatonin is a hormone which modulates our neurotransmitters. It is produced from the amino acid tryptophan by the pineal gland (*a pea-sized gland in the brain*) when the lights go out at night. It's the reason you get sleepy when it's dark. Melatonin also is produced by the retina and, in vastly greater amounts, by the gastrointestinal system. Melatonin levels peak during the night but also increase after eating, which explains why you get sleepy after a meal. Melatonin is highly fat soluble and also water soluble, thus enabling it to easily penetrate the cell membrane, cytoplasm, and nucleus.

According to Dr. Eileen M. Lynch, "*Melatonin's amphiphilicity, or ability to both absorb and repel water - in conjunction with its ability to act as a weak preventive antioxidant, a weak metal ion chelator, and in certain circumstances, a direct free radical scavenger - enables it to counteract oxidative stress within the chaotic tumor microenvironment.*"

www.lef.org/magazine/mag2004/jan2004_report_melatonin_01.htm

Since over 75% of cancer shows oxidated DNA damage, the statement by Dr. Lynch above is very important. Since melatonin is a free radical scavenger, it is important to note that it rivals vitamin C in its ability to counteract the oxidating effects of many toxins. But not only does melatonin act as a free radical scavenger, it also is a hormone that **kills** cancer cells! According to Dr. Lynch, “**Melatonin plays a critical role in the host defense system against cancer’s progression** by activating the cytokine system, which exerts growth-inhibiting properties, and by stimulating the cytotoxic activity of macrophages and monocytes.”

www.lef.org/magazine/mag2004/jan2004_report_melatonin_01.htm

Multiple studies have indicated the cytotoxic effects of melatonin, including at 2002 article in *Tumor Biology* published by Dr. K. Winczyk and colleagues entitled “Possible involvement of the nuclear RZR/ROR-alpha receptor in the antitumor action of melatonin on murine Colon 38 cancer.” In another article by Dr. P. Lissoni and colleagues in the 1989 *European Journal of Cancer & Clinical Oncology*, melatonin has also been shown to boost the immune system.

In his 2004 report to the American Association for Cancer Research, Dr. David E. Blask reported that melatonin puts breast cancer cells to sleep, and it also slows breast cancer growth by 70%. Breast cancers get “turned on” by linoleic acids (omega-6 fats). However, melatonin interacts with linoleic acid. At a news conference, Dr. Blask stated, “*This breast cancer rev-up mechanism gets revved down by melatonin. Nighttime melatonin is a relevant anticancer signal to human breast cancers. Ninety percent of human breast cancers have specific receptors for this signal.*”

Blask’s team exposed lab mice with human breast cancers to constant light. Guess what happened: **tumor growth skyrocketed**. According to Dr. Blask, “*With constant light, tumors grow seven times faster and soak up incredible amounts of linoleic acid. During the day, the cancer cells are awake and linoleic acid stimulates their growth. But at night cancer cells go to sleep. When we turn on lights at night for a long time, we suppress melatonin and revert back to the daytime condition.*” www.webmd.com/content/article/71/81159.htm

Additional research corroborates the fact that melatonin can kill many different types of human tumor cells, including a groundbreaking 2000 study performed by 3 Russian physicians, Riabykh, Nikolaeva, and Bodrova (*Vestnik Rossiiskoi Akademii Meditsinskikh Nauk*). A report by Dr. R.M. Sainz et al in the 2003 issue of *Cellular Molecular Life Science* indicates that melatonin is a naturally produced cytotoxin which can induce tumor cell death (*apoptosis*). Interestingly, Dr. Lissoni also discovered that melatonin inhibits angiogenesis, which is the development of new tumor blood vessels. (Dr. P. Lissoni, et al, *Neuroendocrinology Letter*, 2001).

A growing body of evidence linking increased light at night (LAN) to certain types of cancer has led researchers to suspect it could be connected to the steady increase in cases of childhood leukemia. Scientists presenting research at the *First International Scientific Conference on Childhood Leukemia* said that light at night and working night shifts (which disrupts the body's circadian rhythm, or internal clock) have both been associated with an increased risk of breast and colorectal cancer. "We don't know whether abnormal light exposure is generating this higher incidence of childhood leukemia or not, but in view of what we know of other forms of cancer this is not unreasonable," said Russell Foster, a molecular neuroscientist at Imperial College London, in an interview. www.cancerpage.com/news/article.asp?id=7468

You have to wonder if the rapid growth of television and video games over the last 30 to 40 years has contributed to the growth in childhood leukemia. Children are staying up later and later, and this LAN may be suppressing the natural production of melatonin that would otherwise fight the free radicals that damage DNA and lead to cancer. Is it just a coincidence that childhood leukemia has literally exploded at the same time as the escalation of television and video games?

"Compared with other working women, female night-shift workers have about a 50% greater risk of developing breast cancer," says William Hrushesky of Dorn Veterans Affairs Medical Center in Columbia, S.C. That presumably explains why the original Harvard study of nurses, which was led by Eva S. Schernhammer, found that shift workers had an elevated risk of breast cancer (*Science News*,

1/17/01, p. 317). More recently, Schernhammer and her Harvard colleague Susan E. Hankinson found that women who happen to have above-average melatonin concentrations are relatively unlikely to develop breast cancer. “*Those with higher levels seem to have lower breast cancer risk,*” said Schernhammer. She and Hankinson reported the data in the July 20, 2005 *Journal of the National Cancer Institute*.

You would hypothesize that if melatonin production is triggered by darkness, then those who would have the greatest production would be blind people, wouldn't you? Well, guess what...in a 1998 study by Doctors Feychting and Osterlund, higher melatonin levels have been found in blind and visually impaired people, along with correspondingly lower incidences of cancer compared to those with normal vision, thus suggesting a role for melatonin in the reduction of cancer incidence (“*Reduced cancer incidence among the blind.*” *Epidemiology*. 1998).

Several studies have shown that the circadian rhythm is involved in tumor suppression at various levels and also regulates the immune response. This being so, it only makes sense that the disruption of the circadian rhythm could lead to a weakened immune system and the growth of cancerous tumors. However, melatonin has been shown to act as a “circadian referee” and is able to regulate the body's internal clock, thus keeping the immune system at its highest level of surveillance. “*Sleep per se is not important for melatonin,*” says Dr. Russel J. Reiter, a neuroendocrinologist at the University of Texas Health Science Center in San Antonio. “**But darkness is.**” www.sciencenews.org/articles/20060107/bob9.asp

Recent studies have found reduced levels of melatonin in the cerebrospinal fluid of patients with Alzheimer's disease compared to age-matched control subjects (H. Tohgi, 1992; D.J. Skene, 1990). Since circadian rhythms are disrupted in Alzheimer's disease, it is interesting to speculate whether restoration of melatonin to normal levels in these patients would alleviate other symptoms as well.

Melatonin should probably be taken thirty minutes to one hour before sleeping. You can find melatonin in any health food store.

MMS (MIRACLE MINERAL SUPPLEMENT)

Chlorine dioxide has been studied by scientists for many years and has been mentioned in many scientific journals. However, it was Jim Humble who brought chlorine dioxide to the forefront of alternative medicine.

Humble, a gold miner and metallurgist, was on an expedition into the jungles of Central America, looking for gold, when a member of his expedition came down with malaria. They were more than two days away, through heavy jungle, from the next mine. After many years of experience, Humble always carried stabilized oxygen with him on such expeditions, to make local water potable. Facing the possibility of a quick loss of life, he gave it to the stricken man, and to everyone's amazement, the man was well within a few hours. That sure seemed like a miracle, but Humble wanted to better understand what had happened.

Over the course of several years, Jim Humble figured out that what made stabilized oxygen so effective at treating malaria was not the oxygen at all, but rather trace amounts of chlorine dioxide, which has been used extensively as a disinfectant in the food and drinking water industries for almost a century. It is well-proven to be more effective and less harmful than chlorine in killing viruses, bacteria, and protozoa in water.

He chronicled his experiences in a downloadable ebook that is available at his web site: www.miraclemineral.org. The book is titled, Breakthrough: The Miracle Mineral Supplement of the 21st Century. Miracle Mineral Supplement (MMS) works by putting a small amount of chlorine dioxide into the bloodstream. The MMS solution is 28% sodium chlorite (*stabilized oxygen*) in distilled water. Humble discovered that sodium chlorite can be transformed into chlorine dioxide if mixed with an “activator.” It is the “activator” which converts the sodium chlorite into chlorine dioxide. MMS is based upon this knowledge.

According to Webster Kehr, the three potential activators for the sodium chlorite are fresh squeezed lemon juice, fresh squeezed lime

juice, or 10% powdered citric acid. The powdered citric acid is the preferred item to mix with MMS. However, if you cannot get the citric acid, then use fresh squeezed lemon or lime juice (*which you squeezed yourself*). Nothing else is acceptable as an activator.

How does it work? Once chlorine dioxide is introduced into the bloodstream, it performs a highly energetic acceptance of four electrons when it comes across any cell that is acidic (*i.e. a pH below 7.35*). This means that diseased cells are essentially vaporized (*i.e. “oxidized”*) while healthy cells are unaffected.

You see, red blood cells (*which carry oxygen throughout the body*) cannot distinguish between chlorine dioxide and oxygen. Therefore, after ingesting the MMS, red blood cells pick up chlorine dioxide ion and transport it to parasites, fungi, or diseased cells that all have low pH. These “invaders” are destroyed along with the chlorine dioxide ion. If no invaders are found, the chlorine dioxide will deteriorate, and thus lose an electron or two. This may allow it to combine with a very important substance that the immune system uses to make hypochlorous acid, which kills pathogens, killer cells, and even cancerous cells. The immune system needs a great deal more hypochlorous acid when disease is present. Facilitated by the MMS solution, chlorine dioxide delivers it in spades.

Taking the MMS is simple. Add your drops of MMS to a clean, empty dry glass. If this is not a critical, life threatening situation, start with one drop. If it is an acute disease situation, you should still limit your starting application to fifteen drops of MMS. It has been brought to my attention that the current rule of thumb is three drops of sodium chlorite per twenty-five pounds of body weight.

For one to six drops of sodium chlorite, add ¼ teaspoon of fresh squeezed lemon or lime juice. For seven to fifteen drops, add ½ teaspoon of lemon or lime juice. If you are using citric acid as an activator, put one level tablespoon full of crystals in a clean glass or jar. Then add nine level tablespoons full of purified water into the same jar. When the crystals have dissolved, this is a 10% solution. Use five drops of this solution for each drop of MMS. Do everything else the same.

Wait three minutes after mixing, add fresh squeezed juice (*grape, apple, cranberry, or pineapple*), or water, and drink immediately. If you choose to use juice, do not buy it off the shelf. It must be fresh squeezed. Also, do not use orange juice, since it prevents the production of chlorine dioxide.

Interestingly, in 1999, the American Analytical Society of Chemists stated that “*chlorine dioxide is the most powerful killer of pathogens known.*” The chlorine dioxide is carried throughout the body just like oxygen and wipes out disease-causing pathogens upon contact.

Humble’s protocol has successfully helped over 75,000 people in Africa rid themselves of malaria, hepatitis, AIDs, and cancer.

OIL OF OREGANO

Oil of oregano, an herbal product that has been used since Biblical times, is extracted from wild oregano plants. **Oil of oregano has been shown to kill parasites and viruses, bacteria, and some types of fungus, as well as being an antihistamine.**

Oil of oregano has been used for centuries to treat infections and it might be a savior for sufferers of colitis, an inflammation in the gastrointestinal system. It is derived from the wild oregano plant (*member of the mint family*) that grows naturally in the mountains of the Mediterranean region and is usually bottled mixed with olive oil or coconut oil because of its potency.

The lead ingredient in oregano oil is *carvacrol*, a strong antimicrobial used to preserve food and protect against mold and other common bacteria, making it the largest healing agent of the oil. *Thymol* is the second most active ingredient important as a fungicide and is the leading anti-halitosis (*i.e. bad-breath fighting*) agent in Listerine. The rest of the ingredients provide more antibacterial support, prevent the damage caused by free radicals, act as allergen-blockers, and inhibit the growth of cancer cells.

Oil of oregano also contains copper, calcium, niacin, zinc, boron, beta-carotene, vitamins A, C, and E, potassium and iron among others. Jean Valnet, in his book The Practice of Aromatherapy, describes how oil of oregano has superceded anti-inflammatory drugs in reversing pain and inflammation and is nearly as powerful as morphine as a painkiller. It possesses significant antioxidant power, and also stimulates the flow of bile in the liver, which greatly aids digestion.

Dr. Cass Ingram wrote a book called The Cure is in the Cupboard: How to Use Oregano for Better Health about his life-saving encounter with oil of oregano. This “super oil,” he claims, is helpful in calming or healing over 170 different bodily conditions – everything from athlete’s foot to worms, diarrhea to diaper rash, a bee sting to shortness of breath. Makes you want to go buy some oil of oregano right now, doesn’t it?

However, before you go online or to your local herb store, make sure you do your research. My family takes “Oregonol” but there are other good brands as well. Just make sure it is from one of the two wild varieties mentioned above, and that it is at least 70% carvacrol. It is important to note that oil of oregano is not recommended for anyone allergic to oregano, thyme, basil, mint, or sage. Oil of oregano can also reduce iron intake within the body, so you should consider taking a good iron supplement. Due to this fact, pregnant women shouldn’t take oil of oregano.

The body of positive evidence for oregano oil as a major antibiotic is growing. Among fifty-two plant oils tested, oregano was considered to have “pharmacologic” action against common bugs such as *Candida albicans* (yeast), *E. coli*, *Salmonella enterica* and *Pseudomonas aeruginosa*. (*Journal Applied Microbiology*, volume 86, June 1999).

Also, oil of oregano is not to be confused with common oregano in the kitchen spice cupboard, which is usually marjoram rather than true oregano.

PROTEOLYTIC ENZYMES

The chemistry of digestion is really simple; with all the three major types of food being protein, carbohydrates, and fats. But remember, the important thing is not how much food we eat, but rather how much food we **digest**. And how do we digest food? **Enzymes**. God has made our bodies in a miraculous way, and we digest these three types of food into their usable forms - proteins into amino acids, carbohydrates into glucose, and fats into fatty acids. There are three major classes of enzymes: metabolic enzymes (*enzymes which work in blood, tissues, and organs*), food enzymes from raw food, and digestive enzymes. Enzymes are absolutely critical to the digestive and nutritional processes in the body.

Each day, the pancreas secretes about 1.7 liters of pancreatic juice in the small intestine. In this juice are enzymes – including lipases, proteases and amylases – required for the digestion and absorption of food. Lipases, along with bile, help digest fats. Amylases break down starch molecules into more absorbable sugars and are secreted by the salivary glands as well as the pancreas. The proteases secreted by the pancreas (*trypsin, chymotrypsin and carboxypeptidase*) break protein molecules into single amino acids. There are also two plant-based proteases – bromelain (*from the stems of pineapples*) and papain (*from unripe papayas*).

Let's take a close look at the proteases produced by our pancreas, oftentimes referred to as “proteolytic” (*i.e. protein digesting*) enzymes. When a “foreign invader” (*toxin*) enters our system, it is our leukocytes that lead the charge of our immune response. However, cancer cells have a protein coating which renders them “unrecognizable” to the leukocytes and keeps them from destroying the cancer cells. However, in a healthy person's body, the proteolytic enzymes destroy cancer cells by breaking down the protein coating around the cell, and then the leukocytes attack the remaining cancer cell and destroy it.

However, when we eat a diet high in overcooked proteins, which lack food enzymes, our own proteolytic enzymes are called upon to digest the proteins. We only have a limited supply of these

proteolytic enzymes, and if this supply is being exhausted to digest protein in foods, then little or none is left to break down the protein coating on cancer cells. Thus the cells begin to flourish and multiply because our leukocytes cannot kill them.

The truth is that cancer is oftentimes a disease of protein metabolism because the proteolytic enzyme “cancer-fighting mechanism” can be overwhelmed by consuming protein rich foods at inappropriate times or in excessive amounts. The body needs about 12 hours each day without protein consumption for its enzyme cancer-fighting mechanism to work optimally.

I recommend Vitälzym. To my knowledge, its serrapeptase based blend of enzymes is the strongest and fastest working systemic proteolytic enzyme available with research to prove it.

SELENIUM

Selenium, like most healthy things, it is something that many of us are not getting enough of. Selenium is a mineral and has been shown in multiple studies to be an effective tool in warding off various types of cancer, including breast, esophageal, stomach, prostate, liver, and bladder cancers. Most Americans get less than half of the recommended dose of two hundred micrograms a day, according to Life Extension Foundation’s *Disease Prevention and Treatment*.

Selenium was initially used in conventional medicine as a treatment for dandruff, but our comprehension of the mineral has dramatically increased over the past twenty years. It is an essential component of a powerful antioxidant manufactured by the body. This antioxidant, called glutathione peroxidase, defends specifically against peroxides, a type of free radical that attacks fats. Like other antioxidants, glutathione peroxidase also reduces the risk of developing cancer and heart diseases and stimulates the immune system’s response to infections.

Research shows selenium, especially when used in conjunction with vitamins C, E, and beta-carotene, works to block many chemical

reactions that create free radicals in the body. Remember, free radicals can damage our cellular DNA, which eventually can lead to degenerative diseases like cancer. Selenium also helps stop damaged DNA molecules from reproducing and proliferating, a process called mitosis. In other words, selenium acts to prevent tumors from developing. *“It contributes towards the death of cancerous and pre-cancer cells. Their death appears to occur before they replicate, thus helping stop cancer before it gets started,”* says Dr. James Howenstine in *A Physician’s Guide to Natural Health Products That Work*.

Selenium research over the past twenty years has focused heavily on a novel form of selenium: ***methylselenocysteine (MSC)***. A relatively simple organic selenium compound, MSC is formed naturally in various plants, including garlic, broccoli, wild leeks, and onions grown on high selenium soil. MSC is easily converted to methylselenol by an enzyme called beta-lyase, which is widely distributed in the body. According to Dr. Daniel Medina at the Department of Molecular and Cellular Biology, Baylor College of Medicine in Houston, Texas, methylselenol has been shown to be an effective anticancer form of selenium that kills cancer cells through “apoptosis,” which is programmed cell death. (*“Selenium: A new compound for chemoprevention of breast cancer.”* *Nutrition & Cancer* 2001, 40:12-17.)

Methylselenol is also known to inhibit angiogenesis in beginning cancer tumors. Angiogenesis, the creation of new blood vessels, is necessary for cancer cells to grow into a tumor, because cancer cells need a far greater blood supply than normal cells to survive. (Lu, J. and Jiang, C. “Antiangiogenic activity of selenium in cancer chemoprevention” *Nutrition & Cancer* 2001, 40: 64-73.) As Medina and colleagues concluded: *“[Selenium] methylselenocysteine ... holds promise as a true second-generation selenium chemoprevention [of cancer] compound because of its superior in vivo efficacy, virtually nonexistent toxicity, low body accumulation, and simple formulation.”* MSC represents the safest and most effective anticancer form of selenium available today.

The most important blind study on selenium and cancer was a double-blind intervention trial conducted by Dr. L.C. Clark and

colleagues at the University of Arizona Cancer Center. When all the results were tabulated, it became clear that the selenium-treated group developed almost 66% fewer prostate cancers, 50% fewer colorectal cancers, and about 40% fewer lung cancers as compared with the placebo group. (All these results were statistically significant.) Selenium-treated subjects also experienced a statistically significant (17%) decrease in overall mortality, a greater than 50% decrease in lung cancer deaths, and nearly a 50% decrease in total cancer deaths. (*Journal of the American Medical Association*, 12/25/96).

Selenium supplement intake, even in the form of safe MSC, should be limited to 200 to 400 mcg daily for maximum safety. I have heard of alternative cancer physicians using up to 2,000 mcg daily, but this is not recommended if you are not under the supervision of a physician, since selenium dosages above 850 mcg daily are known to cause selenium toxicity.

Some of the best natural sources of selenium are Brazil nuts, garlic, broccoli sprouts, and brussel sprouts. All of these foods contain selenium in the form of MSC. Though garlic has the greatest concentration of MSC, most Americans are not likely to eat enough of it to produce the desired results, so Brazil nuts, broccoli sprouts and brussel sprouts are your best bets.

SOIL BASED ORGANISMS (SBO_S)

It is commonly believed that all bacteria are bad. But this is not so. Optimal gastrointestinal health depends on the balance of beneficial bacteria and pathogenic (*disease causing*) bacteria. When illness strikes, it is usually because the beneficial bacteria have diminished (*oftentimes due to antibiotics, a diet high in sugar, steroids, chemotherapy, or other medications*). It is well established that infection and toxins from pathogenic bacteria, fungi, and viruses are one of the causes of cancer.

Soil Based Organisms (SBOs) are beneficial bacteria that live in the dirt. Until the 19th century, when food processing replaced ingestion of raw fruit and vegetables, SBOs formed a regular part of our diet.

By around 1900, their presence in the food chain had seriously dwindled. Both modern agricultural methods with their over-reliance on powerful pesticides, fungicides, and germicidal chemicals and heat-based food processing are toxic to SBOs.

Why are SBOs so important? We should have a balance of about 85% good to 15% harmful organisms in the intestinal tract. But most of us today have the opposite ratio, creating a chronically unhealthy condition. Did you know that chlorinated water not only kills harmful bacteria in drinking water, but also kills the “good” bacteria in your digestive tract as it passes through? It’s no wonder that we are sick all the time!

The gut of every healthy person contains about 3½ pounds of beneficial bacteria that produce essential vitamins and hormones. These bacteria, of which SBOs are a vital source, help your digestive system break down proteins, fats, and carbohydrates, as well as digest waste. Most importantly they compete with undesirable micro-organisms, like yeasts, fungi, bacteria and parasites, to keep their numbers under control.

Supplementing with traditional probiotics is not always the best answer, since oftentimes they will not survive their passage through the stomach’s acidic terrain. However, unlike traditional probiotics, SBOs are extremely robust biologically. Once in your gut they get to work to displace and then devour any opportunistic pathogens. They also possess a powerful antiviral action, which helps protect against infection.

The power of SBOs lies in their ability to secrete specialized proteins, which stimulate your immune system to produce more white blood cells and antibodies that dramatically boost your immunity. Without SBOs to assist digestion, the bowels can soon end up becoming toxic waste dumps for rotting fecal matter. Other health benefits of SBOs include virtual immunity from colds and flu, stronger digestive capabilities, elimination of constipation, diarrhea, and other digestive disorders, increased and/or stabilized metabolism, and increased energy levels.

Regular supplementation with SBOs repopulates your intestinal tract with good bacteria, thus optimizing your immune system and fighting off disease. Any anti-cancer diet should include supplementation with SBOs. I recommend Primal Defense® (www.gardenoflife.com).

VITAMIN D

Technically speaking, vitamin D is not really a vitamin . . . it is more appropriately classified as a pro-hormone. Vitamin D has also been shown to be crucial in preventing cancer. The mechanisms by which vitamin D reduces the risk of cancer are fairly well understood. They include enhancing calcium absorption, inducing cell differentiation, increasing apoptosis (*programmed cell death*), reducing metastasis and proliferation, and reducing angiogenesis (*formation of new blood vessels*).

So, where do I buy the best vitamin D supplement? The answer is...**YOU DON'T**. Vitamin D supplements are virtually worthless. Here's why: The vitamin D in milk and in most vitamin supplements is vitamin D₂ and is **synthetic**. Vitamin D₂ is also called ergocalciferol. It is not the vitamin D that you need to prevent cancer and degenerative diseases.

The vitamin D which you need is vitamin D₃, also called calciferol. The best place to get vitamin D₃ is ultraviolet B (UVB) rays from sunlight. That's right! After years of denying the health benefits of sunlight, conventional researchers are finally starting to recognize the important role that ultraviolet light plays in human health. Getting sunlight on your skin, research now shows, is extremely important for preventing and even reversing chronic diseases, including cancer.

Don't fall for the "sunscreen myth." Despite what we hear, sunlight is actually good for you while sunscreen actually causes cancer. Yes, sunscreens contain toxic chemicals (*colors, fillers, and stabilizers*) that are absorbed through the skin where they enter the bloodstream, wreak havoc on the immune system, and damage the liver, the heart, and even promote systemic cancer. I recommend

aloe vera gel as a natural sunscreen, if you have sensitive skin. It also helps to heal a sunburn.

The time required in the sun is probably fifteen to thirty minutes per day. The optimal time for solar UVB production of vitamin D may be around the middle of the day when the ratio of UVB to UVA is highest and the required exposure times are shortest. However, this works only when the sun is elevated high enough. During winter months, it is oftentimes impossible to produce any vitamin D from sunlight, depending upon how far north you live.

However, when sunlight (*specifically solar UVB*) is not available, an excellent source of vitamin D that will also provide beneficial omega-3 fatty acids DHA and EPA (*which are pivotal in preventing heart disease, cancer, and many other diseases*) is cod liver oil. The highest quality and best tasting cod liver oil I have found is Carlson's Cod Liver Oil (*the kiddos call it "Cod Liberty Oil" ☺*) and the best prices are found at www.iherb.com.

You must be cautious when using cod liver oil, as it is possible to overdose on vitamin D. For this reason, cod liver oil should be consumed only in cool weather months unless you can test your vitamin D levels to make sure that they are not too high. In warm weather, most people get enough vitamin D from sunshine, so don't take cod liver oil during the summer months.

ZEOLITES

Zeolites are natural volcanic minerals with a unique, complex crystalline structure. Zeolites, in general, have been used for almost 1,000 years as a traditional remedy throughout Asia to promote overall health and well-being.

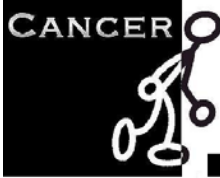
One amazing property of zeolites is that their honeycomb framework of cavities and channels (*like cages*) work at the cellular level trapping heavy metals and toxins. As you know, toxins poison our air, our water, our food, and our bodies. According to the EPA, 80,000 chemicals are used commercially in the United States, and 75,000 of them are potentially hazardous to our health. The

Environmental Defense Council reports that more than four billion pounds of toxic chemicals are released into the environment each year, including 72 million pounds of known carcinogens.

Zeolites are one of the few negatively charged minerals in nature. Basically, they act as magnets, attracting positively charged heavy metals and toxins, capturing them, and removing them from the body. They are an extremely effective chelating agent. **Here's how:** within the structure of the zeolites, there are certain “cages,” inside of which are positive ions. The positive ions switch places with the heavy metals, pesticides, or herbicides, which are also positive ions, and then the cage structure of zeolites tightly binds them. One amazing quality of this “caged binding” effect is that the toxins and heavy metals are 100% excreted. In other words, they don't get “relocated” to another spot in the body, they actually get evicted!

Zeolites are effective against harsh microorganisms such as bacillus, fungus, mildew, staphylococcus, and streptococcus. They function as a broad spectrum anti-viral agent, help balance pH levels in the body, reduce allergic reactions, chelate heavy metals, neutralize acids, increase oxygen levels, fend off microorganisms, and support immune system function.

There are several good zeolite products available. Two which I recommend are Super Z-Lite™ and Natural Cellular Defense (NCD™).



STEP OUTSIDE THE BOX

CHAPTER 12

THE “DIRTY DOZEN”

“WHEN YOU SEE THE GOLDEN ARCHES, YOU ARE PROBABLY ON YOUR WAY TO THE PEARLY GATES.”
-DR. WILLIAM CASTELLI

The last couple of chapters have dealt with which foods and supplements you should consume. Now for the items you should **avoid**. I have labeled this chapter “The Dirty Dozen” because it details twelve foods/toxins which can pose serious health problems if consumed or ingested regularly. Actually, a few of them can cause serious problems if only consumed/ingested even occasionally. Is it possible to eliminate these substances completely? Probably not, but at least you will be aware of which ones are the worst, since food and toxins are integral components of the cancer equation. As a matter of fact, a recent report by the Columbia University School of Public Health estimated that **ninety-five percent of cancer is caused by diet and environmental toxicity**. These statistics are staggering, if you really think about them!

Here are a few more startling statistics:

- There are over 80,000 chemicals produced in North America
- There are over 3,000 chemicals added to our food supply
- There are over 10,000 chemical solvents, emulsifiers, and preservatives used in food processing
- There are over 1,000 new chemicals introduced each year

This chapter is a veritable “buffet” of foods, toxins, and poisons to avoid like the plague if you have cancer! The first section is entitled “Franken-Foods” and the last section is entitled “Terrible Toxins.”

“FRANKEN-FOODS”

This section is entitled “Franken-Foods” because, if you will notice, all of the foods have been altered from their natural state or they contain ingredients which have been altered. The 5 foods/food ingredients in this section not only have little nutritional value, but they also give your body a healthy (or is it “unhealthy”) dose of carcinogenic toxins, which should make the idea of eating them really “hard to swallow.”

“FAKE-FATS” (TRANS-FATS & HYDROGENATED OILS)

“*Trans-fats*” are manufactured fats, produced by pushing hydrogen into vegetable oils to produce a solid fat, hence they are also called “hydrogenated” or “partially hydrogenated” oils. Trans-fats are in fried foods, margarines, and baked goods, packaged snacks, cookies, pie crusts, and donuts. Even “healthy” low-fat muffins and cereals may contain trans-fats. Trouble is, trans-fats are bad for us even in **tiny quantities**. Research has shown that they are implicated in increased cardiac disease, cholesterol levels, and yes, **cancer**.

According to Dr. Brian Olshansky, M.D., University of Iowa Health Care Professor of Internal Medicine, “*the problem with trans fatty acids is that your body doesn’t know what to do with them. Trans fatty acids may help preserve food so that it tastes good, but your body can’t break them down and use them correctly. Normal fats are very supple and pliable, but the trans fatty acid is a stiff fat that can build up in the body and create havoc. The chemical recipe for a trans fatty acid involves putting hydrogen atoms in the wrong place. It’s like making a plastic.*” www.altmedicine.com/Article.asp?ID=3576

In order to mass produce and distribute foods high in oils, food manufacturers deliberately alter the chemical composition of the

oils, which gives them longer “shelf lives.” Another problem with many processed foods is that they are not only irradiated, but they are made with genetically modified foods. If we look at corn chips, we see a product that is likely made with genetically modified corn, then processed in trans-fats, and then irradiated. After all of this, the chips are packaged in a bag which says “All Natural.” But don’t be deceived... there is nothing “natural” about fried corn chips.

COUNTERTHINK



FACT: THE "ALL NATURAL" CLAIM ON FOOD PRODUCTS IS MEANINGLESS. GET THE FACTS:

WWW.HONESTFOODGUIDE.ORG

Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

In the 1950s, Dr. Johanna Budwig proved that these chemically-altered, hydrogenated fats (*which she called “pseudo” fats*) destroy cell membranes. She demonstrated that these hydrogenated, processed fats and oils shut down the electrical field of the cells and make us susceptible to chronic and terminal diseases.

In healthy fats there is a vital electron cloud which enables the fat to bind with oxygen. Healthy, oxygenated fats are capable of binding with protein and in the process become water-soluble. This water solubility is vital to all growth processes, cell damage restoration, cell renewal, brain and nerve functions, sensory nerve functions, and energy development. In fact, the entire basis of our energy production is based on lipid metabolism. **Hydrogenation destroys the vital electron cloud**, and as a result, these “pseudo” fats can no longer bind with oxygen or with protein. These fats end up blocking circulation, damaging the heart, inhibiting cell renewal, and impeding the free flow of blood and lymph.

Three of the most popular foods which contain trans-fats are donuts, french fries, and chips. Donuts are nothing but big balls of sugar, trans-fats, and white flour. They have **no nutritional value**. Most french fries and chips have been soaked in trans-fats to such extent that there is virtually no nutrition left in them. Some companies have tried to make them more “healthy” by eliminating the trans-fats, but all donuts and chips and fries that are cooked in oil (*regardless of what type oil*) have cancer-causing acrylamides. The chemical, acrylamide, which is used industrially in the manufacture of some plastics, is also formed by the heating of starches. And guess what...three foods with especially high levels of **acrylamides** are donuts, french fries, and potato chips. Acrylamides are only allowed in your drinking water at a level of 0.12 micrograms per serving by the EPA. **Check this out:** a six ounce helping of french fries at your local fast food joint will contain anywhere from fifty to seventy micrograms of acrylamides. That’s between **400 and 600 times** the EPA limit! I have heard it said by numerous doctors that a french fry is worse for your health than a cigarette. I agree.

In light of the fact that they have been shown to cause so many health problems, why do food manufacturers continue to use trans-

fats? The answer is plain and simple: **money**. Trans-fats greatly prolong the shelf life of processed foods.

HIGH FRUCTOSE CORN SYRUP / SUGAR / SODAS

I decided to combine these 3 items since they typically go “hand in hand” in our “*Big Gulp*” society, despite what you hear from the sugar industry and its efforts to prevent the distribution of information that accurately links refined sugars to chronic disease. Cancer cells grow by anaerobic respiration; they ferment sugar. If you’ve ever made wine, you’ll know that fermentation requires sugar. There are many nutritional cancer therapies, but not a single one allows foods high in carbohydrates and not a single one allows sugars, because **sugar feeds cancer**.

But isn’t high fructose corn syrup a healthy alternative? Well, in a word, “**no.**” But why didn’t my doctor warn me about it? Remember, it wasn’t too long ago when doctors were being paid by cigarette companies to actually endorse cigarettes. So it’s really no surprise that there are some doctors who are clueless on the dangers of high fructose corn syrup, despite the fact that it’s basically common sense to anyone who has half a brain and has spent more than a few minutes studying the issue. When you understand how blood sugar is regulated in the human body, how the pancreas works, and how the digestive system converts dietary sugars into blood glucose, it is obvious that candy bars and soft drinks promote obesity, diabetes, and chronic disease by suppressing the immune system and inhibiting mineral absorption.

Let’s think about this for a moment. What do farmers feed cows when they want to fatten them up for market? Corn, of course! So, if you want to look like a cow, all you have to do is eat lots of corn and corn by-products, including high-fructose corn syrup. Amazingly, a twelve ounce can of soda has as much as **thirteen teaspoons of sugar** in the form of high fructose corn syrup. Another reason to avoid carbonated sodas is that they have a pH of around 2.0, which will contribute to a highly acidic terrain. According to Dr. James Howenstine, M.D., “*In an interesting*

experiment the sugar from one soft drink was able to damage the white blood cells’ ability to ingest and kill gonococcal bacteria for seven hours...soft drinks also contain large quantities of phosphorus, which when excreted pulls calcium out of the bones. Heavy users of soft drinks will have osteoporosis along with their damaged arteries” (J. Howenstine, A Physician’s Guide to Natural Health Products That Work).

In 1951, Dr. Clive McCay, a Navy nutritionist at the Naval Medical Research Institute, found that human teeth softened and started to dissolve in a short period of time after sitting in a cup of Coca Cola. He stated the acidity of cola beverages is about the same as vinegar, only it is masked by the sugar content. Maybe this is why soda pops are also referred to as “**soft drinks**” – because they soften your teeth and bones!!

And if you think diet sodas are better, think again. Diet sodas typically have a lower pH than normal soda, and they also contain harmful artificial sweeteners like aspartame. If you want to sweeten foods, I recommend **stevia**, which is an herb three hundred times sweeter than sugar. Its medicinal uses include regulating blood sugar, preventing hypertension, treatment of skin disorders, and prevention of tooth decay. Other studies show that it is a natural anti-bacterial and anti-viral agent as well. So, while it will make your food tasty, stevia is also actually good for you!

For the cancer patient, sugar is a definite “**no no.**” If you hate your cancer, then starve it. If you regularly drink sodas, try drinking water instead. Eliminating sodas from your diet is one of the **easiest** ways to immediately improve your health.

EXCITOTOXINS (MSG & ASPARTAME)

What is an excitotoxin? These are substances, usually amino acids, that react with specialized receptors (*neurons*) in the brain in such a way as to lead to destruction of certain types of brain cells. Humans lack a blood-brain barrier in the hypothalamus, which allows excitotoxins to enter the brain and cause damage. Simply put, as described in Dr. Russell Blaylock’s book, Excitotoxins: The Taste

That Kills, they are exactly what they sound like: **toxins that excite your brain cells to death!**

MSG. No strain of rat or mice is naturally obese, so the scientists have to create them. They make these morbidly obese creatures by injecting them with MSG when they are first born. The MSG triples the amount of insulin the pancreas creates, causing rats to become obese. MSG creates a lesion in the hypothalamus that correlates with abnormal development, including obesity, short stature and sexual reproduction problems. MSG has also been shown to kill brain cells as well as to cause nausea, vomiting, migraine headaches, depression, and heart problems. Unfortunately, MSG is often disguised under other names, thus you may not be able to detect it in a list of ingredients.

Some synonyms for MSG are “*Glutamate Textured Protein*” or “*Glutamic Acid Yeast Extract*” or “*Gelatin Yeasts Nutrient*” or “*Hydrolyzed Vegetable Protein.*” They hide MSG under many different names in order to fool those who catch on. Food companies learned that MSG could increase the flavor and aroma and enhance acceptability of commercial food products, so it is doubtful that they will ever quit using this brain killing additive to our food supply. Take a quick trip to your kitchen and check the pantry and the fridge. You will realize that MSG is in **everything!** The soups, the chips, the ramen, the hamburger helper, the gravy, the salad dressings, the corn oil, the broth, and so on.

Aspartame (commonly called *NutraSweet* or *Equal*) is also an excitotoxin, and it has been shown to erode intelligence and affect short-term memory. Believe it or not, aspartame was once on a Pentagon list of biowarfare chemicals submitted to Congress! It is made from two amino acids and methanol (*wood alcohol*). Although test studies showed that it is extremely toxic to the brain, the government suppressed this fact and it was officially approved as a food additive for use in soft drinks in 1983. The FDA ignored complaints of headaches, dizziness, nausea, vomiting, seizures, convulsions, blurred vision, and a multitude of other negative reactions to aspartame. We recently watched a documentary on

aspartame called *Sweet Misery*. It was amazing. You can see the trailer for the DVD and also see the first five minutes of the movie here: <http://aspartamekills.com>. Later in the book, there is an entire chapter dedicated to exposing the frauds surrounding aspartame.

RBGH / SODIUM NITRATE

In 1994, Monsanto and the FDA introduced rBGH (*recombinant bovine growth hormone*) into the market. This is a powerful genetically engineered drug which, when injected into dairy cows, will force them to produce up to 25% more milk. However, when a cow is injected with rBGH, its milk production is stimulated, but not directly. The presence of rBGH in the cow’s blood stimulates production of another hormone, called Insulin-Like Growth Factor (IGF). It is IGF that stimulates milk production.

IGF is a naturally occurring hormone-protein in both cows and humans. Numerous studies have shown that the IGF in cows is chemically identical to the IGF in humans. The use of rBGH increases the levels of IGF in the cow’s milk, and the IGF is **not** destroyed by pasteurization. Since IGF is active in humans (*it causes cells to divide*), an increase in IGF in milk raises obvious questions as to whether it will cause inappropriate cell division and growth, leading to growth of tumors.

Since its emergence on the market in 1994, **every industrialized country in the world (except for the USA) has banned rBGH**. The fact of the matter is that rBGH was never adequately tested before the FDA allowed it on the market. A standard test of new biochemically produced products and animal drugs requires twenty-four months of testing with several hundred rats. But rBGH was tested for only **90 days** on 30 rats. This short term rat study was submitted to the FDA but never published. The FDA refused to allow anyone outside that agency to review the raw data from this truncated study, saying it would “*irreparably harm*” Monsanto.

In February of 1997, two veteran news reporters for Fox TV in Tampa, Florida, were fired for refusing to water down an investigation reporting that rBGH may promote cancer in humans

who drink milk from rBGH treated cows. Monsanto pressured Fox TV to water down the series, offering to pay the two reporters if they would leave the station and keep silent about their report, but they refused and were fired. On April 2, 1998, they filed their own lawsuit against the TV station. After a five week trial and six hours of deliberation which ended August 18, 2000, a Florida state court jury unanimously determined that Fox “acted intentionally and deliberately to falsify or distort the plaintiffs’ news reporting on rBGH.” The jury awarded \$425,000 in damages. **Why was Monsanto so determined to keep the reporters quiet?**

Here’s why. In 1998, Canadian scientists managed to acquire the full Monsanto studies for the first time. They were stunned to find out that the FDA never even looked at Monsanto’s original data on which the agency’s approval had been based. In reviewing the data, the scientists learned that Monsanto’s “secret” studies showed that rBGH was linked to **prostate cancer** and **thyroid cancer** in laboratory rats! Sadly, despite clear evidence that Monsanto and the FDA have suppressed and manipulated information on genetically modified milk since the early 1990s, most milk in your local supermarkets has been produced from cows injected with rBGH.

Sodium nitrate (NaNO_3) and its close relative **sodium nitrite** (NaNO_2) are preservatives that you find in lots of processed meats. Stuff like salami, hot dogs, pepperoni, bologna, ham, bacon (even turkey bacon), livestock feed (yet another reason to only eat grass-fed beef), and SPAM all normally contain sodium nitrate as one of the ingredients. It’s the ingredient that gives these meats that pretty “reddish-pink” color rather than their natural rotten grey. It makes meats appear “fresh” even if they’ve been on the shelves for months.

Almost all processed meats are made with sodium nitrite, despite the fact that it is a precursor to cancer causing chemicals called **nitrosamines**. An enormous amount of evidence indicates that nitrosamines are human carcinogens. For instance, tobacco-specific nitrosamines are one of the major groups of chemical carcinogens in tobacco products. Just remember, when you eat bologna or pepperoni or bacon, you are also eating sodium nitrite, which forms nitrosamines, which promotes the growth of cancer cells. Back in

the 1970s, the USDA attempted to ban sodium nitrite but failed due to lobbying efforts of meat processing industry.

Want some statistics? The University of Hawaii conducted a study on almost 200,000 people and lasted seven years. The results of the research indicated that people who consumed processed meats (such as hot dogs and sausage) had a **67%** increased risk of pancreatic cancer over those who consumed little or no meat products. (www.naturalnews.com/007024.html) Now, I’m not saying that meat products are bad, as I have already discussed grass-fed beef. But all processed meats and meats from rBGH cows...**they’re terrible!** One of the reasons is sodium nitrite. And this is just the tip of the iceberg.

SOY

According to most health professionals, soy beans are the most versatile, natural, heart-friendly, health-improving foods on earth. Soy is the largest cash crop in the USA, and it is being touted as having a myriad of health benefits. But according to Dr. William Wong, “Soy is poison, period!” In his article entitled “Soy: The Poison Seed,” Dr. Wong describes several reasons why soy is poison. Soy contains two isoflavones (estrogen like substances) which are basically built in insecticides for the soybean. He asks, “If they kill bugs, are they good for humans?” Good point.

According to lipid (fat) specialist and nutritionist Mary Enig, PhD, “The reason there’s so much soy in America is because they [the soy industry] started to plant soy to extract the oil from it and soy oil became a very large industry. Once they had as much oil as they did in the food supply they had a lot of soy protein residue left over, and since they can’t feed it to animals, except in small amounts, they had to find another market.”

And another market was what they found: **the unsuspecting American public**. To put it simply, after millions and millions of dollars spent on advertising, a propaganda campaign that makes Hitler look like a rank amateur, and intense lobbying to the FDA,

approximately 74% of American consumers now believe soy products are healthy. www.mercola.com/2004/jan/21/soy.htm

If you're thinking the health claims surrounding soy sound too good to be true you just may be right. Soy contains **phytin**, which removes essential minerals such as iron, zinc, and magnesium before they can be absorbed. Soy also contains **trypsin inhibitors** – remember trypsin is essential in the recognition and digestion of both proteins and cancer cells. Beyond these, soybeans also contain **hemagglutinin**, a clot promoting substance that causes red blood cells to clump together. These clustered blood cells are unable to properly absorb oxygen for distribution to the body's tissues.

According to Dr. Tim O'Shea, “Yet another toxin found in some processed soy products is aluminum, which is said to be 10 times higher in infant soy formulas than in milk-based formulas--and 100 times higher than in unprocessed milk. Levels are even higher when soy products are hydrogenated. Aluminum, a cause of Alzheimer's, can also damage the newly forming kidneys of an infant who drinks soy formula. Worse yet, aluminum can directly damage the infant brain because the blood-brain barrier has not formed yet. Processed soy can also contain a known carcinogen called lysinoalanine. It is a by-product of a processing step called alkaline soaking, which is done to attempt to eliminate enzyme inhibitors. Even though the beans are thoroughly rinsed, the lysinoalanine by-product can remain from the interaction of the soybeans with the alkaline solution.” www.camaweb.org/library/nutrition/soy_con.php

The bottom line on soy is this: **Soybeans are not a complete protein, are not a natural food, contain several harmful and even carcinogenic substances, and most soybeans in the United States are genetically modified.** According to Dr. Wong, “any opinions to contradict the facts noted above have been paid for by the agribusiness giants Monsanto and Archer Daniels Midland. Once public knowledge of their manipulation of public opinion and of the FDA becomes widely known, expect monster class action lawsuits against these folks. They'll deserve it in spades!” You can read much, much more about soy later in the book, as I have devoted Chapter 19 to exposing the myths surrounding soy.

“TERRIBLE TOXINS”

The toxins listed in this section are everywhere, so watch out! In all actuality, an entire book could be devoted to environmental and food toxins, but I have chosen just to mention a few of the most common toxins. A study in the February 21, 2004 *British Medical Journal* estimated that **75% of most cancers are caused by environmental and lifestyle factors, including exposure to chemicals.**

ASBESTOS

More than thirty million tons of asbestos in its various forms have been mined in the past century. Asbestos is one of the most pervasive environmental hazards in the world, present in more than 3,000 manufactured products. It was widely used from the 1950s to 1970s. Asbestos is actually a family of minerals that can be spun into fibers and then woven into cloth. Due to this fact, it will not burn, thus it has been used heavily in the insulation industry as a fire retardant. Problems arise when the material becomes old and crumbly, releasing fibers into the air and then inhaled into our lungs. Asbestos won't burn, neither will it dissolve once inside the body. So, the fibers get caught in the lungs and other organs and irritate the tissues and cause lesions and eventually scarring.

There are three diseases that are triggered by inhaling asbestos fibers: asbestosis, mesothelioma, and lung cancer.

Asbestosis is caused when asbestos fibers are inhaled and become trapped in the lungs. In response, the body tries to dissolve the fibers by producing an acid. While not destroying the fibers, the acid serves to scar the lung tissue. Eventually the scarring can become so severe that the lungs become unable to function. **Mesothelioma** is a cancer of the outside tissue of the lungs. **This cancer is solely linked to asbestos.** The time from exposure to manifestation of these diseases is from fifteen to forty years.

The major sources of asbestos are insulation on floors, ceilings, heating ducts, and water pipes from the 1950s to the 1970s. Even

though the use of asbestos in office buildings ceased over 30 years, millions of office workers are still working in older buildings which contain asbestos insulation. I have heard estimates that over 50% of the skyscrapers in America still contain asbestos! Both of the “Twin Towers” that fell on 9/11/01 were full of asbestos. There have been concerns about a possible asbestos cover up by the EPA and the federal government during the cleanup of the World Trade Centers. In fact, the United States is one of the few nations that have not yet placed a ban on asbestos – it is still an ingredient in thousands of products. That’s right, amazingly, despite the known health risks, **asbestos has not been banned** in the USA.

The Consumer Product Safety Commission (CPSC) abandoned its attempts to ban asbestos products in 1979, passing the responsibility to the EPA. In 1989, the EPA attempted a ban of its own, but in 1991, the U.S. 5th Circuit Court of Appeals overturned it. Insidious and deadly, asbestos has worked its way through the “cracks” of the consumer protection system for almost thirty years.

As a result, asbestos is still lodged deep in the tissue of American commerce, and almost no one is paying attention. Despite the fact that health experts expect the asbestos to claim another 250,000 lives in the U.S. during the next several decades, asbestos is still being an ingredient in a multitude of everyday products ranging from brake pads to ceiling tiles. Imports of products containing asbestos are also on the rise. The bottom line is that virtually every man, woman, and child has been exposed to asbestos, due to its pervasiveness. Only time will tell the deleterious health effects which result from this dangerous carcinogen.

FLUORIDE

Fluoride is added to the water supply of most American cities for the ostensible purpose of dental hygiene. Contrary to popular opinion, fluoride doesn’t stop tooth decay at all, but actually causes teeth to rot and crumble. It is actually a neurotoxic industrial waste that causes birth defects, cancer, and osteoporosis. It damages the immune, digestive, and respiratory systems as well as the kidneys, liver, brain, and thyroid.

Science shows fluoride is more toxic than lead (Clinical Toxicology of Commercial Products, 1984). There are more than **500 peer reviewed studies documenting adverse effects of fluoride ranging from cancer to brain damage**. And yet, municipalities throughout the United States actually purchase this product and then drip it into the public water supply. According to Dr. Charles G. Heyd, former President of the AMA, “*I am appalled at the prospect of using water as a vehicle for drugs. **Fluoride is a corrosive poison that will produce serious effects on a long range basis.** Any attempt to use water this way is deplorable.*” www.apfn.org/apfn/poison.htm

There is **no scientific evidence** that fluoride is a beneficial additive to water, and in fact that there is overwhelming scientific evidence that proves, without a doubt, that fluoride is **harmful!** The bottom line is that all federal health agencies have known these facts for years, but have been controlled by the political interests of the nuclear arms, aluminum, and phosphate manufacturers to keep it a secret. I suggest that you read “*50 Reasons to Oppose Fluoridation*” at www.fluoridealert.org/50reasons.htm. It is an eye opener.

I have devoted Chapter 15 to the dangers of fluoride.

MERCURY (& OTHER HEAVY METALS)

Did you know that most of the fish we eat contains mercury? Why? Thousands of tons of mercury are released into the air each year through pollution and waste. Eventually, it accumulates in steams, oceans, water and soil. It also accumulates in the food chain, so each fish absorbs the mercury in other fish and organisms it eats. The bigger the fish, the more mercury it absorbs. Shark, swordfish, tilefish, mackerel, sea bass, marlin, halibut, oysters, salmon, and tuna contain the highest levels of methylmercury.

According to Dr. Joseph Mercola, “*Methylmercury toxicity can result in paraesthesia, depression, and blurred vision. In fetuses and developing infants it can also have negative effects on attention span, language, visual-spatial skills, memory and coordination. It is estimated that nearly 60,000 children each year are born at risk for*

neurological problems due to methylmercury exposure in the womb.”
www.mercola.com/2003/jun/28/mercury_fish.htm

The Environmental Protection Agency (EPA) has issued health advisories about consuming fish due to mercury contamination. The “**Got Mercury?** Calculator” at www.gotmercury.org can help you decide how much, and what type, of seafood is safe for you and your family. Just enter your weight, the seafood type and quantity, and hit the calculator button. The online calculator will tell you whether your consumption exceeds the EPA’s safe limit for mercury.

What about those mercury fillings in your mouth? Mercury amalgam dental fillings contain approximately 50% mercury. Initially, the American Dental Association (ADA) denied that mercury from these fillings leaked vapor, which is then absorbed into our bodies. But, in recent years, facing numerous studies to the contrary, the ADA has conceded that mercury fillings do leak mercury vapor, which is extremely toxic.

Did you know that the metallic mercury used by dentists to manufacture dental amalgam is shipped as a **hazardous material** to the dental office? Did you know that when mercury fillings are removed, they are treated as hazardous waste and are required to be disposed of in accordance with federal OSHA regulations? Charlene and I are in the process of getting all of our mercury fillings removed. I recommend that you do the same.

Like mercury, other heavy metals like arsenic, lead, aluminum, and cadmium, which are prevalent in many areas of our environment, can accumulate in soft tissues of the body and can cause a multitude of degenerative diseases, including cancer. These heavy metals are found in our drinking water, in fish, vaccinations, pesticides, antiperspirants, building materials, and dental amalgams, just to name a few sources.

I have devoted Chapter 17 to the dangers of mercury and other heavy metals.

MYCOTOXINS (FUNGAL TOXINS)

Corn and Peanuts both contain mycotoxins, which are poisonous substances produced by certain molds found primarily in grain and nut crops. They are basically “fungus poisons” which cause a wide range of health problems in humans. Corn is commonly contaminated with fumonisin and other fungal toxins such as aflatoxin and fumonisin (both known for their cancer-causing effects). A 1993 study demonstrated twenty-four different types of fungi found in peanuts, including aflatoxin. (Costantini, A. “Etiology and Prevention of Atherosclerosis” Fungalbionics Series 1998/99).

Mushrooms not only contain mycotoxins, they basically **are** mycotoxins. Mushrooms are not vegetables, but rather the fruiting body of a fungus. According to Dr. Robert Young, “Don’t eat them, don’t drink them, don’t sniff them. Mushrooms contain varying amounts of *amanitin*, the mycotoxin in all mushrooms. Eating in small amounts it will kill you slowly. In larger amounts, it will kill you almost instantly.” (Sick and Tired, page 91)

After the terrorist attacks of 9/11/01, we began to study bioterrorism agents (such as the fungal-derived toxin “Yellow Rain”). In January of 2002, a simple article entitled “Mycotoxins” by Dr. Ruth Etzel was published in the *Journal of the American Medical Association*. This article did more than educate us about chemical warfare. It took the topic of mycotoxins a step further, saying that these harmful chemicals are not just found on the front lines of battle grounds, but are just as easily found on our playgrounds.

And even more alarmingly, **they are in foods that we eat every day**. In her January 2002 JAMA article, Dr. Etzel states that “the primary concern in developed countries is the long-term effects of ingesting food contaminated with low levels of mycotoxins.” She also states that carcinogenic toxins like aflatoxin are a “common contaminant of peanuts, soybeans, grains and cassava.” According to the National Health Institute (1/4/2004), “From the beginning of organized crop production through present-day agriculture, **mycotoxins** (toxic fungi) **have presented health risks to both human and animal populations,**

including pain, convulsions, hallucinations, respiratory effects, and death.”

ORGANOCHLORINES (CHLORINE BYPRODUCTS)

Chlorine gas was a weapon used in both world wars and is a neurotoxin so poisonous that it was outlawed by international war codes. It cannot be screened out by our lungs, goes in faster than oxygen, is immediately absorbed into the bloodstream when it is inhaled, and if the concentration is adequate, death is instantaneous. As molecular biologist Joe Thornton explains, *“There are no uses of chlorine which we regard as safe.”* Yet chlorination, considered one of the greatest advances ever in public health and hygiene, is almost universally accepted as the method of choice for purifying water supplies.

Most drinking water in the USA comes from a surface water source, that is, a lake or river. These lakes and rivers are typically rich in invisible organic matter produced by decaying leaves and algae. During disinfection, chlorine randomly attaches to this organic matter to form thousands of new chemicals called *“organochlorines.”* Organochlorine compounds are not found naturally anywhere in the world, but once they are formed by combining chlorine with organic materials, they are extremely toxic and very stable. Most of them don’t break down for hundreds of years.

Organochlorines are easily absorbed into our bodies and are lipophilic (*stored in our fat cells*) where they accumulate. According to molecular biologist Joe Thornton, *“chlorination virtually always increases toxicity.”* A growing number of studies have linked chlorinated drinking water to cancer in humans. The most esteemed cancer study is a compilation of ten separate epidemiological studies on chlorinated drinking water and cancer known as the Morris study. It found disinfection by-products in chlorinated water to be responsible for 9% of all bladder cancers and 15% of rectal cancers in the U.S. This translates into 10,000 additional deaths per year for just these two organs. According to the U.S. Council of Environmental Quality, *“Cancer risk among people drinking*

chlorinated water is **93% higher** than among those whose water does not contain chlorine.” Prolonged exposure has also been shown to produce birth defects, immune system problems, and reproductive disorders.

Although water disinfection accounts for only a small percentage of total global organochlorine production, the effect on human health is proportionately greater because exposure to chlorinated drinking water is large and continuous. It is piped right into our homes. But organochlorines in our drinking water are just the tip of the iceberg! The most toxic organochlorine is **dioxin**. The EPA considers dioxin to be 300,000 times more carcinogenic than DDT. **No level of dioxin is considered safe.**

A draft report released for public comment in September 1994 by the U.S. EPA clearly describes dioxin as a serious public health threat. Dioxin is formed as a result of combustion processes such as commercial or municipal waste incineration, from burning fuels (*like wood, coal or oil*), and from the paper and plastic production industries. In 1997, the International Agency for Research on Cancer, which is part of the World Health Organization, announced that the most potent dioxin is a now considered a Group 1 carcinogen, meaning a “*known human carcinogen.*”

In addition to cancer, dioxins can cause reproductive and developmental disorders, liver damage, chloracne, skin rashes, skin discoloration, etc. The major sources of dioxins are animal fats. Since dioxins are fat-soluble, they bioaccumulate, climbing up the food chain. A typical American will receive 93% of his/her dioxin exposure from meat and dairy products. In fish, these toxins bioaccumulate up the food chain so that dioxin levels in fish are 100,000 times that of the surrounding environment. The main sources of dioxin are the paper production industry, the plastic production industry, and incinerators than burn chlorinated waste.

Recent scientific research has clearly demonstrated an association between organochlorines and breast cancer. Analyses of the breast fat of women with breast cancer found that DDT, its derivative DDE, PCBs, and other organochlorine pollutants actually concentrate in the cancer tissue itself, in contrast with surrounding non-cancerous

tissue. Organochlorines are not only often overtly toxic, but they also possess estrogenic activity. In other words, they mimic estrogen. Chemicals that function like estrogen are called **xenoestrogens** (literally “foreign estrogens”) and wreck havoc in a number of ways. A woman’s earliest and most dangerous contact with them may be in the womb. Xenoestrogens have been linked to **breast cancer** as well as an increase in reproductive abnormalities in males, including **prostate cancer** and **testicular cancer**.

PLASTIC POLLUTANTS

When you eat or drink things that are stored in plastic, taste it, smell it, wear it, sit on it, and so on, plastic is incorporated into you. In fact, the plastic gets into the food and food gets into the plastic and you. So, quite literally, you are what you eat, drink, and breathe. We are becoming “**plastic people**.”

Water bottles are be made from various types of plastic, such as polycarbonate (*PC*), polyethylene terephthalate (*PET*), polypropylene (*PP*), high-density polyethylene (*HDPE*), low-density polyethylene (*LDPE*), polyvinyl chloride (*PVC* or *vinyl*), and others. Bisphenol-A (*BPA*) is a monomer used in the synthesis of *PC* plastics, epoxy resins, and composites, as well as a heat stabilizer in *PVC*.

The list of products containing *BPA* is long, as it is deeply imbedded in the products of modern society. *BPA*-based *PC* plastic is used as a coating for children’s teeth to prevent cavities, as a coating in metal cans to prevent the metal from contact with food contents, as the plastic in food containers, refrigerator shelving, baby bottles, water bottles, returnable containers for juice, milk and water, microwave ovenware, and eating utensils.

As the plastic ages, then the *BPA* leeches. Experiments with rats demonstrate that low level exposure to *BPA* during fetal growth causes breast cancer in adults as well as insulin resistance. In a small prospective study, researchers in Japan report that *BPA* levels are higher in women with a history of repeated spontaneous miscarriages.

BPA is only one of a long list of plastic pollutants, a list that is so long that it would require its own book in order to have an exhaustive study. The bottom line is that BPA (*and other plastic pollutants*) are extremely toxic and are **everywhere!** What this all means is that most of your life, you will be within arm’s length to BPA or another form of toxic plastic. www.ourstolenfuture.org

Phthalates are plasticizers used to make plastic products more flexible and also to lengthen the life of fragrances. About **four million tons** of phthalates are produced worldwide each year. Phthalates are recognized as toxic substances under environmental law, but companies are free to use unlimited amounts in cosmetics.

Some common phthalates and the products which contain them:

- **Di-ethyl phthalate (DEP):** Toothbrushes, auto parts, tools, toys, food packaging, insecticides, mosquito repellents, aspirin, nail polish, perfumes, hair sprays.
- **Di-n-butyl phthalate (DBP):** Cellulose plastics, solvents for dyes, solvents for cosmetics, nail polish, food wrap, perfumes, skin emollients, hair spray, insect repellents.
- **Benzyl butyl phthalate (BBP):** Plasticizers in adhesives, PVC flooring, wood finishes, biodegradable tampon ejectors

That new car smell, which is especially strong after the car has been sitting in the sun for a few hours, is the odor of phthalates precipitating from a hot plastic dashboard. Then, when it cools down in the evening, the phthalates condense to form an oily coating on the inside of the windshield.

Interestingly, an environmental release of just 10 pounds of DBP must be reported to environmental authorities under the Superfund law. However, the cosmetics industry puts **thousands of tons of DBP** into nail polish each year, with no requirements for safety testing or reporting to anyone.

But “why?” you may ask. Many pivotal court decisions implementing the 1976 Toxic Substances Control Act (TSCA) have basically hamstrung the EPA. You see, the EPA must prove an “*unreasonable risk of injury*” to human health before it can remove a

chemical from the market. However, they cannot prove unreasonable risk of injury without first conducting safety studies, which are expressly prohibited until “substantial” or “significant” exposure is proved to be occurring. So, it’s an **endless loop**, since the FDA can almost never prove that substantial or significant exposures are occurring because exposure data is extremely difficult to obtain. **To put it simply, the EPA cannot regulate a chemical until it makes a finding of risk based on data which the law virtually prohibits it from collecting.** This is absurd, isn’t it?

Women who are pregnant, nursing or thinking about getting pregnant should look for and avoid all personal care products with the word phthalate on the label. The major sources of phthalates are plastic wrap, plastic bottles, plastic food storage containers, nail polish, and cosmetics. Phthalates have been shown to have estrogenic qualities, have toxic effects on the testicles, and to cause birth defects. They can also cause cancer, damage the endocrine system, and are particularly dangerous to children.

On a related note, many brands of plastic dinnerware is made of melamine plastic, since it is hard and smooth and keeps its shape well. Did you know that up to 90% of the infant formula sold in the USA may be contaminated with trace amounts of melamine? According to recent tests (*the results of which the FDA hid from the public*), Nestle, Mead Johnson and Enfamil infant formula products were all contaminated with melamine.

The truth about the melamine only became public after the Associated Press filed a Freedom of Information Act (FOIA) request, demanding the test results from the FDA. Of course, the FDA claims that low levels of melamine are perfectly safe for babies to consume in unlimited quantity. **Sure they are!** I suppose BPA is safe, too? What about aspartame, MSG, fluoride, sodium nitrite, and every other poison? If you believe the FDA, all these toxic poisons are safe to consume. However, by this point in the book, I hope you now realize that the FDA is nothing more than a legalized gang of unindicted criminals engaged in the tactics of intimidation, censorship, and oppression that can appropriately be described as “terrorism.”

THE “CIDES”

(PESTICIDES, HERBICIDES, FUNGICIDES, & INSECTICIDES)

Do you still think that the fruit you are eating is safe? Think again. A recent study from the United Kingdom indicates that pesticide residues on some common fruits are unusually high. Some apples, pears, raspberries, and grapes contained pesticide residues that exceeded the legal limits. Cherries, lettuce, and pumpkins all contained potentially dangerous levels of toxic pesticide residues as well. And the produce wasn't just from one area – it originated from all over the world from Brazil to Spain to Canada.

So remember that when you reach for that luscious fruit at the grocery you may be inadvertently feeding your kiddos pesticides as well. Fruits and vegetables that are heavily sprayed include strawberries, cantaloupe, bell peppers, peaches, nectarines, celery, potatoes, carrots, and imported grapes. **What commercially grown fruits are relatively safe?** Blueberries, grapefruit, bananas, broccoli, mangos, cauliflower, avocados, asparagus, onions, California grapes (*in season*), citrus, pineapple, and melons.

According to the EPA, 60% of herbicides, 90% of fungicides and 30% of insecticides are known to be carcinogenic. Alarmingly, pesticide residues have been detected in over half of U.S. foods. Most pesticides contain multiple toxins, and there is no class of pesticide which is free of cancer causing potential. The most convincing evidence that pesticides are carcinogens comes from epidemiological studies. The common lawn pesticide 2,4-D (“Weed-B-Gone”) has been shown to increase the risk of lymphatic cancer in farmers six times the normal rate, according to a National Cancer Institute report (Sinclair, W. 18 “*Studies Show Why Pesticides Are More Dangerous than Previously Realized*”). Scientists believe that the use of lawn chemicals such as 2,4-D has been a significant factor in the 50% rise in non-Hodgkin’s lymphoma over the past 20 years in the American population. (World Health Org., *2,4-D Environmental Aspects*. Geneva, Switzerland, 1989.) The pesticide 2,4-D has also been linked to malignant lymphoma in dogs. Pets are exposed to higher doses of pesticides because they are closer to the ground where concentrations are the highest. Studies show that the risk of

lymphomas doubled in dogs whose owners treated lawns four times per year.

COUNTERTHINK

“THE MANY ‘CIDES OF MODERN FOOD PRODUCTION”



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

In 1983 the National Cancer Institute studied 3,827 Florida pesticide applicators that had been spraying for more than twenty years. They found that these pesticide applicators had nearly three times the risk of developing **lung cancer** and two times the risk of developing **brain cancer**. There was no increased risk for pesticide

applicators that had been spraying for only five years. (*Journal of the NCI*, July 1983.) Beginning in the late 1970s, there have been multiple reports linking pesticides to **leukemia** (blood cancer) in children. A 1987 study by the NCI showed that children living in pesticide-treated homes had nearly a four times greater risk of developing leukemia. ***If the children lived in homes where pesticide was sprayed on lawns and gardens, the risk of developing leukemia was 6.5 times greater.*** (Dr. John Peters, USC, *Journal of the NCI*, July 1987.)

Ever heard of Atrazine? Atrazine is a powerful herbicide applied to over seventy percent of America’s cornfields. Traces of the chemical routinely turn up in American streams and wells and even in the rain, and residues of Atrazine are frequently found in our food supply. So what? Well, this toxic chemical, which was recently banned by the European Union, is a suspected carcinogen and endocrine disruptor that has been linked to low sperm counts among farmers. As a matter of fact, Tyrone Hayes, a herpetologist at UC Berkeley, while doing research on behalf of Syngenta (*Atrazine’s manufacturer*), found that even at concentrations as low as 0.1 part per billion, Atrazine will chemically emasculate a male frog, causing its gonads to produce eggs, in effect, turning males into hermaphrodites.

In an article entitled “The Way We Live Now” (*published in the 6/4/06 NY Times*), author Michael Pollen comments, “Atrazine is often present in American waterways at much higher concentrations than 0.1 part per billion. But American regulators generally won’t ban a pesticide until the bodies, or cancer cases, begin to pile up - until, that is, scientists can prove the link between the suspect molecule and illness in humans or ecological catastrophe. So Atrazine is, at least in the American food system, deemed innocent until proved guilty – a standard of proof extremely difficult to achieve, since it awaits the results of chemical testing on humans that we, rightly, don’t perform. I don’t know about you, but as the father of an adolescent boy, I sort of like the idea of keeping such a molecule out of my son’s diet...”



STEP OUTSIDE THE BOX

CHAPTER 13

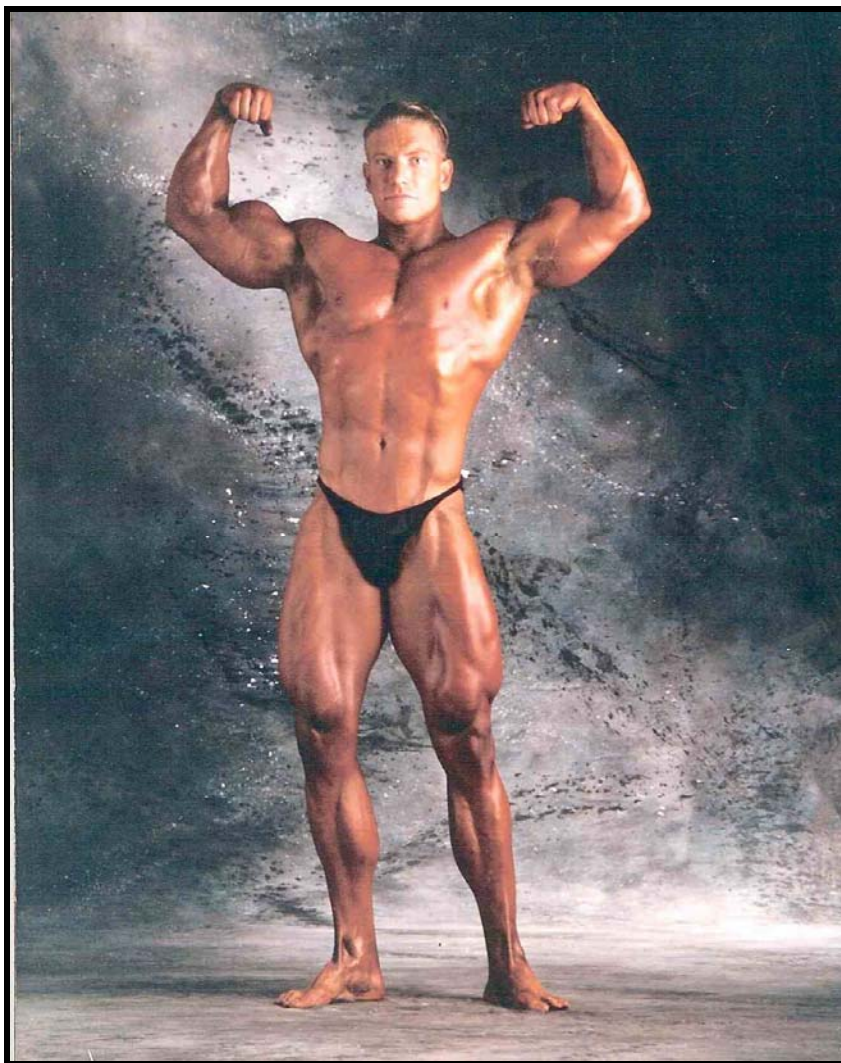
EXERCISE ESSENTIALS

"EXERCISE HAS BEEN SHOWN TO REDUCE THE RISK OF
MANY TYPES OF CANCER" -DR. JOSEPH MERCOLA

*B*ack in the late 1980s and early 1990s, I competed in and won numerous bodybuilding contests. At competition, my normal contest weight was around 220 pounds and my body fat measured around three percent. I “looked” like the picture of health. However, as the saying goes, “looks can be deceiving.” The reality was that due to years of steroid use, my liver and kidneys were on their “last legs.”

I recall visiting my doctor when I was about twenty-five years old and he said that if I didn’t get “off the juice” (i.e. *steroids*), that I wouldn’t make it to age thirty. Well, that was certainly a wake up call for me. **Thank God** that He saved me and I became a Christian a couple of years later. I now lift weights as part of an exercise program aimed at overall health.

I include this information about my experience as a competitive bodybuilder for a couple of reasons. **First**, I want emphasize that “looking healthy” is not necessarily equivalent to actually “being healthy.” Our society puts far too much emphasis on the **external** (*how we look*) and not enough emphasis on the **internal** (*how we feel*) or the **spiritual** (*where we are going when we die*).



You can see from my picture above that I **looked like** I was very healthy. Today, many people will do what ever it takes to have a “killer body,” but the truth is that many of them are awfully **un**healthy people and don’t feel very good. For example, one of my bodybuilder friends died at age thirty-four from a stroke caused by years of steroid use. He **looked** like he was as healthy as a horse. But as I said, looks can be deceiving. Now, don’t get me wrong. Appearance is important. That’s why I take a shower every day, make sure my clothes match, and check that I don’t have anything

green stuck in my teeth. But I worry that we’ve gotten so obsessed with how we **look** that we no longer care about how we **feel**.

Secondly, since I am very familiar with the concepts of weight training and cardiovascular (*aerobic*) training, I have some valuable insights into how to incorporate these activities into a “healthy” exercise regimen. Regular exercise also has been shown to increase quality of life and improve the maximal oxygen uptake during exertion, sleep patterns, and cognition. For a cancer patient, a healthy exercise regimen is a vital part of your “*get well and stay well lifestyle*.” It is not just good for you. **It is essential.**

AEROBICS

What is aerobic exercise? Remember, the term *aerobic* means “with oxygen.” During an aerobic workout, the cardiovascular system, which includes the heart, lungs and blood vessels, responds to physical activity by increasing the oxygen that is available to the body’s working muscles. This sounds like a good thing for a cancer patient, doesn’t it? The goal of aerobic exercise is to increase your heart’s capacity to pump blood, thus increasing oxygen delivery to the tissues. The American College of Sports Medicine recommends aerobic exercise done for a minimum of twenty minutes, three times a week at sixty percent of the maximum heart rate.

Many activities can give you an aerobic workout. Some examples include biking, running, walking briskly, swimming, playing basketball, jumping rope, roller skating, and dancing. In addition to these activities, you can get an aerobic workout through stationary exercise machines such as cycles, treadmills, stair steppers, and rowing machines. These can be found at a local gym or health club. Most of these machines can also be used at home.

A “warm up” and a “cool down” period, both of which should incorporate stretching exercises, are essential parts of aerobic exercise. Warming up helps your body prepare for exercise by slowly raising your heart rate and muscle temperature. This also decreases the likelihood of injury. Cooling down allows your heart

rate to slowly return to normal and to get the blood circulating freely back to the heart.

General Guidelines for **Aerobic Exercise**:

- **Keep it simple.** If you're confused about what to do, start with the basics. You need at least 20 minutes per workout to get your heart pumping, so start there. Get out your calendar, find twenty minutes of time on three different days and do **something**, whether it be walking, jogging, going to the gym, working in the yard, swimming, playing basketball, etc.
- **Mix It Up.** The nice thing about aerobic exercise is that you can choose any activity that raises your heart rate. You don't have to do the same workout all the time. If you are bored with your workout, change it up.
- **Drink plenty of water** before, during, and after your workout.

The key to aerobic workouts is the “aerobic” part, i.e. the part that deals with **oxygen**. Oxygen nourishes cells, creates energy, combats fatigue, breaks down waste products and toxins, provides energy needed to metabolize carbohydrates, regulates body pH balance, strengthens immune system defense, and fights off invading hostile organisms. ***The importance of oxygen therapy through regular aerobic exercise cannot be stressed enough.*** It's a matter of health or disease and sometimes (*as in the medical studies of cancer*) life or death. Remember, ***cancer cannot live in the presence of oxygen.***

REBOUNDING

What is rebounding? One excellent choice of exercise is rebounding (*jumping*) on the mini-trampoline. You can rebound several times a day while listening to the radio or watching TV.

Research has led many scientists to conclude that jumping on a mini-trampoline is possibly the most effective exercise yet devised by man, especially because of the effect rebounding has on the lymph system. **The human body needs to move.** The lymph system

bathes every cell and carries nutrients to the cell while removing toxins such as dead and cancerous cells, heavy metals, infectious viruses, and other assorted wastes. But unlike the blood (*which is pumped by the heart*), the lymph is totally dependent on physical exercise to move.

Without adequate movement, the cells are left stewing in their own waste products and starving for nutrients, a situation which contributes to cancer and other degenerative diseases, as well as premature aging. **Rebounding has been shown to increase lymph flow by up to thirty times!** Also, all of the body’s cells become stronger in response to the increased “G forces” during rebounding, and this cellular exercise results in the self-propelled **immune cells being up to five times more active!** These immune cells are responsible for eating viruses, bacteria and even cancer cells, so this is an awesome benefit from rebounding.

Rebounding on a mini-trampoline directly strengthens the immune system, increases lymph flow, and oxygenates the blood. Unlike jogging on hard surfaces which puts extreme stress on certain joints such as the ankles and knees eventually damaging them, rebounding affects every joint and cell in the body equally. Plus, there are no cars, dogs, and bad weather to worry about.

CIRCUIT WEIGHTS

I recommend doing “**circuit weight training.**” Typically, in a gym, there are several weight machines strategically placed in a certain order which makes up what is called a circuit. You just go from one machine to the next until you complete the circuit. Circuit weight training will help you to tone your muscles, strengthen your tendons and ligaments, and if done at a fast pace, can also have an aerobic effect.

General Guidelines for **Circuit Weight Training:**

- **Keep it light.** Don’t try to show off. Lift light weights for at least twenty repetitions per set. And if you feel pain of any kind (*other than a “burn” in your muscles*), then **STOP**. The

pain is warning you that you are overdoing whatever you are doing. Decrease the weight until you can achieve 20 repetitions.

- **Exercise slowly.** Specific exercises should be performed very slowly, with emphasis on the “negative” portion of the movement.
- **Keep in quick.** Your entire workout should not last more than forty-five minutes. Rest only enough time between sets to walk from one machine to the next. This will allow you to get both a muscle building workout and an aerobic workout at the same time.
- **Breathe properly.** Don’t hold your breath when lifting weights. Be sure to intake plenty of oxygen, inhaling and exhaling regularly.

I won’t go into details about the specifics of weight training in this book. Any good personal trainer will be able to assist you with a personalized weight lifting program.

BEWARE: From the viewpoint of immune function, the optimal exercise regimen is one of **low volume**, reports Dr. Roy Shephard and colleagues at the University of Toronto in Canada. Their findings are published in a recent issue of the Journal of Sports Medicine and Physical Fitness. Previous studies have shown that while exercise enhances the immune system, an **excess** of exercise can actually depress immune function. During intense exercise, free radical production is greatly increased which is associated with oxidative damage to the muscles, liver, blood, and other tissues.

One of the world’s leading authorities on antioxidants and free radical research, Dr. Ken Cooper, stated in his book titled, Antioxidant Revolution, *“When you exercise **intensely**, the blood flow in your body is shunted away from the organs that are not actively involved in the exercise process, such as the liver, kidneys, stomach, and intestines. Instead, the blood is diverted to the working muscles, including the heart and legs. During the shifting of blood flow, a part or all of the body regions or organs not involved in exercise will experience an acute lack of oxygen (known as hypoxia).”*

PART 4



FACTS

FICTIONS

&

FRAUDS



STEP OUTSIDE THE BOX

CHAPTER 14

ASPARTAME

FRAUD:

ASPARTAME HELPS YOU LOSE WEIGHT & HAS NO NEGATIVE SIDE EFFECTS.

FACT:

ASPARTAME IS A NEUROTOXIN, HAS BEEN LINKED TO BRAIN CANCER, GRAND MAL SEIZURES, AND SEVERAL OTHER CENTRAL NERVOUS SYSTEM DISORDERS.

How about a diet soda? Diet sodas are harmless, right? Diet sodas will help you lose weight, right? Wrong. A worldwide epidemic is raging. **The cause is a poisonous chemical sweetener called aspartame** (marketed as NutraSweet and Equal), which is the most controversial food additive ever approved. This additive, which we have been led to believe is completely safe, is in reality a drug which interacts with other drugs and changes brain chemistry and causes multiple types of chronic illness, including cancer.

The truth of the matter is that the FDA has always known aspartame is a carcinogen and the FDA's own toxicologist, the late Dr. Adrian Gross told Congress without a shadow of a doubt aspartame can trigger brain tumors and brain cancers and violated the Delaney Amendment which forbids putting anything in food you know will cause cancer. As Dr. James Bowen told the FDA, the manufacturers of aspartame have damaged a generation of children and should be

criminally prosecuted for genocide for the mass poisoning of the USA and hundreds of other countries of the world.

I briefly mentioned aspartame a couple of times earlier in the book, but due to the fact that it is extremely toxic, the fact that it is an ingredient in so many foods and drinks, and the sordid history of how it obtained FDA approval, I have devoted an entire chapter of the book. As I mentioned, aspartame is an excitotoxin, which simply means that it excites your brain cells to death. Dr. Russell Blaylock states that “*the ingredients (in aspartame) stimulate the neurons of the brain to death causing brain damage of varying degrees.*” Excitotoxins: The Taste that Kills, 1994.

So what’s in aspartame? Aspartame is made of three components, 50% phenylalanine, 40% aspartic acid, and 10% methanol (wood alcohol). The methanol is widely distributed throughout the body including brain, muscle, fat and nervous tissue. **This is important:** when the temperature of aspartame exceeds 86° Fahrenheit, the methanol converts to formaldehyde (*embalming fluid*) and formic acid. What is the normal body temperature again? If I remember correctly, it’s 98.6° isn’t it? So, when you ingest aspartame, it heats up above 86° and the methanol turns to formaldehyde, which enters the cells and binds to the proteins and DNA.

Methanol is toxic. Chronic, low-level exposure to methanol has been seen to cause headaches, dizziness, nausea, ear buzzing, GI disturbances, weakness, vertigo, chills, memory lapses, numbness & shooting pains, behavioral disturbances, neuritis, misty vision, vision tunneling, blurring of vision, conjunctivitis, insomnia, vision loss, depression, heart problems (*including disease of the heart muscle*), and pancreatic inflammation. (Kavet, Robert, Kathleen M. Nauss, 1990. “*The Toxicity of Inhaled Methanol Vapors,*” Critical Reviews in Toxicology, Volume 21, Issue 1, pages 21-50)

But don’t many fruits and vegetables contain some methanol? Yes, they do, but they also contain a large amount of **ethanol**, which acts as a **buffer** and neutralizes methanol, thus preventing the conversion of methanol to formaldehyde. In aspartame, there is no such buffer. The maximum “*safe*” level of methanol per day, as determined by the EPA, is 7.8 mg. One liter of diet soda contains

fifty-six milligrams. And if that's not enough, remember that aspartame is 50% phenylalanine, a substance that up to twenty million people cannot metabolize, and this inability is genetically inherited by children. The inability to metabolize phenylalanine can lead to mental retardation in children. This means that aspartame causes an **increased risk of mental retardation for millions of children.**

Aspartame was accidentally discovered in 1965 by James Schlatter, a chemist at G.D. Searle, who licked some of a new ulcer drug from his fingers and discovered the sweet taste of aspartame. **Eureka!** Selling this chemical as a food additive to hundreds of millions of healthy people every day would mean many more dollars than limited sales to the much smaller group of ulcer sufferers. So, in 1967, Searle began the safety tests on aspartame which were necessary for applying for FDA approval of food additives. Its early tests of the substance showed it produced microscopic holes and tumors in the brains of experimental mice, epileptic seizures in monkeys, and was converted by animals into dangerous substances, including formaldehyde.

In 1969, Searle hired Dr. Harold Waisman, a biochemist at the University of Wisconsin, to conduct aspartame safety tests on seven infant monkeys, who were fed aspartame mixed with milk. After 300 days, five of the monkeys had grand mal seizures and one died. Dr. Waisman died before all of his studies were completed. In the spring of 1971, Dr. John Olney (*a neuroscientist*) informed Searle that his studies show that aspartame caused holes in the brains of infant mice. Later that year, one of Searle's own researchers confirmed Dr. Olney's findings in a similar study. But Searle didn't care... they were after their **cash cow!**

In 1973, the G.D. Searle Company applied for FDA approval and submitted over 100 studies they **claimed** supported the safety of aspartame. One of the first FDA scientists to review the aspartame safety data stated that “*the information provided (by Searle) is inadequate to permit an evaluation of the potential toxicity of aspartame*”. According to FDA toxicologist, Dr. Andrian Gross, Searle “...took great pains to camouflage these shortcomings of the study. As I say filter and just present to the FDA what they wished the

FDA to know and they did other terrible things for instance animals would develop tumors while they were under study. Well they would remove these tumors from the animals.” Nevertheless, on July 26, 1974, the FDA approved aspartame for limited use in dry foods, making available to the public for the first time the data supporting their decision. This data was subsequently reviewed by renowned brain researcher John Olney from Washington University in St. Louis, who filed the first objection against aspartame’s approval.

Two years later in 1976, triggered by Olney’s objection, the FDA began an investigation of the laboratory practices of G.D. Searle. The investigation found Searle’s testing procedures shoddy, full of inaccuracies, and “*manipulated*” test data. The investigators reported that they “*had never seen anything as bad as Searle’s testing.*” Then in 1977, a governmental task force uncovered that Searle had falsified data by submitting inaccurate blood tests. In another study, a closer look revealed that uterine tumors had developed in many of the test animals, and Searle admitted that these tumors were related to the ingestion of aspartame. The FDA formally requested that the U.S. Attorney’s office begin grand jury proceedings to investigate whether indictments should be filed against Searle for knowingly misrepresenting findings and “*concealing material facts and making false statements*” in aspartame safety tests.

While the grand jury probe was underway, Sidley & Austin, the law firm representing Searle, begins job negotiations with the U.S. Attorney in charge of the investigation, Samuel Skinner. In July 1977, Skinner resigned and took a job with Searle’s law firm. The resignation of Skinner stalled the grand jury investigation for so long that the statute of limitations lapsed. Eventually, the grand jury investigation was dropped.

In 1979, the FDA established a Public Board of Inquiry (PBOI) to rule on safety issues surrounding aspartame. A year later, the PBOI concluded that aspartame should not be approved pending further investigations of brain tumors in animals, and based on its limited review, the PBOI blocked aspartame marketing until the tumor studies could be explained. Unless the FDA commissioner overruled the board, the matter was closed. But in 1980, Ronald Reagan was

elected President of the United States, and his transition team included Donald Rumsfeld, CEO of G. D. Searle. According to a former G.D. Searle salesperson, Patty Wood-Allott, Rumsfeld told his sales force that, if necessary, “he would call in all his markers and that no matter what, he would see to it that aspartame would be approved that year.” (Gordon 1987, page 499 of U.S. Senate 1987). Not surprisingly, the transition team picked Dr. Arthur Hull Hayes Jr. to be the new FDA Commissioner. Hayes was widely profiled as a man who believed that approval for new drugs and additives was too slow because “the FDA demanded too much information.”

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

In May of 1981, three of six in-house FDA scientists who were responsible for reviewing the brain tumor issues advised against approval of aspartame, stating on the record that the Searle tests

were unreliable and not adequate to determine the safety of aspartame. However, in July of that same year, in one of his first official acts, Dr. Hayes, the new FDA commissioner, overruled the PBOI and officially approved aspartame for dry all products. In 1982, Searle filed a petition that aspartame be approved as a sweetener in carbonated beverages and other liquids.

Almost immediately, the National Soft Drink Association (NSDA) urged the FDA to delay approval of aspartame for carbonated beverages pending further testing because aspartame is very unstable in liquid form. As I have already mentioned, when liquid aspartame is stored in temperatures above 86° Fahrenheit, it breaks down into formic acid and formaldehyde, both of which are known toxins. Despite the public outcry, in 1983, the **FDA approved aspartame for soft drinks** and the first carbonated beverages containing aspartame were sold for public consumption.

Shortly after aspartame was approved for beverages, complaints began to arrive at the FDA. Reactions such as dizziness, blurred vision, memory loss, slurred speech, headaches, and seizures were common with consumption of drinks containing aspartame. **The complaints were more serious than the agency had ever received on any food additive.** In just the first several years after aspartame was approved for beverages, the FDA received over ten thousand complaints about aspartame. In February of 1994, the U.S. Department of Health and Human Services released the listing of adverse reactions reported to the FDA. Amazingly, **aspartame accounted for more than 75% of all adverse reactions** reported to the FDA's Adverse Reaction Monitoring System. By the FDA's own admission, fewer than one percent of consumers who have adverse reactions to products ever report it to the FDA. This balloons the ten thousand complaints to around a million!

In 1985, an FDA toxicologist who tried to stop the approval of aspartame, the late Dr. Adrian Gross, told Congress that because aspartame was capable of producing brain tumors and brain cancer, FDA should not have been able to set an allowable daily intake of the substance at any level. He said without a shadow of a doubt that **aspartame can cause brain tumors and brain cancer**, and violated the Delaney Amendment which forbids putting anything in food you

know will cause cancer. His last words to Congress were “*And if the FDA violates its own law, who is left to protect the public?*” [Congressional Record SID835:131 (August 1, 1985)]

From 1985 to 1995, researchers did about four hundred aspartame studies. Dr. Ralph G. Walton, M.D., reviewed all the studies on aspartame and found 166 with relevance for human safety. Of those one hundred sixty-six studies, seventy-four were funded by G.D. Searle, eighty-five were independent, and seven were funded by the FDA. The results will amaze you, but probably won’t surprise you. Of the seventy-four studies funded by Searle, all of them gave aspartame a clean bill of health. However, of the eighty-five studies that were **not** funded by Big Pharma or the FDA, eighty-four of them found aspartame to be **dangerous** to one’s health.

So, when the FDA tells us that aspartame has been proven to be safe, rest assured that it is basing its findings on the fraudulent Searle studies. Then, when the JAMA, examining the FDA findings (*which are based on the fraudulent Searle studies*), announces that “*the consumption of aspartame poses no health risk for most people.*” **Don’t believe it!** We recently watched a documentary on aspartame called *Sweet Misery*. It was amazing. You can see the trailer for the DVD and also see the first five minutes here: <http://aspartamekills.com>

The toxic effects of aspartame are documented by the FDA’s own data. In 1995, the FDA was forced, under the Freedom of Information Act, to release a list of ninety-two aspartame symptoms reported by thousands of victims. It appears this is only the tip of the iceberg. Dr. H. J. Roberts, M.D., published the medical text “*Aspartame Disease: An Ignored Epidemic*” which contains over one thousand pages of symptoms and diseases triggered by this excitotoxin, including the sordid history of its approval.

Got a sweet tooth? I recommend **stevia**, an herbal sweetener, as a healthy alternative.



STEP OUTSIDE THE BOX

CHAPTER 15

FLOURIDE

FRAUD:

FLUORIDE IS A HARMLESS ADDITIVE FOUND IN TOOTHPASTE AND OUR WATER SUPPLY. IT PREVENTS CAVITIES, HELPS MAINTAIN HEALTHY TEETH, AND IS AN ESSENTIAL MINERAL.

FACT:

FLUORIDE IS A CUMULATIVE TOXIC WASTE, BANNED IN AT LEAST 13 COUNTRIES. FLUORIDE CAN CAUSE BIRTH DEFECTS, CANCER, OSTEOPOROSIS, AND MULTIPLE OTHER HEALTH PROBLEMS.

There's nothing like a glass of cool, clear water to quench your thirst. But the next time you turn on the tap, you might want to question whether that water is in fact, too toxic to drink. If your water is fluoridated, the answer is likely “**yes.**” For decades, we have been told a lie, a lie that has led to the deaths of hundreds of thousands of Americans and the weakening of the immune systems of tens of millions more. ***This lie is called fluoridation.***

A process we were led to believe was a safe and effective method of protecting teeth from decay is in fact a fraud. “*I am appalled at the prospect of using water as a vehicle for drugs. Fluoride is a corrosive poison that will produce serious effects on a long range basis. Any attempt to use water this way is deplorable.*” - Dr. Charles Gordon Heyd, former President of the AMA.

What if you found out that fluoride is a neurotoxic industrial waste? What if you found out that it damages the immune, digestive, and respiratory systems as well as the kidneys, liver, brain, and thyroid? What if you discovered that there is **no scientific** evidence that fluoride is a beneficial additive to water, and in fact that there is overwhelming scientific evidence that proves, without a doubt, that fluoride is **harmful**? What if you found out that all federal health agencies have known these facts for years, but have been controlled by the political interests of the nuclear arms, aluminum, and phosphate manufacturers to keep it a secret? Would you believe it?

The fluoridation of our public water is something that has been highly debated for decades, yet the practice continues today, despite strong evidence which indicates that fluoridation causes human suffering and disease. The history of water fluoridation goes back almost eighty years. In the 1920s, aluminum manufacturing, due largely to the flourishing canning industry, was booming. But it was also a big producer of toxic fluoride waste. The biggest dilemma was the cost to safely dispose of this hazardous waste, since it was extremely expensive. A company in Pittsburgh, ALCOA, had some revolutionary ideas on how to cut the costs of disposal.

At that time, the U.S. Public Health Service (PHS) was under the jurisdiction of Treasury Secretary Andrew W. Mellon, who just happened to be the founder and major stockholder of ALCOA. In 1931, a PHS dentist named H. Trendley Dean was dispatched to over three hundred small towns in Texas where water wells contained high concentrations of organic, natural fluoride. His mission was to determine how much fluoride people could tolerate without sustaining obvious damage to their teeth. **What he found was startling:** teeth in these high-fluoride towns were often discolored and eroded, but he also reported that they “*appeared to have fewer cavities*” than average.

So, he used a strategy called “selective use of data” to try to prove that fluoride at one part per million (1 PPM) reduced cavities. He chose to use the data from only twenty-one communities to “*back into his number.*” That’s what we call it in the accounting world when you know the desired answer and use only numbers which

will support your desired answer, and reach your predetermined conclusion. Dean totally disregarded the other 270+ localities that showed **no correlation** between fluoride and tooth decay. ALCOA-funded scientist Gerald J. Cox learned of Dean’s findings, and devised a way for ALCOA to actually profit from fluoride. He proposed that this “*apparently worthless by-product*” **might** reduce cavities in children (*despite no real evidence*). He declared that fluoride was good for your teeth, and in 1939, he proposed that the USA should fluoridate its water supplies. That’s right, not by a doctor, not by a dentist, but by a scientist who was working for the largest producer of fluoride in the entire USA.

Now ALCOA needed a “boost” to throw their “**fluoride football**” for a touchdown. The aluminum industry had already been marketing their toxic fluoride waste as an **insecticide** and **rat poison**, but they wanted a much larger market. But they had a minor roadblock: the *Journal of the American Dental Association*, in 1944, warned that “*the potentialities for harm (from fluoridation) far outweigh those for the good.*” In 1945, two Michigan cities were selected for an official “fifteen-year” comparison study to determine if fluoride could safely reduce cavities in children, and fluoride was pumped into the drinking water of Grand Rapids. In 1946, despite the fact that the official fifteen-year experiment in Michigan had barely begun, six more American cities were allowed to fluoridate their water. The two city Michigan experiment was abandoned before it was half over, with the results “*inconclusive.*” This is the only scientifically objective test of fluoridation’s safety and benefits that was ever performed.

But ALCOA wasn’t going to let the facts get in the way of their idea! In 1947, Oscar R. Ewing, a long-time ALCOA lawyer, was appointed head of the Federal Security Agency, a position that placed him in charge of the Public Health Service. Under Ewing, a national water fluoridation campaign began. The PR strategist for the water fluoridation campaign was none other than Sigmund Freud’s nephew Edwin L. Bernays, known as the “*Father of Spin.*” Bernays pioneered the application of his Freud’s theories to advertising and government “half truths.” In his book *Propaganda*, Bernays argued that **scientific manipulation of public opinion is they key**. He stated, “*A relatively small number of persons pull the*

wires which control the public mind.” The government’s fluoridation campaign was one of his most enduring successes.

How did he do it? His techniques were simple: **Pretend** there is some favorable research by using phrases like “Numerous studies have shown...” or “Research has proven...” or “Scientific investigators have found...” but then never really cite anything. **Say it long enough and loud enough, and eventually people will believe it.** If anyone doubts you, attack their character and/or their intellect. On a side note, a few years later, Bernays helped popularize the notion of women smoking cigarettes. Not being one to turn down a challenge, Bernays set up the advertising format which lasted for almost fifty years “proving” that cigarettes are beneficial to health.

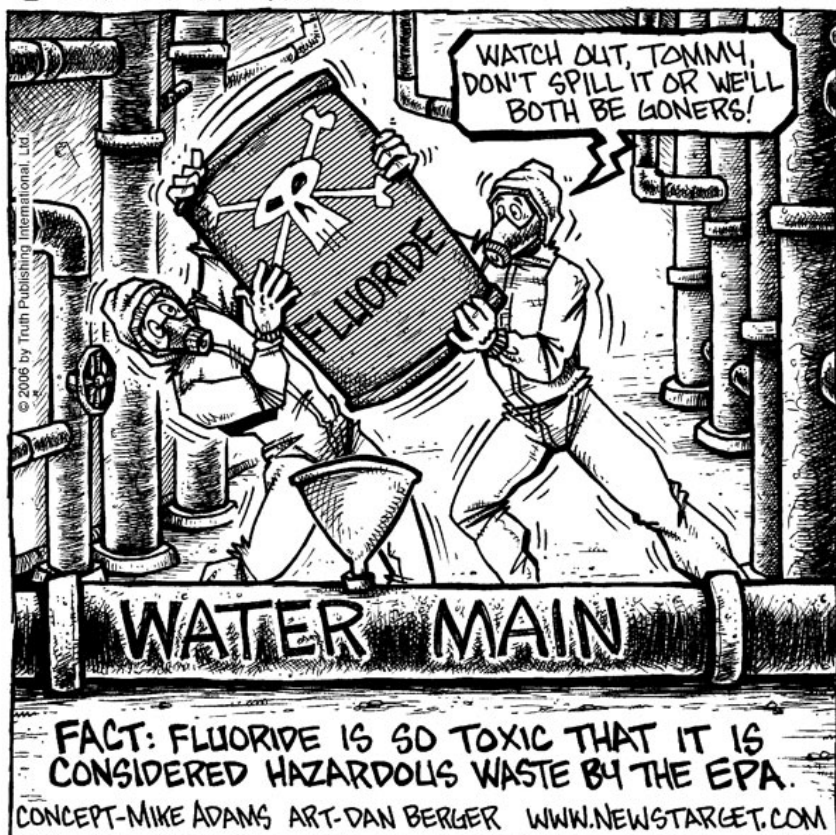
Bernays never strayed from his fundamental axiom to “control the masses without their knowing it.” He believed that the best PR takes place when the people are unaware that they are being manipulated. So, under Bernays’ spell, the popular image of fluoride (*which at the time was being sold as bug and rat poison*) became that of a beneficial provider of gleaming smiles, absolutely safe, and good for children. This was a brilliant marketing move by ALCOA! Rather than having to pay extremely high costs to safely dispose of this toxic waste, ALCOA (*and other aluminum manufacturers*) could now **sell it** to municipalities for a **huge profit!** Any opponents were quickly and permanently engraved on the public mind as crackpots, quacks, and lunatics. In 1950, the government officially endorsed fluoridation. Since then, two-thirds of the nation’s reservoirs have been fluoridated and almost 150,000 tons of toxic fluoride is pumped annually to keep them that way.

But, don’t studies show that a little fluoride is good for your teeth? Absolutely! But this is a classic example of a “**bait and switch.**” You see, the fluoride which is good for your teeth is **calcium** fluoride, which is found naturally in plants and water. However, the fluoride which was being added to the water supply and toothpaste was not calcium fluoride. It was either sodium fluoride, fluorosilicic acid, or silicofluorides, all three of which are **toxic wastes.** Today, the “toxin of choice” for most municipalities in the USA is fluorosilicic acid. Have you ever read the labels on your toothpaste? I suggest that you do so. The warning says to keep away from children. I wonder

why. Perhaps it is because if an entire tube of toothpaste were ingested by a small child, the dosage would likely be **fatal!**

Fluorosilicic acid is an EPA regulated toxic waste produced in the smokestacks of various industrial chemical producers. **Let me reiterate.** Fluorosilicic acid is a toxic waste byproduct that is produced in the United States by various chemical companies. It represents such a health hazard that it is regulated by the EPA, and must be disposed of as a toxic waste.

COUNTERTHINK



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

So, let me get this straight. It is illegal to take this fluorosilicic acid and bury it in the ground or dump it in rivers or streams in this country, but it is perfectly legal (even mandated) to sell it to

municipalities that drip it into the water supply so that people will drink it. Of course, what goes in must come out, so we eventually pass the fluoride (*at least some of it*) through our bodies and directly into the rivers and streams. Thus, it brings us to this bizarre reality of fluoridation: ***this environmentally hazardous, toxic substance is illegal to dump into rivers and streams, unless it passes through the bodies of human beings first***, in which case it's not only perfectly legal, but it's actually mandated by dentists. Pretty weird, huh? Of course, these are the same people who are still putting mercury in our mouths, so what do you expect?

Fluoride is more toxic than lead, and there are more than 500 peer-reviewed studies documenting adverse effects of fluoride ranging from cancer to brain damage. Yet municipalities throughout the United States actually purchase this product and then drip it into the public water supply. According to Dr. Charles G. Heyd (*past President of the AMA*), *"I am appalled at the prospect of using water as a vehicle for drugs. Fluoride is a corrosive poison that will produce serious effects on a long range basis. Any attempt to use water this way is deplorable."*

Not only does fluoride **not** protect our teeth, but it has also been shown to cause dental fluorosis, lowered IQ, and even **cancer**. Numerous studies have shown that fluoride causes genetic damage at concentrations as low as one part per million. Can you guess what the average level of fluoridation is in our water supply? That's right...one part per million.

The first occurrence of fluoridated drinking water was found in Germany's concentration camps. The Gestapo had little concern about fluoride's supposed effect on children's teeth. Their alleged reason for mass-medicating water with sodium fluoride was to **sterilize** humans and **force** the people in their concentration camps into calm submission. (Joseph Borkin, *The Crime and Punishment of I.G. Farben*). Charles Elliot Perkins, research scientist sent by the U.S. government to take charge of the I.G. Farben drug/chemical plants in Germany, confirmed this fact when he discovered that *"the real purpose behind water fluoridation is to reduce the resistance of the masses to domination, control and loss of liberty."* In his report to the

Lee Foundation for Nutritional Research in October of 1954, he said, *“repeated doses of infinitesimal amounts of fluoride will in time reduce an individual’s power to resist domination, by slowly poisoning and narcotizing a certain area of the brain, thus making him submissive to the will of those who wish to govern him.”*

One of the most harmful attributes of fluoride is that inhibits enzyme activity, paralyzes white blood cells, and causes collagen to break down. Enzymes, the immune system’s leukocytes, and collagen are all fundamental in fighting cancer. And all three are adversely affected by fluoride. Dr. John Yiamouyiannis, a biochemist and president of the Safe Water Foundation, was one of two researchers who first determined the fluoride-cancer link. Yiamouyiannis warns: *“fluoride is a poison! . . . it has been used as a pesticide for mice, rats and other small pests. A 10-pound infant could be killed by 1/100 of an ounce and a 100-pound adult could be killed by 1/10 of an ounce of fluoride. The Akron Regional Poison Center indicates that a 7-ounce tube of toothpaste contains 199 mg. of fluoride, more than enough to kill a 25-pound child.”*

In 1977, epidemiological studies by Dr. Dean Burk, former head of the National Cancer Institute’s cell chemistry section, and Yiamouyiannis showed that fluoridation is linked to about 10,000 cancer deaths yearly. According to Dr. Burk, *“Fluoride causes more human cancer, and causes it faster, than any other chemical.”* Fluoride, The Aging Factor, 1986.

Fluoride has also been linked to Alzheimer’s disease, since the aluminum binds with fluoride to form aluminum fluoride, which is able to pass the blood-brain barrier. In January 1987, experiments performed at the Medical Research Endocrinology Dept., Newcastle upon Tyne, England, and the Physics Dept of the University of Ruhana, Sri Lanka, showed that fluoridated water at 1 PPM (when used in cooking in aluminum cookware) concentrated the aluminum up to 600 PPM, whereas water without fluoride did not. (Science News 131:73).

Researchers examined the water in Antigo, Wisconsin which has been fluoridated for almost forty years. The water was examined by a certified Wisconsin laboratory, and showed that when it was used

in cooking in aluminum cookware, the aluminum was concentrated by **eight hundred thirty-three** times and the fluoride content was increased by one hundred percent. www.whale.to/a/alz.html

One of the other things I find so interesting about this debate on fluoride is that dentists and doctors will leap to defend this practice at every opportunity. Why? Is it because there's good scientific evidence that fluoridation is somehow beneficial to the public? **NO**. It's because they've been told to support it by Big Medicine (*specifically the AMA and ADA*). All of this is so bizarre that a reasonable person can only conclude these doctors and dentists are operating on auto-pilot. They are parroting whatever "talking points" that Big Medicine gives them.

And to top it off, they are typically extremely arrogant about the whole thing. They act like because they are dentists, they are qualified to talk about this one single nutritional deficiency and its effects on the entire human body. In fact, dentists have no qualifications to talk about the effects of fluoride on the human nervous system, the blood supply, chronic disease, behavioral disorders, or other physiological effects. Dentists are really only qualified to talk about what's happening with your teeth – not drugs or chemicals that you ingest and that have a systemic effect.

And doctors are not much better. They are not qualified to talk about nutrition. As I've already mentioned, at best they have a few hours of education on nutrition and are largely illiterate about the relationship between nutritional deficiencies and chronic disease. The bottom line is that you have a whole group of so-called "experts" that know **nothing** about the subject, but yet who grandstand and claim to be the authorities on it.

In the mid 1980s, the largest study ever conducted on fluoridation and tooth decay was performed, using data from 39,000 school children in eighty-four areas around the country. The results showed **no statistically significant difference in rates of tooth decay between fluoridated and non-fluoridated cities**. Surprised? I'm not. But that's not all. A 1989 study by the National Institute for Dental Research concluded that 12% of children living in areas artificially fluoridated (*between one and four parts per million*) developed dental fluorosis,

a permanent discoloration and brittling of the teeth. Yep, fluoride’s really great for your pearly whites!

What should you do to protect yourself from fluoride? First off, you should **never** use products that contain fluoride. That is, don’t use toothpaste or mouthwashes that contain fluoride. Also, don’t purchase bottled water that has added fluoride in it. I think that’s a ridiculous product to have on the shelves. And don’t drink from the public water supply.

I highly recommend Christopher Bryson’s book entitled [The Fluoride Deception](#). I also suggest you read this article called “50 Reasons to Oppose Fluoridation” at www.fluoridealert.org/50reasons.htm.

TRIVIA TIME:

QUESTION: What do Sweden, Norway, Germany, Ireland, Italy, Austria, Belgium, Finland, France, Denmark, and Holland have in common?

ANSWER: They have all banned fluoridation of their water supplies.



STEP OUTSIDE THE BOX

CHAPTER 16

VACCINATIONS

FRAUD:

VACCINATIONS ARE SAFE, EFFECTIVE, AND ARE BASED ON SOUND SCIENTIFIC STUDIES AND EVIDENCE, ARE RESPONSIBLE FOR THE DECREASE IN MANY INFECTIOUS DISEASES.

FACT:

VACCINATIONS ARE BASED ON FLAWED SCIENCE AND FRAUDULENT DATA. THEY CAUSE DISEASE, DISABILITY, AND EVEN DEATH. HYGIENE AND SANITATION, NOT VACCINATIONS, HAVE RESULTED IN THE DECREASE OF NEARLY EVERY INFECTIOUS DISEASE OVER THE PAST CENTURY.

Don't vaccinations **prevent** disease? Aren't they safe and effective? Health authorities credit vaccines for disease declines, and assure us of their safety and effectiveness. Yet these assumptions are directly contradicted by government statistics, published medical studies, FDA and CDC reports, and the opinions of credible research scientists from around the world. There are hundreds of published medical studies documenting vaccine failure and adverse effects, and dozens of books written by doctors, researchers, and independent investigators that reveal serious flaws in immunization theory and practice. Ironically, most pediatricians and parents are completely unaware of these findings.

I am well aware that vaccinations are considered “*sacred*” to most conventional doctors. As a matter of fact, questioning them is tantamount to blasphemy. I can assure you that I would not challenge the efficacy and safety of something as “*holy*” as vaccinations unless I were certain, beyond a shadow of a doubt, that I am accurate when I state that vaccinations are ***not safe*** and they are ***not effective*** in preventing the spread of disease.

Over the past century, as the cornerstone of public health policy, vaccinations have ***caused***, not prevented the spread of disease. If you are able to look at this subject with “*objective spectacles*,” you will easily be able to see that mass vaccinations are linked to global epidemics of neurological and behavioral problems as well as world-wide proliferation of autoimmune diseases. However, chances are that you will likely dismiss me as a “quack” or “idiot,” put your head back into the sand, and take your kiddos back to the doctor for more ***poison injections***.

Most of the people in the USA will do whatever they are told. We are encouraged ***not*** to think for ourselves. We are programmed to place blind faith in our physician and the Medical Establishment. We are taught ***not*** to ask questions. The sad fact is that most Americans simply believe in vaccinations, although it is likely that they have no idea what is in them. Decades of studies published in the world’s leading medical journals have documented serious adverse effects from vaccinations, including death. Dozens of books written by doctors and researchers have revealed serious flaws in immunization practice and theory. Yet, incredibly, most pediatricians and parents are unaware of these findings. Believe it or not, most pediatricians don’t even know what’s in the vaccinations they are administering. Don’t believe me? Just ask them...and be prepared to see a perplexed look on their face...right before they get mad at you for daring to ask questions or threaten you if you don’t submit to their policy of mandatory vaccinations!

For example, when our eldest daughter, Brianna, was about 18 months old, we took her to the doctor’s office for a checkup. The doctor told us that it was time for her vaccinations, among them the MMR vaccination. We had been doing a little research on

vaccinations and were a bit concerned that they may not be quite as safe as they are reported to be. So, we told the doctor that we were concerned and did not want Brianna to be vaccinated, thinking that he would honor our wishes. His response was staggering. “If you choose not to have her vaccinated, then she can no longer be a part of our practice here. You will have to go elsewhere. We are not buying into or promoting all that hype (on autism). Vaccinations do not cause autism. Eating kids’ fish sticks is more of a risk at causing autism than these vaccinations.” **What arrogance!** Well, we should have walked out of his office immediately, but like thousands of other parents, we caved to the pressure and allowed that doctor to inject our little girl with poison.

I have heard vaccinations described as “**toxic cocktails**” of the most toxic substances on earth. They are combined with live and dead animal viruses that have been cultured in monkey kidney tissue, cow tissue, goat tissue, pig tissue, and even aborted human fetuses. They contain any combination of the following: thimerosal (ethyl mercury), aluminum, formaldehyde (carcinogenic embalming fluid), phenol, ethylene glycol (antifreeze), live viruses, bacteria, and acetone, among other things.

According to Professor Boyd Haley, University of Kentucky professor, “You couldn’t even construct a study that shows thimerosal is safe. It’s just too darn toxic. If you inject thimerosal into an animal, its brain will sicken. If you apply it to living tissue, the cells die. If you put it in a petri dish, the culture dies. Knowing these things, it would be shocking if one could inject it into an infant without causing damage.” www.rollingstone.com/politics/story/7395411/deadly_immunity

What if I were to take some mercury, formaldehyde, aluminum, antifreeze, and live viruses cultured in dead animal tissue, then mix them together with some peanut butter and spread it on a piece of bread for my kiddos to eat for a snack? Would you think I was a good parent? What if I were to state, “This will keep them from getting sick”? Would you question my sanity? The odds are that I would likely be arrested for **child abuse**. However, when doctors inject our kiddos with the same ingredients (less the peanut butter) and tell us “This will keep them from getting sick,” most of us don’t even give it a second thought.

What if you call your physician and tell him that you are going to inject your baby with mercury, aluminum, and formaldehyde, and that you are wondering what the “safe dosage” was for these ingredients? Well, right after he calls Child Protective Services, he will probably call the police! You see, **there is no safe dosage** because these are all potentially carcinogenic substances. But mercury derivatives, aluminum, and formaldehyde are ingredients in most vaccinations. How is it possible that they are safe? The answer depends upon who is injecting them. If you or I inject our child with mercury or formaldehyde, we are going to jail. But if a drug company and a doctor inject the same toxic poisons, then they are perfectly safe. What’s wrong with this picture? Unfortunately, most Americans follow the masses, believe what we’re told, don’t ask questions, and place blind faith in our doctors. But where do doctors get their medical training? That’s right... in medical school.

Medical schools, which are largely subsidized by Big Pharma, brainwash students into believing that vaccinations are safe and prevent the spread of infectious diseases. Not surprisingly, there is a huge financial incentive for Big Pharma to “peddle” vaccinations, as they make a fortune on the sale of these toxic cocktails. Once these medical students graduate and become physicians, they are offered large commissions to sell more vaccinations to patients and continue their blind faith in the necessity of these poisons. Then, most people acquiesce to the poisoning of their kiddos because they simply cannot believe...they **refuse** to believe...that their “omniscient” physician could possibly be wrong. The **no way** factor takes over. So, what we have is blind faith in doctors, who have blind faith in what they learned in medical school, which are governed by the AMA, which is “in bed” with Big Pharma, which is interested in shareholder profits, **not** in the safety of our children.

England’s Edward Jenner, born in 1749, is credited with being the “Father of Vaccines.” He believed the superstition among the dairymaids that a person who had suffered cowpox could not contract smallpox. In 1786, for his initial “human guinea pig” test, Jenner scraped pus from the lesions from a dairymaid and injected this pus into James Phipps, an eight year old boy. A short time afterwards, he inoculated the boy with small-pox, and the small-pox did not take. Jenner believed that he had found the cure to

smallpox. Over the next twelve years, Phipps was inoculated over a dozen times and eventually died of tuberculosis at the age of twenty. Jenner's own son also served as one of his guinea pigs and also died of tuberculosis at the age of twenty-one. Since that time, researchers have linked tuberculosis to the smallpox vaccine. (Eleanor McBean, The Poisoned Needle).

Over the next few years, Jenner gathered the “proof” that his smallpox vaccine worked, and then he presented it to Parliament. He was sure to report only the data which supported his theory, and to never mention the multitudes of people who would disprove his theory (i.e. *those people who contracted cowpox and then contracted smallpox afterwards*). He was careful to mention only the cases of a dozen old men who had cowpox and did not contract smallpox afterwards, while conveniently omitting the hundreds of cases who had had both. Eventually, after years of manipulating data and “tweaking” his smallpox vaccination formula, he “sold” his theory of vaccinations to the intellectual elite and governmental officials alike.

Despite Jenner's efforts, widespread vaccination did not really catch on. As of 1807, only 1.5% of the Brits had been vaccinated. Up until 1823, the year that Jenner died, there were only regional outbreaks of smallpox in England, nothing that would be considered an epidemic. For the next thirty years, smallpox was under control. However, vaccinations became mandatory in England in 1853, and by 1857, fines and imprisonment awaited people who refused to be vaccinated against smallpox.

Once smallpox vaccination became mandatory in England, massive epidemics began to occur. Between 1857 and 1859, there were over 14,000 deaths from smallpox. Then, between 1863 and 1865, there were over 20,000 smallpox deaths. A few years later, there were almost 45,000 smallpox deaths between 1870 and 1872. According to official estimates, **97% of the population had been vaccinated** (Anne Riley Hale, The Medical VooDoo). Japan introduced compulsory vaccinations in 1872. In 1892 there were 165,774 cases of smallpox with 29,979 deaths despite the vaccination program. **Bottom line:** the smallpox vaccine does **not** work.

What about polio? Didn't the polio vaccine save millions? The population of New York in 1950 was fifteen million, and at that time, there were thirteen polio cases and one polio death per 100,000 population. Hardly an epidemic! But based solely on the scant evidence of a polio "epidemic," Dr. Jonas Salk convinced the federal government to inoculate 97% of the American population with a culture grown in dead green monkeys. As the Salk vaccine program expanded, cases of paralytic polio began to increase. In 1959, more than 5,000 paralytic polio cases occurred-50% more than in 1958, and 100% more than in 1957. This trend developed in spite of 300,000,000 doses of Salk vaccine administered in the U.S. by the end of 1959.

Six New England states reported increases in polio one year after the Salk vaccine was introduced, ranging from Vermont's 100% increase to Massachusetts' astounding increase of 642%. **During 1962, U.S. Congressional hearings, Dr. Bernard Greenberg, head of the Department of Biostatistics for the University of North Carolina School of Public Health, testified that not only did the cases of polio increase substantially after mandatory vaccinations, but that the statistics were manipulated by the Public Health Service to give the opposite impression.** [*Hearings before the Committee on Interstate and Foreign Commerce, House of Representatives, 87th Congress, Second Session on H.R. 10541, May 1962, p.94*].

Almost 20 years after the first polio inoculations, in 1977, Salk testified before a Senate subcommittee that ***all polio outbreaks since 1961 were caused by the oral polio vaccine.*** In 1985, the CDC reported that 87% of the cases of polio in the U.S. between 1973 and 1983 were caused by the vaccine and most of the reported cases occurred in fully immunized individuals. **Alarminglly, the CDC has admitted that the polio vaccine is the only known cause of polio in the U.S. today.**

Remember I mentioned that the polio vaccine was initially cultured in dead green monkeys and was contaminated with SV-40 (from 1959 to 1965)? It turns out that SV-40 can be passed horizontally (i.e. *between father and mother*) and vertically (i.e. *between mother and child*). In fact, SV-40 is often associated with medulloblastoma, the most prevalent pediatric brain tumor. When scientists injected

young hamsters with SV-40, over 80% developed brain cancers. Traces of this virus are commonly found in brain cancers among the millions of people who received polio vaccines contaminated with SV-40. In 1979, Doctors J. Farwell, G. Dohrmann, L. Marrett, and J. W. Meigs wrote a paper entitled: “*Effect of SV40 Virus-Contaminated Polio Vaccine on the Incidence and Type of CNS Neoplasms in Children: A Population-Based Study*,” in which they found a substantial increase in childhood brain tumors, especially medulloblastoma, when the mothers had been inoculated with vaccines containing SV-40.

Vaccinations and Autism. Congressman Dan Burton of Indiana began holding hearings on the relationship between childhood vaccines and autism in the fall of 2001. His grandson became autistic after receiving forty-nine times the amount of mercury considered safe by the EPA during a visit to his pediatrician who gave him nine vaccines at once. During these hearings, parent after parent told very similar stories. They told of how their normally developing babies had suddenly reversed their development soon after the **MMR** vaccination or the **DPT** vaccination. The children spiraled downward into the “vegetable-like” existence of autistic behavior, in which previously happy, bright children suddenly can no longer learn or communicate, or recognize their parents.

Astonishing testimony was given by experts in the field of autism. For instance, Dr. Michael Goldberg, M.D., explained how it was **impossible** to have an epidemic based solely on genetics. That’s the standard excuse the CDC and the NIH have been using to explain how autism has literally exploded in just over 2 decades. Dr. Mary Megson, M.D., explained how autism has gone from being an unknown in 1978 (with an incidence of one in 10,000) to an epidemic in 2000 (with an incidence of one in 166). Her research has shown total deficiency of vitamin A in almost all autistic children.

Can you guess what depletes the body of vitamin A? You got it...the **MMR** vaccination. Amazingly, Big Medicine still insists that there is no connection between toxic mercury preservatives in mandated childhood vaccinations and the astounding increase in autism, despite ample scientific evidence to the contrary.

Dr. John O’Leary, PhD, a world class researcher and molecular biologist from Ireland, using state of the art sequencing technology, showed how he had found measles virus in the gut of **96%** of autistic children, compared to **6.6%** of normal children. Interestingly, this virus did not come from the natural disease; it came from the measles vaccine. Finally, Dr. V. Singh, M.D., an autism specialist from Utah, found that in over 400 cases of autism, the children had experienced an autoimmune episode, in which their own body has been made to attack the lining of the nervous system. He stated that **55%** of the families said that autism appeared soon after the **MMR** vaccination and that **33%** of families said it appeared soon after the **DPT** vaccination. Such neurologic damage is a well-established side effect of the mercury, aluminum, and formaldehyde used in these vaccines.

Interestingly, on November 26, 2005, the President George W. Bush administration asked a federal claims court to seal documents relating to hundreds of cases of autism allegedly caused by thimerosal, one of the toxic ingredients used in many childhood vaccines. The government’s legal action comes on the heels of an insertion into the Homeland Security bill that protects Eli Lilly, the drug company giant that developed thimerosal, from lawsuits involving the additive. **The bill removes all liability from the pharmaceutical industry and health officials for the injuries and death resulting from the preservative. This is sickening!** Yet another instance of Big Pharma and governmental corruption.

More on Vaccinations. Dr. Archie Kalokerinos was a physician who began routinely vaccinating aboriginal children in Australia during the late 1960s. Shortly after he began vaccinations, he noticed that extremely high numbers of these children became very ill or died. He also noticed that children who were sick at the time of vaccination were more likely to experience adverse reactions. In his book Every Second Child, Dr. Kalokerinos also noted that children experiencing adverse reactions would recover after receiving large doses of vitamin C and the numbers of children who suffered adverse reactions declined dramatically when only healthy children who had taken large doses of vitamin C received vaccinations.

“One would have expected, of course, that the authorities would take an interest in these observations that resulted in a dramatic drop in the death rate of infants in the area under my control. But instead of taking an interest, their reaction was one of extreme hostility. This forced me to look into the question of vaccination further and the further I looked the more shocked I became. **I found that the whole vaccine business was a hoax.** Most doctors are convinced that they are useful, but if you look at the proper statistics and study the instance of these diseases you will realize that this is not so.” - Interview of Dr. Archie Kalokerinos in the *International Vaccination Newsletter*, June 1995.

One study found that 3,000 children die within four days of vaccination each year in America. Another researcher’s studies concluded that half of American SIDS cases (*between 2,500 and 5,000 infant deaths annually*) are **caused by vaccinations.** (Viera Scheibner, Ph.D., *Vaccination: 100 Years of Orthodox Research Shows that Vaccines Represent a Medical Assault on the Immune System*). **It is amazing how much medical literature that exists which documents the failure of vaccinations.** In 1989, the Center for Disease Control (CDC) reported, “Among school-aged children, [measles] outbreaks have occurred in schools with vaccination levels of greater than 98 percent. [*Morbidity and Mortality Weekly Report (MMWR)*, 38 (8-9), 12/29/89] The CDC even reported a measles outbreak in a documented **100% vaccinated population.** [*MMWR*, 33(24), 6/22/84].

Vaccinations and Chemotherapy. The parallels between childhood vaccines and chemotherapy are astonishing but not surprising given that it’s the same industry and the same manufacturers who are responsible for both.

- Both vaccines and chemotherapy are shown to be “effective” by scientists whom the manufacturer is paying.
- Both have resulted in injury and death.
- Both are extremely profitable.
- Both are considered sacred and won’t be seriously challenged.
- Both represent a paradigm that the body can only be healed or made whole by the use of dangerous extrinsic chemicals.

I know we are all brought up to blindly trust our doctors. But the fact is that they no longer deserve that kind of blind trust. Physicians take an oath to **“First, do no harm,”** but today, what gets injected into your child is being decided not by physicians but by Big Pharma which has a financial incentive to inject as many vaccinations as possible. Only by keeping people in the dark can Big Pharma continue its absurd profiteering from the vaccination industry. We assume that because vaccinations are mandated by U.S. law that the government is verifying to their safety and effectiveness. **Nothing could be further from the truth.**

Every day, millions of children are lined up and injected with toxic, putrid substances called vaccinations. Before they begin first grade, children can get as many as thirty-six vaccinations! There are about two hundred more vaccinations in the pipeline. Scenarios for the future even include consuming vaccines in nose sprays, ointments and fruits and vegetables. This *“Vaccination Obsession”* has gone beyond what anyone can possibly defend on scientific grounds. Pumping more vaccinations into our precious children borders on the criminal.

With every child on the planet a potential *“required recipient”* of multiple vaccinations, and with every healthcare system and government a potential buyer, it is little wonder that billions of dollars are spent nurturing the vaccination industry. Without public outcry, we will see more and more new vaccines required of us and our children. **And while profits are readily calculable, the real human costs are being ignored.** According to Dr. James R. Shannon, former director of the National Institute of Health reported in December, 2003 that *“the only safe vaccine is one that is never used.”*

Remember, vaccinations are mandated but they are **not** mandatory! Besides certain laws that apply only to government medical specialists, **THERE IS NO LAW** that enforces the mandatory use of any vaccine in the USA. Waiver forms for personal or religious exemptions are freely available. Enforced medical treatment is an assault and a violation of the 14th amendment.

However, some lawmakers seem determined to ignore the Constitution and to make some vaccinations (*usually the most*

profitable ones) mandatory. Take, for instance, 2008 New York Assembly Bill 10942, introduced at the request of Richard Daines, the Commissioner of the New York State Department of Health. This pending bill calls for changes to the law in order to change all “recommended” vaccinations by the CDC to “mandatory” vaccinations for all children, **including infants and toddlers!** The bill would also permit the administration of vaccines for sexually transmitted infections to minors **without parental consent.** This bill has been dubbed the “*worst vaccine bill ever*” by one activist group. Only time will tell if our Constitutional liberties are tossed aside and our children are subjected to mandatory government sanctioned poisoning.

Interestingly, in March of 2008, **the U.S. government conceded that childhood vaccines were responsible for the autism** in nine-year-old Hannah Poling. This unprecedented concession was in response to one of three test cases that allege thimerosal caused autism in children. There are currently forty-nine hundred autism cases pending in Federal “Vaccine Court.”

In the December 1994 Medical Post, Canadian author of the best-seller Medical Mafia, Dr. Guylaine Lanctot, M.D. stated, “**The medical authorities keep lying. Vaccination has been a disaster on the immune system. It actually causes a lot of illnesses. We are actually changing our genetic code through vaccination...10 years from now we will know that the biggest crime against humanity was vaccines.**”

EMAIL EXCHANGE WITH A PEDIATRICIAN

After I initially published the first edition of this book in August 2006, I had an interesting email discussion with a pediatrician regarding vaccinations, specifically the DPT. He accused me of being “irresponsible” for claiming that vaccinations are poison to our children. Below is the entire email thread...

PEDIATRICIAN: *On an emotional level, I just have to add that it only takes seeing one unimmunized child die of pertussis (whooping cough) to make one question those who decry immunizations and claim we are “poisoning our children with vaccinations.”*

MY RESPONSE: Over 11,000 annual cases of adverse reactions to vaccinations are reported to the VAERS (Vaccine Adverse Effects Reporting System), a branch of the FDA, of which 1% result in death. (National Technical Information Service - Springfield, VA - 703.487.4650). The lion's share (over 100 per year) of deaths are attributed to reactions to the pertussis vaccine (the "P" in DPT).

It is unknown exactly how many deaths have occurred from the pertussis vaccine, because doctors underreport all vaccine adverse events. In New York state, for example, the National Vaccine Information Center (NVIC) recently found that only one out of 40 doctor's offices (2.5%) confirmed that they report a death or injury following vaccination. (National Vaccine Information Center (NVIC), 512 Maple Ave. W. #206, Vienna, VA 22180, 703-938-0342; "Investigative Report on the Vaccine Adverse Event Reporting System.")

The truth is that the number of vaccine-related deaths dwarfs the number of deaths caused by the disease, which have averaged around **10** annually for the past 2 decades, according to the CDC. As the FDA estimates that only approximately 10% of adverse reactions are reported, we can estimate that the chances of dying from the pertussis vaccine are **100 times greater** than the chances of dying from pertussis itself.

Simply put, **the vaccine is 100 times more deadly than the disease.** Given the many instances in which highly vaccinated populations have contracted pertussis and the fact that the disease was on the decline well before mandatory vaccinations (pertussis deaths declined 79% **prior to** vaccines), the enormous number of vaccine casualties can hardly be considered a necessary sacrifice for the benefit of a disease-free society.

In the U.S. in 1986, 90% of 1300 pertussis cases in Kansas were "adequately vaccinated." (Neil Miller, *Vaccines: Are They Safe and Effective?* p 33.) In 1993, 72% of pertussis cases in the Chicago outbreak were fully up to date with their vaccinations. (Chicago Dept. of Health).

Sadly, the vaccine-related-deaths story doesn't end here. Both national and international studies have shown vaccination to be a cause of SIDS (Viera Scheibner, Ph.D., "Vaccination: 100 Years of Orthodox Research Shows that Vaccines Represent a Medical Assault on the Immune System" and W.C. Torch, "Diphtheria-pertussis-tetanus (DPT) immunization: A potential cause of the sudden infant death syndrome (SIDS)," (Amer. Academy of Neurology, 34th Annual Meeting, Apr 25 - May 1, 1982), *Neurology* 32(4), pt. 2). The Torch study found the peak incidence of SIDS occurred at the ages of 2 and 4 months in the United States, precisely when the first two routine immunizations are given. It also found that 3,000 children die within 4 days of vaccination each year, and concluded that half of SIDS cases (approximately 2,500 to 5,000 infant deaths in the United States per year) are caused by vaccines.

Interestingly, on November 26, 2005, the Bush administration asked a federal claims court to seal documents relating to hundreds of cases of autism allegedly caused by thimerosal, one of the toxic ingredients used in many childhood vaccines. The government's legal action comes on the heels of an insertion into the Homeland Security bill that protects Eli Lilly, the drug company giant that developed thimerosal, from lawsuits involving the additive. **The bill removes all liability from the pharmaceutical industry and health officials for the injuries and death resulting from the preservative.** This is sickening! Yet another instance of Big Pharma and governmental corruption.

PEDIATRICIAN: *You point out that there are only 10 deaths from pertussis each year. I wonder why that is. In 1934 there were around 8000 deaths attributed to pertussis in the US. The pertussis vaccine was developed around that time and became used wide-spread about 20 years later. So the 10 deaths each year from pertussis is actually a vaccine success story.*

MY RESPONSE: It is common knowledge that whooping cough, like measles, scarlet fever and diphtheria, is a very much less severe disease than in times past, and it is the generally accepted idea in the medical community that vaccination has been mainly responsible for this. **In fact nothing could be further from the truth.** Scarlet fever declined dramatically in both morbidity and mortality

without vaccination and for the most part prior to the advent of antibiotics. Measles declined in a similar fashion prior to the introduction of vaccination and, since it is a “viral disease,” it is not affected by antibiotics. Diphtheria also declined prior to the advent of immunization. As I mentioned in an earlier email, whooping cough also had declined by 79% **BEFORE** immunizations.

The evidence indicates that the decline in severity in these diseases was due to improved sanitation, better nutrition, better housing, and improved hygiene rather than to any specific immunizations. The truth be told, England actually saw a drop in pertussis deaths when vaccination rates dropped from 80% to 30% in the mid 1970s. Swedish epidemiologist B. Trollfors’ study of pertussis vaccine efficacy and toxicity around the world found that “..pertussis-associated mortality is currently very low in industrialized countries and no difference can be discerned when countries with high, low and zero immunization rates were compared.” He also found that England, Wales, and West Germany had more pertussis fatalities in 1970 when the immunization rate was high, than during the last half of 1980 when rates had fallen. I know you don’t like statistics from 20 or 30 years ago, but facts do **not** change. The truth does **not** change. The laws of physics do **not** change.

PEDIATRICIAN: *Just for full disclosure, you might want to point out that the National Vaccine Information Center, the group that put out the paper you quote, is an anti-vaccination organization. They’ve got a nice link to “lawyer referral” on their website.*

MY RESPONSE: What difference does that make? Should I ask you to point out that the groups that you cite are pro-vaccination groups? C’mon, what’s good for the goose is good for the gander. Let’s just be realistic and admit that much of the literature which I cite is from groups that oppose vaccinations, while much of the studies which you will cite are from pro-vaccination groups. The trick is to find out who (if anyone) is manipulating the data, and why....**\$\$\$...**

PEDIATRICIAN: *Why are the papers you’re quoting from the early 80s? I’ve not read them, but that’s an eternity in medical literature.*

Surely you have some newer data (last 5 years) to support these claims. Right?

MY RESPONSE: As I mentioned earlier, the truth does **not** change. Have the laws of physics changed over the past 2 decades? If so, I wasn't aware of it. And the papers I quoted were just examples of pertussis epidemics that broke out in vaccinated populations, thus demonstrating that the DPT is not near as effective as Big Medicine would have us to believe. The dates are what they are...

If I wanted to demonstrate that the Nazi party committed genocide, then I would refer you to the German death camps of the 1940s. I doubt that you would ask for **newer data**, rejecting the fact that millions of Jews were murdered by Nazis, since, after all, it did happen over 60 years ago...an “eternity in medical literature”...

But since you asked...the *New England Journal of Medicine* documents that the pertussis epidemic in Cincinnati (1993) was in a fully vaccinated population. The authors assert that that the proportion of cases in fully vaccinated children provides evidence of “the failure of the whole-cell pertussis vaccine.” (NEJM, Volume 331:1455-1456, 11/24/94, No. 21) The CDC's own website indicates that a sudden increase in cases reflecting a pertussis outbreak in the Netherlands in 1996 **could not be explained by a decrease in vaccination coverage**, which remained stable at 96% for at least three vaccinations in the first year of life.

www.cdc.gov/ncidod/eid/vol6no4/demelker.htm

I could list many more studies conducted within the last decade, but you get my point... Right?

PEDIATRICIAN: *The autism question: The Cochrane database did a systematic review (very statistically-powerful paper that combines the results of many studies over a long period of time) this year looking at MMR and autism. They reviewed one hundred thirty-nine studies and found no link.*

MY RESPONSE: The Cochrane Study is oftentimes cited in an effort to support vaccinations (*specifically the MMR*), show that there is no link to autism, demonstrate that the anti-vaccination

wackos' fears are unfounded, and give the MMR the "all's clear ahead." But this is a load of balogna. Most of these people should start by reading the **actual study** rather than regurgitating the press release. **The study didn't say anything like this at all.** The press release said: "*There was no credible evidence behind claims of harm from the MMR vaccination.*" **But the study did not say that.** What the study **did say** (but was not mentioned in the press release) was: "*The design and reporting of safety outcomes in MMR vaccine studies ... are **largely inadequate.***" The study also stated: "*We found only **limited evidence** of the safety of MMR compared to its single component vaccines.*"

In other words, far from saying MMR was safe, the study said **explicitly** that the evidence for its safety was **not good enough.** Now, I'm not saying that the study didn't say that the evidence it looked at did not support any association between MMR and autism. It did say that. But that does not equate to stating that the MMR is safe. It means that the study did not find anything to suggest that it was not safe. Kind of like in a trial when you find a person "**not guilty**"... rather than "**innocent.**"

What was the reason that they said the evidence didn't support a link between the MMR and autism? Well, you know that epidemiological studies are intrinsically **un**likely to reveal the truth about the effects of MMR. Here's why: **they rely on medical records.** But the fact is that most doctors quickly dismiss parents' concerns about autism (*I know first hand about this*), thus they never enter anything out of the ordinary on their medical records.

And the authors of the Cochrane Study were far from "independent." Did you know that Dr. Tom Jefferson, MD, one of the Cochrane study's authors, acknowledged that in 1999, he acted as a consultant for a legal team advising the MMR vaccine manufacturers? Can anyone say "**Conflict of Interest**"? And this is not the only instance of the "incest factor." A number of epidemiological studies which the FDA has used to state that MMR is safe have been written by researchers with links to Big Pharma companies.

Remarkably, the Cochran Study concluded that the safety studies into MMR were so poor that “*the safety record of MMR is probably best attested by almost universal use.*” In other words, because the vaccine is so widely used, it must be safe. **Talk about circular reasoning!!** This is a dangerous and extremely **unscientific** assumption.

PEDIATRICIAN: *The most damning piece of evidence for the autism-MMR question is the fact that the vaccine companies completely removed the traces of mercury from the vaccine in 1999, yet the rates of autism continue to rise. Why autism is increasing is an interesting question, but the answer is not in vaccines.*

MY RESPONSE: **This is not true.** In 2004, after much public controversy surrounding the mercury content of childhood vaccinations, Health Advocacy in the Public Interest (HAPI) tested 4 vaccines for heavy metal content. The vials were sent to Doctor’s Data, an independent lab which specializes in heavy metal testing.

Many manufacturers voluntarily began producing supposed “mercury free” vaccines in 1999. Some product inserts currently claim that a “trace” amount of mercury still exists in the final product but that the amount has been greatly reduced. Others claim to be producing completely mercury free products.

During an investigation into the mercury issue, HAPI learned that Thimerosal, a 50% mercury compound, is **still being used to produce most vaccines** and that the manufacturers are simply “filtering it out” of the final product. However, according to Boyd Haley, PhD, Chemistry Department Chair, University of Kentucky, mercury binds to the antigenic protein in the vaccine and **cannot be completely, 100% filtered out.**

All 4 vaccine vials tested contained mercury despite manufacturer claims that two of the vials were completely mercury free. All four vials also contained aluminum (one had 9 times more than the other 3), which tremendously enhances the toxicity of mercury causing neuronal death in the brain. www.whale.to/a/mercury7.html

CHRISTIAN'S STORY

The following is the story of a dedicated, loving mother who was not willing to accept the fact that her precious two year old son, Christian, was diagnosed with autism. She noticed an immediate change in Christian immediately after he received his six-month and nine-month vaccinations. This is his story, as told by his mother.



-- When my son was six months old, we went in (to the doctor's office) happy and well, and left the office with him screaming so much that after an hour of screaming he fell into a deep sleep for over four hours. I tried to wake him to eat, but all he wanted to do was sleep and he started to develop a fever that was as high as 104 degrees. That night, we kept calling the doctor/hospital and they kept telling us

this was normal and just to give him some Tylenol. I kept trying to cool down his body with room temperature water; it worked on and off but it was a very scary night. The next day, I took the baby into the doctor's office and they said "we can't do anything about the fever, just give him Tylenol." The next day, the same thing happened, and that day I changed doctors. On the fourth day, I went to a new doctor who told me it was a viral infection and it had nothing to do with his vaccines. He was nice and caring with a good bedside manner, so I believed him and went back for Christian's nine month vaccines. Again, he got sick but it was not as bad as his six months shots. This time he got a fever up to 102 degrees, and was sleepy and out of it for about twenty-four hours, but seemed OK soon afterwards.

Children change from day to day when they are so young. Christian started to talk and walk at twelve months old, but by fifteen months, he had lost the ability to speak and could only say "mama." Before our very eyes, we started to lose him; he would not respond to his name, lost all eye contact, and started crying almost all the time. He would not sleep more than two hours at a time, was always angry and violent, no longer wanted to play with his toys or with others, and just wanted to be alone and watch TV all day. Close to his 2nd birthday, at twenty months old, we took him in to find out what was going on. At first, they told us he had food allergies and we should try a Gluten Free / Casein Free (GF/CF) Diet. Well, we did, but the progress was slow and by his 2nd birthday, we were told he had PDD/Autism.

That's how it all started. Looking back now, the writing was on the wall, but I just did not know what to look for. To make things worse, the people I trusted and turned to for help lied to my face over and over again. I will never be that foolish again. For a mother that knew nothing about autism, my life became all about autism. I would care for my child during the day and spend nights researching available treatments for my son. For the next two years, we saw five "specialists", over ten therapists, and made a lot of diet changes which included lots of supplements. We were on a GF/CF Diet, then on the SCD Diet, and then on a restrictive-rotating diet. During this time, we saw some improvements, but it was not much. It was expensive, exhausting, overwhelming and difficult all at the same time. For other parents, doing this is enough to see big gains. Even with all this, my son was now four years old, still non-verbal... only speaking thirty

words, very little eye contact, would not respond to his name, was in a world of his own, and have at least three major temper tantrums a day. We needed to go in deeper and fine tune what we were doing.

The turning point for me was when I started to take charge and put all the pieces together. I decided to fight back and take control of my son's health. Up until now I was just taking orders and following what "specialist" would tell me. I decided to start from the basics and work toward healing him completely. I was fortunate enough to find a doctor that was able to run the proper lab test and discovered the core of his health problems not just the symptoms. He found that my son was toxic, under-nourished, and had a weakened immune and metabolic system. We focused on all four issues for the next twelve months and slowly started to see improvements.

With a whole-body approach to healing, his body naturally reactivated the body's magnificent ability to heal itself. I found a diet that his body responded to, which included fresh juices daily. We removed the toxins through chelation. And by restoring his metabolic and immune system, his body was able to heal. Today, my son is fully recovered. At six years old, he is in a mainstream first grade classroom and involved in baseball, swimming, and tennis. Today, he is indistinguishable from his peers. People are often surprised to hear of him ever having an autism spectrum disorder.

This experience has taught me the importance of what you do and in what order you do them. Had I known the order sooner, I would have saved time, money, and frustration, while seeing results sooner.

This is simply an outline that worked for us. Please consult with a doctor before making any changes to your child's care. This protocol is designed to be followed in order at 100% effort with no exceptions. Follow this protocol in this order and you will see improvement within a short period of time... this will help motivate you to stick with it! It took me 2 years to heal my son once I started this protocol, but he was starting at a better place. Meaning he was already making slow progress and we were already doing parts of it so the transition was easier.

Here is the protocol:

10 step Protocol to Healing Autism Naturally

1. **Mentally Preparing...** get organized, make lists of what you need, set a timeline to start and implement changes (if it's too much to do all at once, then do one new change per week).
2. **Clean out...** Kitchen, food, environment, appliances, products, lifestyle-old habits.
3. **Clean in...** Water, Kitchen, food, environment, appliances, products, lifestyle, creating new habits
4. **Diet...** no fluoride in drinking water-filter water only, eat 80% alkaline, 20% acidic food, eat superfoods daily, organic food only, nothing in a box, fresh/frozen only, follow the Feingold Program, lots of potassium foods, no salt/sodium, no red meat, avoid fat, eat more RAW fruits and vegetables, avoid allergic foods such as wheat, dairy, soy, corn, peanuts, avoid sugar... learn to eat fruits for desert.
5. **The “do’s” and “don’ts” about autism...** (refer to good books & websites for the basic checklist), find a DAN doctor, run lab tests, and use supplements free of allergies.
6. **Juice and Smoothie...** (the more the better) Tp:: Juice what they won't eat, 1-2 Green juices are nutrient rich with little time needed for digestion, 1-2 per day, Carrot-Apple juices are full of vitamins,
1, 10 oz. smoothie daily, made with fresh greens, superfoods. and organic fruits
7. **Lifestyle changes...** Green living, organic is best, don't dine out, play & talk to child daily, use sports as therapy (hand-eye coordination, interaction, following directions), kids learn best when having fun and laughing, make a game of everything and let them be silly kids
8. **Chelation...** (should be done under the care of a Doctor), lab tests will show the results...if toxic, a chelator is used to move toxins out of body such as DMSA, Sauna, Food and Juices
9. **Therapies ...** quantity and quality matter, (sit in during therapy and repeat at home), ABA, OT, Speech, Floor time, Sensory
10. **Living Fearlessly...** Taking Control of your life and your families. Incorporate these changes into your lives and stick to them. Don't go back to your old habits once your child is healed. He is

still rebuilding his body and is not fully healed. Be cautious of toxins and chemicals.

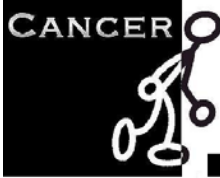
Educated health consumers, including informed parents, are taking matters into their own hands. They are choosing healthy lifestyles and wise health care alternatives that do not rely on constant pharmaceutical product use, including an alternative vaccine schedule.

You may feel you are already doing this, but look closely. Are you consistent? Are you making any exceptions? For example, taking your child for speech every week and eating packaged foods or fast food will not produce the same results as a child on an organic, home made diet free of allergic foods, eating superfoods and drinking healthy fresh juices daily while taking speech. The results are significantly different.

My favorite quote is by Hippocrates, “Let food be thy medicine, and let thy medicine be food.”

As for me, I was desperate and determined to heal my son. Keep working and don't lose your focus on your long term goal which is... healing your child. If you need a motivator, start saving for college! It may take you more than 2 years but it will happen if you're completely dedicated and consistent. Remember, every step forward is a step closer to your goal of healing your child.

- Eleni Prokopoulos www.GreenDivaMom.com



STEP OUTSIDE THE BOX

CHAPTER 17

MERCURY & ALZHEIMER'S

FRAUD:

AMALGAM DENTAL FILLINGS HAVE BEEN SHOWN TO BE 100% SAFE. THERE IS NO RELATIONSHIP BETWEEN FILLINGS, MERCURY, AND ALZHEIMER'S DISEASE.

FACT:

AMALGAM DENTAL FILLINGS CREATE "TOXIC TEETH." FOR SEVERAL DECADES, IT HAS BEEN KNOWN THAT HEAVY METALS, INCLUDING MERCURY, ARE A CAUSE OF ALZHEIMER'S DISEASE AND MULTIPLE OTHER CHRONIC HEALTH PROBLEMS.

*F*or decades, most people have seen a visit to the dentist and subsequent cavity filling as a necessary and regular procedure. Side effects have not routinely been brought to light, so few have challenged the status quo. Evidence suggests, however, that such an apparently harmless procedure can have serious detrimental effects. Did you know that dental amalgam fillings (*popularly called "silver fillings"*) are actually 50% mercury? **Mercury is a deadly poison**, and it wreaks havoc with the human body. The mercury contained in dental amalgam would be hazardous waste in a river, yet it's sitting in your mouth. What is wrong with this picture?

In the last chapter, we learned about the danger of vaccinations due to the toxic ingredients, including mercury and aluminum. In this

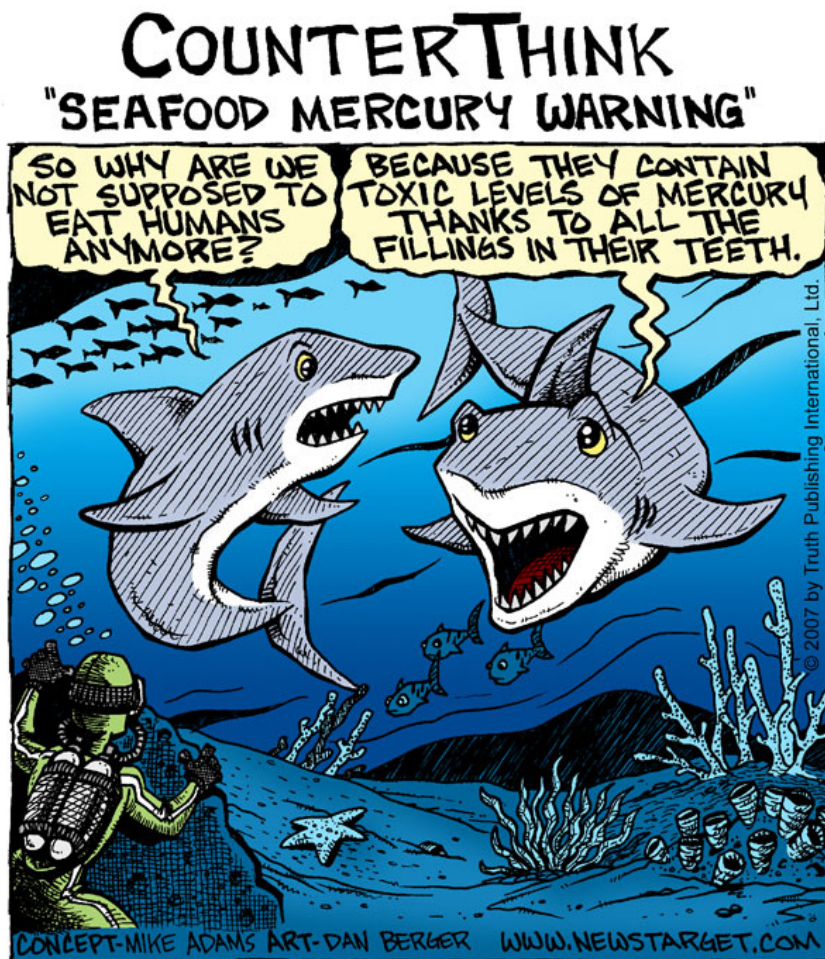
chapter, we will look closely at the relationship between “silver” amalgam (i.e. mercury) dental fillings, and Alzheimer’s disease.

Mercury Madness. Have you ever read Alice in Wonderland? Do you remember the “Mad Hatter?” Did you know that the term “mad as a hatter” originated from a disease peculiar to the hat making industry in the 1800s? A complicated set of processes was needed to turn the fur into a finished hat. With the cheaper sorts of fur, an early step was to brush a solution of a mercury compound on the fur to roughen the fibers. This caused the hatters to breathe in the fumes of this highly toxic metal, leading to an accumulation of mercury in the hatter’s bodies. This resulted in symptoms such as trembling (known as “hatters’ shakes”), slurred speech, loss of coordination, anxiety, personality changes, depression, and memory loss. This eventually became known as “Mad Hatter Syndrome,” and is still used today to describe mercury poisoning.

The ADA continues to remain in denial about the toxicity of mercury. In an ADA news release on June 13, 2001, ADA President Robert Anderton stated, “*There is no sound scientific evidence supporting a link between amalgam fillings and systemic diseases or chronic illness.*” Shame on you Dr. Anderton! ***This is a blatant lie.*** All evidence indicates that “silver” amalgam fillings (which typically contain close to 50% mercury) are extremely toxic to the human body. The now deceased Dr. Patrick Störtebecker, M.D., Ph.D., the world renowned neurologist and writer from Stockholm, Sweden, wrote in his book Mercury Poisoning from Dental Amalgam – a Hazard to Human Brain, “*Dental amalgam is a highly unstable metal that easily gives off mercury vapor. The most dangerous route for transport of mercury vapor, being released from dental amalgams, is from the mucous membranes of the upper nasal cavity and directly upwards to the brain where mercury vapor easily penetrates the dura mater (i.e. blood-brain barrier). Mercury (vapor) can act in a much stronger concentration straight on the brain cells.*”

You wouldn’t take a leaky thermometer, put it in your mouth, and leave it there twenty-four hours a day, would you? But, according to Dr. Michael Ziff, executive director of the International Academy of Oral Medicine and Toxicology (IAOMT), that is “*exactly what happens when an amalgam filling is installed in your mouth.*”

According to Tom Warren, "Worldwide there are over four thousand research papers indicating mercury is a highly toxic substance. How can dentists be so thoughtless as to place one of the **deadliest toxins** in existence two inches from our brain?"
www.whale.to/a/toxic_dentistry.html



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

Evidence now demonstrates that amalgam fillings are constantly being broken down and then are released into the mouth. These minute particles of mercury filling are then acted upon by oral and intestinal bacteria to produce methyl mercury (an even more toxic form of mercury than elemental mercury) with target areas being

primarily the pituitary gland, thyroid gland, and the brain. That's right, the brain! After the fillings have been inserted into the mouth, subtle changes in blood chemistry have been observed that point to specific chronic disease, e.g., cancer, multiple sclerosis (MS), and Alzheimer's. The difficulty in recognizing the "amalgam connection" to chronic disease is that clinical symptoms are not present until the patient's immune system collapses, which may be in 40 or 50 years.

So how much mercury is in your mouth? There is approximately $\frac{1}{2}$ gram of mercury in each dental filling. You may think that since you only have a couple of mercury fillings it's not a big deal. Think again. According to Dr. Richard Fischer, past president of the IAOMT, "*Dental amalgam ('silver') fillings contribute more mercury to the body burden in humans than all other sources (dietary, air, water, vaccines, etc.) combined. These fillings contain 50% mercury – which is more neurotoxic than lead, cadmium, or even arsenic.*"

To put this in perspective, the amount of mercury contained in one average size filling exceeds the EPA standard for human exposure for over one hundred years. Put in other terms, it takes only $\frac{1}{2}$ gram of mercury (*the amount in one filling*) to contaminate all fish in a ten acre lake.

According to Pam Floener, former spokesperson for the IAOMT, "*The metallic mercury used by dentists to manufacture dental amalgam is shipped as a **hazardous material** to the dental office. When amalgams are removed, for whatever reason, they are treated as **hazardous waste** and are required to be disposed of in accordance with OSHA regulations and it is inconceivable that the mouth could be considered a safe storage container for this toxic material.*"

So, let me get this straight...if a dentist were to dump some mercury amalgam in a lake, he'd be breaking the law. But if this same dentist dumps some mercury in your mouth (*via dental amalgam fillings*), then it's completely legal and would no longer be considered a threat to the environment. "*I don't feel comfortable using a substance designated by the Environmental Protection Agency to be a waste disposal hazard. I can't throw it in the trash, bury it in the ground, or put it in a landfill, but they say it is OK to put it in people's mouths. **That doesn't make sense.***" - Richard Fischer, D.D.S.

According to Dr. Dietrich Klinghardt, M.D., Ph.D. mercury toxicity expert at the American Academy of Neural Therapy, “As soon as anybody has any type of medical illness or symptom, whether medical or emotional, the amalgam fillings should be removed and the mercury residues should be eliminated from the body, especially the brain . . . most – if not all – chronic infectious diseases are **not** caused by a failure of the immune system, but are a conscious **adaptation** of the immune system to an otherwise lethal heavy metal environment.”

But don't expect your dentist to jump on board with you if you ask to have your fillings removed. According to the ADA's code of ethics, a dentist who acknowledges that mercury amalgam fillings are toxic and recommends their removal has acted **unethically**. According to ADA Resolution 42H-1986, “The removal of amalgam restorations from the non-allergic patient for the alleged purpose of removing toxic substances from the body when such treatment is performed solely at the recommendation of the dentist is **improper and unethical...**” What? Unethical to remove toxic poison from your mouth? Yet more proof that the ADA is still in the Dark Ages...

Did you know that dentists have the highest rate of suicide of any profession? They also suffer a high incidence of depression and memory disorders. Two of the effects of mercury poisoning are loss of memory and depression. Do you think the high rate of suicide (due to depression) and memory disorders in dentists has anything to do with low-level mercury exposure over several years? **This is mercury toxicity**, plain and simple.

The Alzheimer's Connection. You may have heard that lead poisoning is suspected to cause Alzheimer's, but according to Dr. Marcia Basciano, D.D.S., “The maximum amount of mercury that the Environment Protection Agency allows people to be exposed to is 5,000 times smaller than the permissible amount of lead exposure; in other words the EPA apparently considers mercury to be 5,000 times more toxic than lead.” It is likely that the most common cause of Alzheimer's disease is due to toxic mercury that leaches from amalgam dental fillings. Dr. Charles Williamson, co-director of the Toxic Studies Institute, states “there are studies from world renowned institutions that categorically show a cause-and-effect

relationship between **mercury** and disease; **this is particularly true of Alzheimer's.**" www.lef.org/magazine/mag2001/may2001_report_mercury_1.html.

According to Dr. Murray Vimy, a researcher from the University of Calgary, Canada, and member of the WHO: "On March 9, 1995, a friend faxed to me her mother's autopsy report from Mayo Clinic. Her mother died of AD (Alzheimer's Disease). The poor woman had 53 times more mercury in her brain than people who die of other causes."

In 1991, Dr. Boyd Haley, Ph.D., a research toxicologist at the University of Kentucky in Lexington discovered some hard evidence that changed the mercury debate for good. "It was almost accidental...I found out how damaging mercury amalgam is to the brain while studying tissue affected by Alzheimer's disease...I did an experiment. I put mercury amalgam in water. Then, I placed a sample of brain tissue in that water and checked on it over time. After a period of several weeks, I noticed that the exposure to mercury had suppressed the secretion from the brain tissue of tubulin—a major enzyme that performs critical functions in the brain. This finding was consistent both with mercury toxicity and with brain tissue as affected by Alzheimer's disease. From that, I concluded that there's clearly leakage from mercury amalgam—and that there's a strong probability that people who have such fillings in their teeth are being exposed to chronic, low-dose mercury leakage..."

Dr. Haley continues, "... (dentists) insist mercury amalgam is safe, non-toxic and that it doesn't leak ... (but) **mercury is a neurotoxin.** It leeches out of dental fillings, of that there is no doubt ... it heightens the risk of Alzheimer's and Parkinson's disease as well as other neurological disorders. Dentists defend their use of mercury amalgam, but it's unjustifiable. I feel like I've been arguing with the town drunk for eight or nine years. **My conclusion is simple and direct: mercury is the toxicant behind Alzheimer's.**" www.lef.org/magazine/mag2001

Other scientists have shown that trace amounts of mercury can cause the type of nerve damage that is characteristic of the damage found in Alzheimer's disease. The level of mercury exposure used in the test was well below those levels found in many humans with mercury/amalgam dental fillings. The research was conducted at the

University of Calgary Faculty of Medicine by professors Fritz Lorscheider and Naweed Syed. The professors found that exposure to mercury caused the formation of “neurofibrillar tangles,” which are one of the two diagnostic markers for Alzheimer’s disease. Previous research has shown that mercury can cause the formation of the other Alzheimer’s disease marker, “amyloid plaques.”

Dr. Lorscheider and Dr. Syed noted that no other material or metal tested, including aluminum, has ever produced even remotely similar reactions. They also produced the visual documentation of the biochemical mechanism by which the introduction of mercury induces hallmark diagnostic markers indistinguishable from those seen in the Alzheimer’s diseased brain. When Dr. Lorscheider submitted the paper to the British journal **NeuroReport**, which eventually published it (*NeuroReport*, 12(4):733-737, 2001), he added the video as an accompanying document, making it one of the few times that a piece of animation was subjected to the peer-review process. View it the video here: <http://commons.ucalgary.ca/mercury>

Get Rid of the Mercury & Reverse Alzheimer’s. According to Dr. H. Richard Casdorff, “In large measure, those martyred by dementia are showing the results of toxicity from mercury, aluminium, lead, cadmium, arsenic and other heavy metals. **Their neurons have been poisoned.** They are turned into Alzheimer’s victims directly through the efforts of dentists who blindly follow the party line of their trade union organisation, the ADA. Since 1952 the medical profession has had the means to reduce or **reverse** the signs and symptoms of Alzheimer’s disease.” What...**reverse** Alzheimer’s? **Is he nuts?** Based upon my research, he is 100% accurate. I recommend you read the report by Tom Warren entitled “Reversing Alzheimer’s Disease.”

In the above quote, Dr. Casdorff is referring to chelation therapy. Taken from the Greek word “chele” meaning “claw,” the word chelation refers to the way the therapy binds heavy metals, toxins, and metabolic wastes in the bloodstream. According to Doctors H. Richard Casdorff and Morton Walker, authors of Toxic Metal Syndrome: How Metal Poisoning Can Affect Your Brain, chelation therapy has been shown to help at least 50% of elderly people with Alzheimer’s who have tried it. They are documented as showing greater mental clarity, increased IQ, and improved memory. In their

book, the authors state that the Alzheimer's patients "were observed by loved ones to have returned to normal, or near normal, functioning. It was a gratifying experience for everyone involved with the testing and treatment: diagnosticians, clinicians, health care technicians, the patients, plus their family and friends."

The first step in removing the mercury from your system is to get rid of your amalgam fillings! However, there are safe ways to do this and there are unsafe ways. If you get your fillings removed by a dentist who doesn't take precautions, then the end result will be that you are worse off than before. Careless removal of amalgam fillings can release even more mercury into your system than what was leaking before the fillings were removed.

When we lived in Dallas, my dentist was Dr. Ellis Ramsey, DDS. He has been aware of the dangers of mercury for almost three decades. In 2007, he removed all of my mercury fillings. He is an **expert** at safe mercury removal, and I highly recommend him if you are in the North Texas (DFW) area. If you live elsewhere, be sure that you seek out a "biological dentist," preferably a member of the IAOMT, who understands the issues surrounding amalgam fillings. **Two safety precautions:** 1) Request oxygen during the procedure – this will insure that you breathe clean oxygen rather than toxic mercury vapor when the fillings are drilled out. 2) Request a rubber dam – this keeps pieces of the filling from falling down your throat or onto your tongue.

After you have had your fillings removed, **the next step** is to chelate the heavy metals. The quickest and most potent chelation method available today is **intravenous EDTA** chelation therapy. The chelating agent, EDTA, is an amino acid which has negative charges associated with it. Once inside the body it looks for positively charged molecules such as lead, iron, mercury, and cadmium. The number of IV EDTA treatments necessary is generally between twenty and fifty sessions, depending on your condition. This will cost between \$2,000 and \$5,000.

According to Webster Kehr, "This treatment has been known about for decades, but because EDTA chelation is **not profitable enough** for orthodox medicine the treatment has been buried. It is not that EDTA

*chelation is not expensive, it is expensive. The problem is that it **cures the patient too quickly**, and it does not treat the symptoms of Alzheimer's. In short, it is not profitable enough for Big Pharma and it is not "sophisticated" enough, meaning it is too simple, for Big Medicine. Big Pharma and Big Medicine like to treat symptoms, not causes." www.cancertutor.com*

Oral EDTA costs significantly less than IV EDTA, between \$20 and \$50 per month, depending on your intake. Clinical experience suggests that oral EDTA chelation provides many, but not all, of the benefits of IV therapy. Only between five and ten percent of an oral dose of EDTA is absorbed into the bloodstream (*compared with one hundred percent of an IV dose*). Yet, due to continuous daily intake, the amounts add up and can achieve similar benefits. Overall, the differences in benefits are more those of degree, convenience, speed, and cost per dose than of quality.

Another weapon in our "chelation arsenal" is **chlorella**. High doses of chlorella (*ten to twenty grams*) have been found to be very effective for mercury elimination. This is an important part of a good systemic mercury elimination program, because approximately ninety percent of the mercury is eliminated through the stool, and chlorella helps fecal excretion. And remember, chlorella is a food, so you cannot eat too much of it! However, you will need to work up to twenty grams since it can cause diarrhea.

Chlorella should be used in conjunction with **cilantro**. Dr. Omura, a Japanese researcher, discovered that cilantro could mobilize mercury and other toxic metals rapidly from the central nervous system. However, cilantro alone often does not remove mercury from the body. It often only displaces the metals from deeper body stores to more superficial structures. Cilantro will help mobilize mercury out of the tissue so the chlorella can bind to it and allow it to be excreted from the body. Along with chlorella and cilantro, you should start eating fresh **garlic** every day. This will enhance sulfur stores. Between two and three cloves a day is an excellent idea. Make sure you crush the garlic to release its active ingredients.

Also, I suggest taking **MSM** as well. MSM, which we discussed in the cancer treatments chapter, is a form of sulfur which acts on cell

membranes and which will help your body eliminate the mercury. Here is Karl Loren's explanation: "The brain is made up of billions of nerve cells, intricately connected with each other like electrons in a electrical circuit. When you think - you send electrical impulses throughout your brain. Alzheimer's disease is a condition where the many of these cells are coated with aluminum, causing them to short circuit and sends brain impulses to the wrong synapse creating confusion. MSM opens the membrane that contains the aluminum, and allows the unwanted deposits to be flushed into the blood stream. The hot bath with Clorox makes the body sweat and release the aluminum. Then the Clorox leeches it right off your body." www.bulkmsm.com/research/msm/msm6.htm#alzheimer

Also, during heavy metal detoxification, make sure you take a high quality multi-vitamin which contains all the essential minerals. An excellent thirty-three day mercury detoxification protocol used by many doctors can be found at the following website: www.lef.org/magazine/mag2001/may2001_report_mercury_3.html

According to Dr. Andrew Hall Cutler, "Amalgam illness is analogous to a war. Your enemy, mercury, captured a beachhead in your teeth and fortified it with amalgam. Then it launched an attack. House to house. Organ to organ. Cell to cell. Slowly capturing your body. You win the war with a surgical strike. Dental surgery. Drill out those fillings. Removing your amalgam declares an armistice. Fighting stops, but the mercury atoms are still dug in wherever they reached. Chelation sends clean up squads off to round up the enemy and escort them out. Meanwhile the surviving cells in your body get to work and to repair the war damage." www.noamalgam.com

DENTAL TRIVIA:

Did you know that the original "quacks" were dentists who advocated the use of mercury amalgam? "**Quacksalber**" is the old German word for mercury.



STEP OUTSIDE THE BOX

CHAPTER 18

ROOT CANALS

FICTION:

ROOT CANALS ARE SAFE AND OFTENTIMES NECESSARY TO PREVENT A TOOTH FROM BEING EXTRACTED

FACT:

A ROOT CANAL TOOTH IS ALWAYS INFECTED REGARDLESS OF ITS APPEARANCE AND LACK OF SYMPTOMS

You probably thought that mercury was the only “toxic teeth” issue and that you’re home free! Well, not if you have had a **root canal**. Approximately 20,000,000 root canal operations are performed annually in the United States. Nearly every dentist is oblivious to the serious health risks this operation produces. While many intelligent dentists refuse to put mercury fillings into the mouths of their patients, these same dentists will go right ahead and gladly perform a root canal, without any idea that these procedures cause horrific damage to their patients. According to Dr. James Howenstine, M.D., “**Many chronic diseases, perhaps most, are a result of root canal surgery.**”

A root canal treatment is done to save a tooth which otherwise would have needed to be extracted. They are usually done when severe infection has spread to the roots of the tooth. The root canal is a narrow canal that runs from the middle of the tooth down to

the roots, which are buried in the jawbone. In the root canal procedure, a hole is drilled in the tooth to gain access to the root canal, the dead or infected nerves and tissue are removed, and the root canal area is cleaned, sterilized, and disinfected. Then the inside of the tooth is filled and the hole is typically sealed with a crown.

Each year, millions of root canals are done with an apparent success rate of over 90%. In other words, there is no pain and the X-rays indicate that the tooth has been “*healed*.” Unfortunately, this masks a problem which can still be occurring. Many dentists now recognize that it is **impossible** to clean out all of the dead tissue or to completely sterilize a tooth. There are over 3 miles of tubules (*tiny channels*) in every tooth, and only an arrogant (*or insane*) dentist would claim to be able to clean or sterilize 100% of the 3 miles of tubules. This then leaves areas of necrotic (*dead*) tissue in the tooth to continue decomposing and being infected. Our immune system’s white blood cells don’t travel into tubules nor do antibiotics filter into these areas. Thus, the tubules become a “safe haven” for microbes (*viruses, yeasts, fungi, molds, bacteria, etc*). And since the nerve tissue, blood vessels, and living tissue inside the tooth has been removed, it is now **dead**.

In 1993, Dr. Hal Huggins, D.D.S., gave a lecture to the Cancer Control Society. In an almost comical fashion, Dr. Huggins stated, “*Then we get into the root canal business, and that is the most tragic of all. Isn’t there something you can put in the centre of the canal that is safe? Yeah, there probably is, but that is not where the problem is. **The problem with a root canal is that it is dead.** Let’s equate that. Let’s say you have got a ruptured appendix, so you go to the phone book, and who do you look up? Let’s see, we have a surgeon and a taxidermist, who do you call? You going to get it bronzed? That is all we do to a dead tooth. We put a gold crown on it, looks like it has been bronzed. It doesn’t really matter what you embalm the dead tooth with, it is still dead, and within that dead tooth we have bacteria, and these bacteria are not in the absence of oxygen. In the absence of oxygen most things die except bacteria. They undergo something called a **pleomorphic** change... like a mutation... they learn to live in the absence of oxygen... now produce **thio-ethers**, some of the strongest poisons on the planet that are not radioactive.”* www.whale.to/d/root2.html

Remember that cancer and a host of other diseases are caused by a **pleomorphic microbe**. To cure cancer, the microbes must be killed throughout the body so the immune system can restore the body to its normal state. However, a root canal is the perfect “breeding ground” for microbes. As Dr. Huggins stated above, some of the most dangerous of these microbes are the thio-ethers, including dimethyl sulfate. A German oncologist named Josef Issels was able to confirm that the thio-ethers released from these root canal microbes are very closely related to the chemicals used by the Germans in World War I to create mustard gas. **According to the EPA, dimethyl sulfate has been classified as a Group B2 human carcinogen.** Tumors have been observed in the nasal passages, lungs, and thorax of animals exposed to dimethyl sulfate. www.epa.gov/ttn/atw/hlthef/di-sulfa.html

According to Dr. Karen Shrimplin, the thio-ethers are so toxic because they are fat soluble and therefore concentrate in the lipid (*fat*) framework of the cell, especially the mitochondria. The mitochondria are the “cellular power plants” and are responsible for the production of energy. If the mitochondria are damaged, then the cell can no longer make energy via **aerobic** respiration and they are forced to switch to **fermentation** (*anaerobic respiration*) to produce energy. Remember, **all cancer cells use fermentation as their means of energy production.**

So basically, what Dr. Shrimplin is saying is that the pleomorphic microbes which inhabit the tubules in a root canal began as normal aerobic bacteria, but when they are sealed into the tooth their environment changes and they become anaerobic and produce toxins such as thio-ethers. These thio-ethers then are released into the rest of our body and damage the mitochondria of our cells, thus causing them to become anaerobic. **It’s a viscous cycle, all started by the root canal!** These anaerobic microbes, which thrive inside root canals, excrete toxicity from digesting necrotic tissue, and this leads to chronic infection and degenerative disease. Think about it...if an organ or limb dies in our body, we would remove it. Not so with **dead teeth!** Dentist Frank Jerome states “*The idea of keeping a dead, infected organ in the body is only thought to be a good idea by dentists. A root canal-treated tooth always negatively affects your immune system.*”

Way back in the 1920s, Dr. Weston A. Price, D.D.S., performed experiments which at first were hailed by the American Dental Association, but which were later ignored. Dr. Price suspected that bacterial infection accompanied many degenerative diseases. He suspected that these infections arose from the teeth. He decided to implant an extracted root-filled tooth under the skin of an animal. **He found that by implanting the root-filled tooth, the disease of the patient was transferred to animals.** Whatever disease the patient had, the animal with the extracted tooth under its skin developed the same disease as the patient. He also observed that when root filled teeth were taken out using correct techniques then a variety of health problems improved, from arthritis to kidney problems to cancer. This was done with hundreds of patients.

Dr. Price had found that none of one hundred disinfectants was able to penetrate and sterilize the dentin, which makes up ninety-five percent of the structure of the teeth. Neither are any antibiotics capable of sterilizing root canals. Very few dentists are aware of or willing to admit that dentin tubules are **always infected** after root canal surgery. These bacteria escape into the blood and proceed to initiate a vast number of degenerative diseases. Most dentists believe that the disinfecting substances used to pack the root canal after surgery effectively sterilize the root canal site which is unfortunately **not true**.

What Dr. Price reported and what he found with the tests which involved some five thousand animals over the twenty-five year period was that “*root canal teeth*,” no matter how good they looked, or how free they were from symptoms, always remained infected. Dr. Price documented his findings in two monumental volumes entitled Dental Infections Oral & Systemic and Dental Infections and the Degenerative Diseases. Not surprisingly, the books were effectively suppressed for 50 years until Dr. George Meinig, a retired endodontist (*a dentist who specializes in root treatment*), discovered these books. He republished a shortened version of these books called Root Canal Cover-up.

If you have a root canal, you may need to see a specialized type of dentist called a “biological dentist” or a “holistic dentist.” These dentists are sometimes persecuted by the ADA, so don’t expect to

find one in the local telephone book. They can be difficult to find. Bill Henderson may have the only major alternative cancer treatment that requires the removal of root canals. He will work with his patients to find a biological dentist. His website is www.beating-cancer-gently.com.

Let's look at the work of Josef Issels in Germany, who treated terminal cancer patients for over forty years. The immune systems of these patients had already been destroyed by the "Big 3" conventional treatments (*chemo, surgery, and radiation*). They already had three strikes against them. However, Dr. Issels cured 24% of his 16,000 terminal patients during that forty year period. What was the first thing he did? **He had a dentist take out the root canal teeth!**

If you get your root canal teeth pulled, then you may create another problem. A cavitation is a hole in the bone (*because of a pulled tooth*) which has not healed correctly. The tissue in the cavitation (*such as the ligaments which once held the tooth*) becomes infected. The highly toxic bacteria produced can cause osteonecrosis (*bone death*), weaken overall health, and lead to degenerative diseases such as cancer...oftentimes **without** any obvious pain in the jaw area!

If you have a root canal, cavitations, or periodontal (*gum*) disease, I suggest the following supplements:

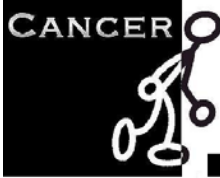
- **ORAL GUARD** – This is by far, the best single product on the market to treat periodontal disease. With an impressive and powerful list of ingredients like St. John's Wort, CoQ-10, folic acid, green tea extract, lipoic acid, and Vitamin K1, ORAL GUARD is simply the most potent protection against gum disease available.
- **DMSO** – "DMSO, 25% in water (*optional*). Take one teaspoon as a mouthwash, twice daily. Swish slowly over gums. Hold several minutes. Swallow for maximum effectiveness. This "pushes" your supplements into your tissues. It also helps to draw toxins out of cavitations. You may add wintergreen drops to the mouthwash. 50% DMSO is preferred, if available.

Must be medical grade DMSO.” (taken from Cure for All Advanced Cancer, page 198).

- **Co Q10** – This supplement exerts its protective and strengthening action in all tissues. Working from the cellular level, it strengthens the gums as well as the heart muscle. Many scientists believe that periodontal disease is a good indicator of low levels of CoQ10 in other tissues.
- **Vitamin C** – I read of a fellow that lives in Waco, Texas who had periodontal disease. He took 15,000 mg of vitamin C each day (*5,000 mg with each meal*) and his periodontal disease literally disappeared!

The North Carolina Institute of Technology has proven that the waste products (*a chemical neurotoxin*) of bacteria that inhabit dead teeth (*root canals*), necrotic jawbones (*cavitations*) and some other dental issues can cause toxic inhibition of special proteins that genetically protect the body from forming cancer tumors. If you are interested in treating your root canal teeth and/or treating cancer that may have resulted from dental problems, I recommend that you visit their website: www.breastcancercured.com.

The bottom line is that cancer treatments may still fail if a patient continues to harbor infection in his/her mouth. The infection that has chronically compromised the immune system may come from root canals as discussed above, but also from infected teeth, cavitations, and periodontal (*gum*) disease. ***It is crucial for the cancer patient to be diligent to treat potential infections arising from the mouth.***



STEP OUTSIDE THE BOX

CHAPTER 19

SOY: THE “MAGIC BEAN”?

FRAUD:

SOY IS A “WONDER-FOOD” THAT PROTECTS AGAINST BREAST CANCER & OSTEOPOROSIS. SOY IS A COMPLETE PROTEIN.

FACT:

UNFERMENTED SOY PRODUCTS ARE UNDIGESTIBLE. SOY IS NOT A COMPLETE PROTEIN, IS NOT A NATURAL FOOD, CONTAINS SEVERAL HARMFUL CARCINOGENS, AND MOST SOYBEANS IN THE UNITED STATES HAVE BEEN GENETICALLY MODIFIED.

*A*ccording to most mainstream and “*alternative living*” media, soy beans are the most versatile, natural, heart-friendly, health-improving, fat-preventing, growth-promoting and generally “*all-around good for you*” foods ever grown on God’s green earth. With food aisles brimming with hundreds of soy products, including soy protein, soy breakfast bars, soy burgers, soy ice cream, and an endless array of soy beverages, is soy beer soon to follow? Actually, it’s already here! Doctors, athletes, nutritionists, farmers, government officials, and respected companies all make a point of telling us how safe and wonderful soy is for us and about soy’s myriad of health benefits. They tell us that it is so excellent and so safe that it doesn’t even need to be listed as an ingredient in many processed foods. But we don’t mind, do we? I mean, **everyone knows** it’s safe, right?

Along with being the new health food, soy has also become the latest cash cow for companies like Monsanto. Across the globe, billions of acres are earmarked for soybean cultivation, thus providing a secure cash crop for millions of farmers who gladly disburse a “tariff” to Monsanto, the developers of their genetically modified soybeans. What is the modern gospel of food production? **“Soy is Good For You.”**

Or is it? Sadly, for several decades, corporations have been aware of (*and suppressed*) the evidence that ingestion of soy causes cancer, destroys bones, and creates havoc with our hormonal systems. The truth behind the blatantly commercial integration of soybeans into our diet is a distressing tale of fraud, greed, propaganda, suppression, corporate irresponsibility, corruption, bad science, and political opportunism.

Have you ever seen the “soy cows” that soy milk comes from? Not sure if you’re aware of this, but **you can’t milk a soy bean!** According to Elaine Hollingsworth in her book *Soy – The Abominable Bean*, “*in order to obtain that pure-looking, inviting stream of white liquid pictured so appealingly in the ads, many processes are needed. It is necessary to grind the beans at high temperature, and then extract the remaining oils with dangerous solvents, some of which remain in the meal. Then the meal is mixed with an alkaline solution and sugars, in a separation process designed to remove fibre. Then it is precipitated and separated, using an acid wash. At each stage of processing a tiny amount of poison remains within the soy.*”

She continues, “... regulators say it’s so small an amount that it doesn’t count. I wonder who told them that? And why don’t they take notice of the scientists who say it does count, due to its accumulation in the body over long periods of soy ingestion? Are you really happy to accept the manufacturer’s assurance that it’s safe to eat a tiny amount of poison each day, perhaps several times a day, until you have a serious health problem?” www.doctorsaredangerous.com

One of the many marketing ploys for soy is that it contains **isoflavones** (estrogen-like substances). Despite the fact that he/she has no idea what an isoflavone is, your typical soy milk drinker will

repeat the mantra they hear on the nightly news about isoflavones. What you won't hear on the news is that scientists have known for years that isoflavones in soy products can depress thyroid function, causing autoimmune thyroid disease and even cancer of the thyroid. **Scientists have known for over half a century that soy negatively impacts the thyroid gland.** Research in Japan concluded that daily consumption of only one ounce of soybeans over the course of ninety days caused enlargement of the thyroid and suppressed thyroid function. Some subjects even developed goiter. The subjects returned to normal when they quit eating soy. (Y. Ishisuki et al, “The effects of the thyroid gland of soybeans administered experimentally in healthy subjects”, *Nippon Nibunpi Gawk Zasshi*, 1991). As a matter of fact, the isoflavone genistein inhibits thyroid function more effectively than prescription drugs developed to control hyperthyroidism!

As far back as the 1950s, **phytoestrogens** (estrogen-like substances derived from plants) were being linked to increased cases of cancer, infertility, and leukemia. According to Dr. William Wong, “Soy is poison, period!” In his article entitled “Soy: The Poison Seed” (www.totalityofbeing.com/ArchivedSoyPoison.html), Dr. Wong describes several reasons why soy is poison. Two of the isoflavones (genistein and daidzein) which soy contains are basically built in insecticides for the soybean. He asks, “If they kill bugs, are they good for humans?” **Hmmmmmm.....** Good point.

Dr. Mike Fitzpatrick, a respected toxicologist who is at the forefront of the New Zealand campaign against soy, wrote a paper in 1998 citing much of the published work on the dangers of soy isoflavones, which he submitted to the FDA. This paper was also published as an article in the *New Zealand Medical Journal* entitled “Soy Formulas and the Effect on the Thyroid” (*The New Zealand Medical Journal*, February 2000). In this paper, Dr. Fitzpatrick states, “The toxicity of isoflavones to animals first raised the awareness of the scientific community to the fact that soy isoflavones are endocrine disruptors... There have been profound negative endocrine effects in all animal species studied to date... Soy isoflavones increase the risk of breast cancer... Soy isoflavone disrupts the menstrual cycle during, and for up to three months after, administration... Dietary concentration of genistein may stimulate breast cells to enter the cell

cycle... Concern was expressed that women fed soy protein isolate have an increased incidence of epithelial hyperplasia.”

Charlotte Gerson, of the Gerson Cancer Clinic, has published detailed research proving that genistein is more carcinogenic than DES (*diethylstilbestrol*), a synthetic estrogen drug that was given to millions of pregnant women primarily between the years 1938 and 1971. (*Gerson Clinic: Cancer Research*, June 1, 2001 - 61 (11): 4325-8). DES inflicted death and misery on countless women and their daughters during this period. In an article entitled “*Dietary estrogens stimulate human breast cells to enter the cell cycle*” published in the 1997 issue of *Environmental Health Perspectives*, Dr. Craig Dees has found that soy isoflavones cause breast cancer cells to grow!

As if we need more damning evidence, soy also contains **phytic acid**. The presence of phytic acid in soy totally destroys the credibility of the manufacturers’ claims that soy is a good source of calcium and helps prevent osteoporosis. Here’s why: phytic acid impairs the absorption of all minerals, **especially calcium!** And since soy contains more phytic acid than any other grain, soy actually strips your body of calcium and other essential minerals.

Soy is not a complete protein, as it lacks the essential amino acids methionine and cystine. And soy protein is difficult to digest because it contains substantial amounts of **trypsin inhibitors**. Remember, trypsin is essential in protein digestion, and cancer cells are protected by a protein coating which makes them “invisible” to the immune system. Soy also contains hemagglutinin, a clot-promoting substance that causes red blood cells to clump together. These clustered blood cells are unable to properly absorb oxygen for distribution to the body’s tissues, which can damage the heart and lead to cancer. We all know about the relationship between oxygen and cancer, don’t we?

Conscious of the public’s growing awareness of the dangers of genetically modified crops, the recent movement toward organic produce, and displaying the kind of creative duplicity which even Prince Machiavelli would applaud, Monsanto Corporation has almost 50 million acres of genetically modified soybeans growing in

the U.S. Here’s the catch: American law permits these crops to be mixed with a small amount of organic soybeans, and the resultant combination may then be labeled “organic”! And you still think the government wouldn’t let them lie to you? This deadly “food” belongs in the toxic waste dump, but the multinational corporations like Monsanto are disposing of it in you, your family, and in baby formulas! For those who ask if organic soy is safe, I say, “Would you eat **organic anthrax?**”

According to Dr. Tim O’Shea, “Yet another toxin found in some processed soy products is **aluminum**, which is said to be 10 times higher in infant soy formulas than in milk-based formulas--and 100 times higher than in unprocessed milk. Levels are even higher when soy products are hydrogenated. Aluminum, a cause of Alzheimer’s, can also damage the newly forming kidneys of an infant who drinks soy formula. Worse yet, aluminum can directly damage the infant brain because the blood-brain barrier has not formed yet. Processed soy can also contain a known carcinogen called lysinoalanine. It is a by-product of a processing step called alkaline soaking, which is done to attempt to eliminate enzyme inhibitors. Even though the beans are thoroughly rinsed, the lysinoalanine by-product can remain from the interaction of the soybeans with the alkaline solution.”

And just when you thought it couldn’t get any worse, a recent study of Japanese men (*living in Hawaii*) found that consuming 2 or more weekly servings of tofu was linked to the development of dementia! (L.R. White, et al, “Brain aging and midlife tofu consumption,” *Journal of American College of Nutrition*, April 2000). But don’t the Chinese and Japanese eat lots of soy? The answer is “**no**, they don’t.” And the majority of the soy products which they do eat are fermented (*tempeh, tamari, natto, miso*). Long ago, they discovered that fermentation caused the protein to be more easily digested, and the phytic acid, toxins, and “*anti-nutrients*” would be destroyed. This being so, fermented soy products are acceptable, but only in small amounts.

Concerning soy, other countries are light years ahead of the USA. In July of 1996, the British Department of Health issued a warning that the phytoestrogens found in soy-based infant formulas could adversely affect infant health. The warning was clear, indicating that

soy formula should only be given to babies on the advice of a health professional. They advised that babies who cannot be breastfed or who have allergies to other formulas be given alternatives to soy-based formulas.

With their cash cow at stake, the market for soy must be maintained. American soy farmers “contribute” almost \$80 million each year to help fund what must be considered one of the most effective brainwashing campaigns in history. The resultant high-powered media blitz ensures that “news” stories about soy’s myriad of benefits abound, from radio to TV to the internet.

But don’t fall for the labyrinth of lies! Soybeans are not a complete protein, are not a natural food, contain several harmful carcinogens, and most soybeans in the United States are genetically modified. According to Dr. Wong, “any opinions to contradict the facts noted above have been paid for by the agribusiness giants Monsanto and Archer Daniels Midland. Once public knowledge of their manipulation of public opinion and of the FDA becomes widely known, expect monster class action lawsuits against these folks. They’ll deserve it in spades!”



STEP OUTSIDE THE BOX

CHAPTER 20

CODEX ALIMENTARIUS

FRAUD:

THE PURPOSE FOR CODEX ALIMENTARIUS IS TO
"HARMONIZE" MANUFACTURE AND DISTRIBUTION OF
NUTRITIONAL SUPPLEMENTS TO PROTECT CONSUMERS.

FACT:

CODEX WILL TAKE AWAY ALL REMNANTS OF HEALTH
FREEDOM AND PUT US FURTHER UNDER TYRANNICAL
RULE.....

*C*odex Alimentarius (Latin for "food code") is the proposed set of international guidelines for nutritional supplements, food handling, production, and trade which is now gradually being ratified in countries around the world, starting in the European Union (EU). Codex is a joint project of the United Nations (UN), World Health Organization (WHO), and the Food and Agricultural Organization (FAO). The **official line** is that some "harmonization" on safety, trade, manufacture, and distribution of nutritional supplements would help the world in so many ways. The **truth** is that Codex is one more step toward total health tyranny.

Codex is made up of thousands of standards and guidelines. One of them, the Vitamin and Mineral Guideline (VMG), is designed to permit only ultra low doses of vitamins and minerals, essentially making supplements illegal. Vitamin C, for example, at any dosage higher than two hundred milligrams per day will be illegal. A gram of

Vitamin C will be an illegal substance! The dose of coenzyme Q10 which has been shown to resolve breast cancer in some patients (400 mg per day) will be illegal because coenzyme Q10 will be totally illegal at any dose following the European Supplements Directive model. Only twenty-eight nutrients will be allowed, but the maximum upper limits have been set so low that they have little or no clinical impact in keeping us healthy and none at all in returning us to a state of health if we are ill. And those which are available will be exorbitantly priced.

One of the committees within Codex, the “Codex Committee on Nutrition and Foods for Special Dietary Uses” (CCNFSDU), is chaired by Dr. Rolf Grossklaus, a German physician who believes that nutrition has no role in health. Yes, the “top-guy” for Codex nutritional policy has publicly declared that “*nutrition is not relevant to health.*” As crazy as it may sound, Dr. Grossklaus actually declared nutrients to be toxins in 1994.

Codex also stipulates which conditions may be treated using herbs. Only minor, self-limited conditions may be treated by herbal means. Treating any other conditions with herbal remedies will constitute a crime. Codex sets permissible upper limits for pesticide residues, toxic chemicals in the environment, hormones in food and other environmental contaminants which are many times higher than levels advocated by chemical and pesticide industry lobbying groups. Current toxic levels are already responsible for most of the cancers, heart disease, autism, chronic degenerative conditions, and organ failures which are killing people at increasing rates around the globe. Making permissible toxic levels higher will accelerate this destructive world-wide trend.

The Stockholm Convention, signed by 176 countries including the USA (May 2005) commits the signatories to eliminate world’s twelve most dangerous “*persistent organic pollutants*” (POPs). **Codex allows seven of the twelve agreed upon killer POPs to be used in the production of foods!!** This is insane. The seven restricted POPs banned by both the Stockholm Convention and US law but permitted by Codex are Aldrin, Chlordane, Dieldrin, Endrin, Heptachlor, Hexachlorobenzene, and Mirex.

Codex makes irradiation of food legal and even mandatory under certain circumstances. Under the guise of “*protecting us from food borne illness,*” the irradiation of food is by no means agreed to be a safe procedure since there is considerable scientific evidence that protein structures are modified in unhealthy ways by introducing ionizing radiation into food before it is consumed.

Codex makes the non-labeled use of GMOs legal in all foods under all circumstances. Many GMOs have been genetically engineered so that seeds will not germinate without the use of specific pesticides. In fact, mounting scientific evidence makes it clear that birth defects, chemical sensitivity, chronic fatigue syndrome, asthma, severe allergies and a host of other conditions are caused by pesticide exposure (*which these crops will require*).

Using their multi billion-dollar marketing budgets, Big Pharma has launched a massive media propaganda campaign to *paint* Codex as a benevolent tool of “*consumer protection,*” as well as to negatively *taint* the image of natural health options and mislead people to fear them as “*dangerous,*” so they will take more drugs. Contrary to the propaganda you may have heard about Codex, it has nothing to do with consumer protection. Nothing! Codex is about protecting the cash cow -- prescription drugs.

And here is the kicker – Codex is based in the Napoleonic Code, not Common Law. That means that under Codex, anything not explicitly permitted is forbidden. Under Common Law, we hold that anything not explicitly forbidden is permitted. **The difference is the difference between health freedom and health tyranny.**

The Dietary Supplement Health and Education Act (*DSHEA*) is a US law classifying our supplements and herbs as foods (*which can have no upper limit set on their use*) and was passed by unanimous Congressional consent in 1994. *DSHEA* is the only law which currently protects us from Codex’s deadly VMG. But *DSHEA* is under significant legislative attack right now. There are many members of Congress who want to overturn this law. They have sold out like cheap harlots.

I suggest that you write your Congressman and let them know that if they ever vote against your health freedom, that you will vote them out of office. Tell your representatives that you want to make sure that DSHEA is vigorously protected here in the USA and that you expect to continue to have access to any kind of dietary supplement that you wish at any potency and level of dosage.

COUNTERTHINK - "DELUSIONS OF TYRANTS"



Thanks to Mike Adams and www.NaturalNews.com for the cartoon above.

Codex is nothing more than Big Pharma's worldwide "control" agenda (as well as a genocide agenda). It is an enormous assault on humanity and health freedom. Sadly, much of the "dumbed down" populace sees it as a "good thing" that the benevolent government "cares enough to protect us." You know the old saying, "a nation of sheep results in a government of wolves."

We are witnessing the end of America as a nation-state right now, and with these changes, none of our domestic laws or constitutional rights are secure. All of our laws and institutions of government are subject to "harmonization" to international standards. Globalization is right around the corner...

We are facing a frightening future, not to mention the fact that children born after 1990 have no clue about their food, water, vaccinations, or anything else. It's by design. We are being slowly

“starved to death” from lack of nutrition. This too is by design... irradiated food, pasturized milk and juice, viruses sprayed on our meat, chemicals sprayed on fruit and vegetables, now we're being forced without our consent to eat genetically modified foods.

To learn more about Codex, please visit www.healthfreedomusa.org – the website of Major General Albert (Bert) N. Stubblebine III (US Army, Retired) **and** Rima E. Laibow, M.D.

If Codex becomes the “law of the land” here in the USA, stories like the one that follows will be commonplace.

THE STOWERS FAMILY MANNA STOREHOUSE

The Stowers family has run a very large, well-known food cooperative called Manna Storehouse, just outside Cleveland for many years. On Monday, December 1, 2008, a SWAT team with semi-automatic rifles entered their private home in La Grange, Ohio, herded the family into the living room, and kept guns pointed at the parents, children, infants and toddlers, for approximately 9 hours! The SWAT team was aggressive and belligerent. Needless to say, the children were quite traumatized.

Agents began rifling through all of the family’s possessions, a task that lasted hours and resulted in a complete upheaval of every private area in the home. Many items were taken that were not listed on the search warrant. In direct violation of the US Constitution, the family was not permitted a phone call, and they were not told what crime they had allegedly committed, they were not read their rights. Additionally, over \$10,000 of food was “confiscated” (stolen) including their personal food storage for the upcoming year. All of their computers and all of their cell phones were taken, as well as phone and contact records.

What was their crime? Presumably Manna Storehouse might eventually be charged with running a retail establishment without a

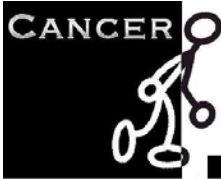
license. Why then the “Gestapo” style interrogation for a third degree misdemeanor charge? Is there some rabid new interpretation (of existing drug laws) that considers food a controlled substance worthy of a SWAT raid?

This “Nazi-esque” raid raises the disturbing possibility that it could become a crime to raise your own food, buy eggs from the farmer down the road, or butcher your own chickens for family and friends. Will Americans retain the right to purchase food that is uncontaminated by pesticides, herbicides, allergens, additives, dyes, preservatives, MSG, GMOs, radiation, etc.? Honestly, I’m waiting for people to have to get “permits” to grow gardens in the USA. I can foresee police raiding homes and pulling up gardens in backyards as whole families have guns pointed at their heads... for the “crime” of not having the required permit.

According to Dr. James DeMeo, Ph.D, *“In recent years, there has been an upsurge of police activities in the USA, the nature of which most Americans would more readily associate with repressive dictatorships. We Americans have been educated to believe that democracy, due process, assumed innocence-until-proven-guilt, and Constitutional protections against illegal search and seizure are the laws of the land. On paper, these protections are there; but in reality, these basic Constitutional rights and freedoms have been gradually and steadily eroded away by new laws, judicial rulings, and bureaucratic decrees. One of the lesser-known but more significant leaders of this assault on American freedom has been the US Food and Drug Administration (FDA).”*

Thomas Jefferson once stated, *“If people let government decide what foods they eat and what medicines they take, their bodies will be in as sorry a state as are the souls who live under tyranny.”* Two centuries later, we find ourselves on the verge of doing just that. If Codex becomes the law of the land in the USA, the ramifications are unthinkable.

Welcome to the *“land of the free and the home of the brave.”*



STEP OUTSIDE THE BOX

CONCLUSION

I trust that this book has made it abundantly clear that you **do** have natural alternatives to the “Big 3,” although these alternatives may not have the “*stamp of approval*” from Big Medicine. Hopefully, you now realize that you do **not** have to poison, slash, or burn your body. Neither are you limited to the alternative cancer treatments which I have addressed in this book. While the treatments included in this book have been deemed to have the best track records and have shown the great merit with cancer patients, there are literally hundreds of other alternative cancer treatments which work better than the “Big 3.”

Beware of wolves in sheep’s clothing! Hospitals and other providers that offer so-called “nutrition-based” or “holistic” or “integrated” programs oftentimes are only paying lip-service to patients’ requests for alternative cancer treatments, just to get them in the door. However, once you’re there, they frequently will try to convince you that the “Big 3” are your only hope. Don’t fall for this lie. You know better. How you treat **your** cancer is **your** choice. If the doctor tells you that your cancer is terminal, what he **really** means is that it’s terminal if you use the “Big 3.”

It’s sad that **money** rather than altruism is what drives Big Pharma and Big Medicine, but that’s reality. And it always will be, since if effective alternative cancer treatments were to become mainstream, millions of pharmaceutical salespeople and researchers would immediately be looking for a job, shareholder profits would plummet, and CEOs would lose their golden parachutes. Let’s face it folks, Big Pharma runs the show. They want you to remain ignorant and “*in the dark.*” Those that profit from cancer are like the slave owners 200 years ago. If you ran a plantation back in the slave days,

you wanted to make sure that your slaves remained obedient, submissive, and illiterate. If a slave had the nerve to disobey “*the master,*” then he was beaten within an inch of his life. Books weren’t allowed, thus slaves were unable to learn to read. These steps were taken to insure that they would never have the boldness to venture off the plantation and the master would have a “slave for life.” In the Cancer Industry, patients are like slaves, and the slave owners want to make sure that they remain enslaved by suppressing information about alternative treatments and persecuting those who dare to question their authority and use an alternative treatment. “*Keep ‘em dumb*” seems to be their slogan. So I say, “*Don’t donate!*”

The next time you are asked to donate to a cancer charity, please keep in mind that your money will be used to sustain an industry which has been deemed by many eminent scientists as a qualified failure and by others as a complete fraud. ***If you would like to make a difference, please consider donating money to the Independent Cancer Research Foundation (ICRF).*** This non-profit organization’s goal is to develop highly potent alternative cancer treatments that work quickly and are very effective on advanced cancer patients. Visit their website at www.new-cancer-treatments.org.

Thank you for reading this book. I sincerely hope that it has given you both ammunition and hope. God willing, the day will come when the general public has free access to all alternative cancer therapies. But until then, perhaps this book will be a source of information for you and your loved ones who desperately need assistance navigating through the cancer jungle and “*stepping outside the box.*”

MAY GOD BLESS YOU WITH A LONG AND HEALTHY LIFE!

A handwritten signature in black ink that reads "Ty Bolhujic". The signature is written in a cursive, flowing style with a large, prominent 'T' and 'B'.

APPENDICES

CANCER CLINICS

SPIRITUAL CANCER

THE VIC WHILEY
STORY

&

DAVID VS. GOLIATH:
JASON VALE AND THE
CANCER MAFIA



STEP OUTSIDE THE BOX

APPENDIX 1

RECOMMENDED CANCER CLINICS

WHILE MANY ALTERNATIVE CANCER TREATMENTS CAN BE EFFECTIVELY ADMINISTERED AT HOME, SOME CANCER PATIENTS (*AND THEIR FAMILIES*) MAY FEEL MORE COMFORTABLE IF TREATMENT IS ADMINISTERED BY A MEDICAL PROFESSIONAL IN A CLINICAL ENVIRONMENT. THE CANCER CLINICS MENTIONED IN THIS SECTION ALL USE FANTASTIC CANCER TREATMENT PROTOCOLS, AND THEY ARE ALL OPERATED BY PEOPLE WITH A LONG HISTORY OF SUCCESSFULLY TREATING CANCER PATIENTS. THEY ARE IN ALPHABETICAL ORDER.

ARIZONA INTEGRATIVE MEDICAL CENTER

Location: Scottsdale, Arizona
Phone: (480) 214-3922
Website: www.drstallone.com

Arizona Integrative Medical Center is run by Dr. Paul Stallone. He currently practices in Scottsdale where his patients seek assistance with a variety of ailments ranging from the common cold to Stage IV cancer.

His main focus is to listen and understand the underlying cause of an individual's illness. His belief is that oftentimes, the underlying cause is a combination of nutritional, structural, emotional, chemical, and lifestyle factors. He uses a vast array of modalities including Nutrition/Supplements, Homeopathy, Detoxification, Acupuncture, Oxygen/Ozone Therapy, and Intravenous Nutritional-Vitamin Therapy to effectively treat diseases such as cancer.

BRIGHT SPOT FOR HEALTH

Location: Wichita, Kansas
Phone: (316) 682-3100
Website: www.brightspot.org

Dr. Hugh Riordan used to run the Bright Spot Clinic in Wichita, Kansas. However, he died in 2005. Now, it is run by Dr. Ron Hunninghake, M.D., and a staff of PhDs, all of whom are involved in orthomolecular research and other cancer research. Orthomolecular medicine describes the practice of preventing and treating disease by providing the body with optimal amounts of substances which are natural to the body. The key idea in orthomolecular medicine is that genetic factors affect not only to the physical characteristics of individuals, but also to their biochemical environment.

At the Bright Spot, their goal is to find and correct the underlying reasons for disease by evaluating the patients "biochemically," which includes measuring nutrient levels. At The Center, they are specialists in certain alternative approaches, including intravenous Vitamin C, nutritional medicine, ear and body acupuncture, heavy metal chelation, detecting adverse food reactions and hidden parasites, and therapeutic massage.

CONTEMPORARY MEDICINE

Location: Burr Ridge, Illinois
Phone: (630) 321-9010
Website: www.contemporarymedicine.net

At Contemporary Medicine, they concentrate on treating patients with stage four (*advanced*) cancers. Their typical patients have tried the “Big 3” and have **failed** with the “Big 3.” They believe that conventional treatments for cancer are oftentimes worse than the disease itself. Dr. Steven G. Ayre has studied and researched IPT for over 30 years, and actually coined the name “*Insulin Potentiation Therapy*” in 1986.

At Contemporary Medicine, they refer to IPT as “*a kinder, gentler chemotherapy.*” Their goal is to provide the opportunity for individuals to incorporate nutrition and mind-body medicine into their cancer healing process. They also use intravenous Vitamin C therapy.

DR. NICHOLAS GONZALEZ

Location: New York City
Phone: (212) 213-3337
Website: www.dr-gonzalez.com

Dr. Nicholas Gonzalez has been investigating nutritional approaches to cancer and other degenerative diseases since 1981, and has been in practice in New York since 1987. Dr. Linda Isaacs has been working with Dr. Gonzalez in his research and practice since 1985. Doctors Gonzalez and Isaacs share their concept of treating cancer with Robert Beard (*a Scottish embryologist*) and William Donald Kelley (*a Texas orthodontist*) who developed a remarkably successful metabolic approach to treat cancer.

They use an individualized aggressive nutritional protocol to work with many types of cancer, specializing in pancreatic cancer. The Gonzalez program requires an aggressive number of daily supplements (130-160 *capsules*). The pancreatic enzymes (*central to the treatment*), vitamins, minerals, amino acids, and antioxidants are normally taken for 15 days, then flushed from the system for 5 days, and then started anew. Coffee enemas, liver flushes, and a whole-body purge with psyllium husks, which Dr. Gonzalez calls “*the clean sweep,*” are essential to the success of the program.

HEALTHQUARTERS MINISTRIES

Location: Colorado Springs, Colorado

Phone: (719) 593-8694

Website: www.healthquarters.org

HealthQuarters is run by Dr. David Frahm, who wrote the book A Cancer Battle Plan. They offer a 10 day detox retreat, as they believe proper nutrition heals the body at the cellular level, but before nutritional changes can be effective, detoxing the system must take place.

HealthQuarters is a Christian organization and there is a very strong spiritual aspect to their program. The “Heartbeat” of HealthQuarters Ministries is to help God’s people be healthy, both physically and spiritually, in order that they may more effectively serve Jesus Christ in His world. This is an awesome clinic, and Dr. Frahm is a wonderful Christian man.

NEVADA CENTER OF ALTERNATIVE & ANTI-AGING MEDICINE

Location: Carson City, Nevada

Phone: (775) 884-3990

Website: www.antiagingmedicine.com

The Nevada Center is a unique, state of the art, full service medical clinic, offering individualized cancer treatment programs. Dr. Frank Shallenberger has been practicing medicine for 25 years. He is one of only 16 physicians in Nevada that are licensed both in conventional medicine as well as Alternative and Homeopathic medicine. This allows him to integrate the best of both approaches for optimal results.

Dr. Shallenberger uses dietary manipulation, herbs, vitamins and minerals, homeopathy, detoxification, chelation therapy, ozone therapy, hydrogen peroxide, state-of-the-art IPT, and natural hormonal replacement in order to optimize the body’s innate ability

to heal itself. He is internationally recognized as a leading expert in the use of ozone therapy.

NEW HOPE MEDICAL CENTER

Location: Scottsdale, Arizona
Phone: (480) 473-9808
Website: www.newhopemedicalcenter.com

New Hope uses alternative methods to treat immune deficient illnesses such as cancer. Dr. Fredda Branyon, Dr. Mario Galaburri, and Dr. Ronald Peters all agree that a physician should never just treat the **symptoms** of the illness, but treat the individual as a whole. This is a wonderful philosophy of healing.

At New Hope, they focus on strengthening the immune system, since it is our first line of defense. They offer nutritional therapy, enzyme therapy, intravenous Vitamin C, ozone therapy, oxygen therapies, and colon therapy, just to name a few. New Hope is an out patient facility. Please call them and their complimentary concierge service will help you with your travel arrangements and hotel reservations.

OASIS OF HOPE

Location: Tijuana, Mexico
Phone: (888) 500-HOPE
Website: www.oasisofhope.com

The Oasis of Hope specializes in nutritional therapy as well as laetrile (vitamin B₁₇). One of the principal proponents of laetrile was Dr. Ernesto Contreras, who opened this clinic in 1963. Since that time, tens of thousands of American citizens with cancer have traveled to the Oasis of Hope for treatments that have been outlawed by the Cancer Industry in the United States. Today, Oasis of Hope is directed by his son, Dr. Francisco Contreras.

The Oasis of Hope employs a “super-strict” nutritional regimen along with laetrile therapy, all under the supervision of an

oncologist. They treat the whole patient, body, mind, and spirit. The Oasis approach is based on two fundamental principles: **1.** Do no harm to your patients (*Hippocrates*) and **2.** Love your patient as yourself (*Jesus Christ*).

Oasis of Hope is a high-tech medical facility that employs cutting-edge technology. Doctors have access to electronic medical files through a wireless LAN, which allows them to access patient records. Patients surf the web on broadband workstations and keep in touch with loved ones via digital telephone lines. The Oasis of Hope is comparable to the top hospitals in the United States.

RHYTHM OF LIFE COMPREHENSIVE CANCER CARE

Location: Mesa, Arizona
Phone: (480) 668-1448, (877) 668-1448
Website: www.rhythmoflife.com

Dr. Charles Schwengel is licensed as an Osteopathic Physician and Surgeon, as well as a Homeopathic Medical Doctor. This additional license is available in Arizona to physicians who wish to add the extra dimension of holistic medical treatments to their practices.

Being licensed as a Homeopathic Physician allows him to incorporate a much wider variety of advanced medical therapies that are commonly used around the world, but are less available in the USA.

Their cancer treatment protocols include IPT, heavy metal chelation therapy, detox, live cell analysis, and many more. Personally, they are a bit too “*new age*” for my taste, but they do offer excellent cancer treatments.

RENO INTEGRATIVE MEDICAL CENTER

Location: Reno, Nevada
Phone: (775) 829-1009
Website: www.renointegrative.com

Reno Integrative Medical Center is a treatment center for alternative medicine and research in cancer. Dr. Douglas Brodie used to run this clinic, but he died in 2005. Currently, Dr. Bob Eslinger, DO, HMD and Dr. David Holt, DO, HMD are the managing doctors.

At Reno Integrative Medical Center, they believe that cancer research, with some notable recent exceptions, has continued its research in the same basic direction for the last half century or more, seeking that elusive “magic bullet” through development of ever more toxic synthetic chemicals. They focus on restoring your body’s natural innate ability to defend itself. This is done by assisting your body in healing itself using alternative medicine and other therapies without attacking your body with harmful toxins.

Their cancer treatment protocols include homeopathy, oxidation therapy, heavy metal chelation therapy, German “new medicine,” and vitamin-mineral infusions. Their philosophy is to embrace many different treatment modalities, offering the best of both traditional and alternative approaches to health care.



STEP OUTSIDE THE BOX

APPENDIX 2

SPIRITUAL CANCER

“FOR GOD SO LOVED THE WORLD THAT HE GAVE HIS ONLY SON, THAT WHOEVER BELIEVES IN HIM SHALL NOT PERISH BUT HAVE ETERNAL LIFE.”

JOHN 3:16

*T*his book has been focused on *physical* cancer and the ways to cure it. I trust that the information contained herein will help you in your quest to get healthy, stay healthy, fend off cancer, and even cure your cancer. But even if you are able to cure your cancer and live a long, full life, the fact of the matter is that one day you will die. I know that is an uncomfortable subject with many people, but that is reality. **We will all die.** We are all **“terminal.”** There are **no exceptions.** The probability of death is 100%.

You see, *physical* cancer is not our biggest foe. The fact is that we were all born with **“spiritual cancer.”** Similar to physical cancer, if it is left untreated, spiritual cancer will certainly result in death. Not physical death but spiritual death...eternal death. But, **“What is spiritual cancer?”** you may ask. Spiritual cancer is **sin.** The Bible tells us that humanity became separated from God when Adam and Eve sinned by disobeying Him and eating of the fruit of the Tree of the Knowledge of Good and Evil (*the tree from which God had forbidden them to eat*). Humanity became separated from God because all people are descended from Adam. As a result, the sinful nature Adam acquired through his disobedience was passed down to all people, including you and me.

Because of this inherited “*sin nature*,” everyone sins. It comes naturally. It is part of the fabric of being human. I never had to teach either of my kiddos to sin or to be selfish – it came naturally. The book of Romans tells us that because of our sin, we are under God’s condemnation. The effect of sin on humans is that it extends to every part of our personality, our thinking, our emotions, and our will. This does **not** mean that we are as evil as we possibly can be, but it **does** mean that sin has extended to our entire being. The Bible tells us that we are born “*dead in our sins*.” I know that sin is not a popular concept today. It is considered old-fashioned and passé to say that someone is a sinner. But the Bible is clear – we are **ALL** sinners.

Sin is a cancer that infects all of us. And you either get the cancer, or the cancer will get you! The good news is that there is a cure for the spiritual cancer of sin! There is an antidote to sin and its deadly effects. You have probably seen it when you watch NFL football games on TV. You know, the “*wacko Christian*” dude in the end zone with the “**John 3:16**” sign. Have you ever read John 3:16? It states, “***For God so loved the world that He gave his only Son, that whoever believes in Him shall not perish but have eternal life.***”

Jesus provided the cure for our spiritual cancer by His atoning death on the cross for our sins. You see, Jesus was unique because He was born of a virgin by the Holy Spirit. He was not born of Adam’s seed as all other human beings are, thus He did not inherit a sinful nature. In other words, He did not have the tendency to sin as we all do. The Bible teaches that the payment for sin is death, and it also teaches that without the shedding of blood there can be no forgiveness of sin.

Jesus Christ died an excruciatingly terrible death on the cross. He was the perfect, unblemished Lamb of God, who paid the price for sin in order to end the separation between humanity and God. **He provided the cure for our spiritual cancer.** The **ONLY** cure. Unlike physical cancer, for which there are many cures, spiritual cancer has only one cure. Jesus says it Himself in John 14:6 “***I am the way, the truth, and the life. No man comes to the Father but through me.***” **Truth is by nature exclusive.** Consider the truth that 1 plus 1 equals only 2 and not any other number. The same exclusivity applies to

Jesus. All religions do **not** lead to God. If someone tells you that all roads lead to heaven, they are sadly mistaken. Trusting in Jesus Christ, the God-Man, as He is proclaimed in the Bible, is the **ONLY** way to inherit eternal life and to cure our spiritual sickness. It's not just me saying it... **Jesus said it Himself!**

Modern religions teach that Jesus' death on the cross was not enough to pay for all of our sins. They say that you must perform certain good works, certain rituals like water baptism, belong to a particular church, observe certain religious days, or make pilgrimages to "holy cities" in order to be saved. However, this is contrary to what the Bible teaches. Jesus, before He died said, "*It is finished.*" The Greek text uses the word "*tetelestai,*" which means "*paid in full.*" Jesus did all the works necessary to secure salvation for sinners **without their help**. He didn't pay for some sins and then require sinners to pay the remaining balance with certain rituals or with good works. Ephesians 2:8-9 says, "*For by grace you have been saved through faith; and that not of yourselves, it is the gift of God; not as a result of works, so that no one may boast.*"

When you confess your sins to God and trust in Jesus as your Savior and Lord, He forgives you eagerly, instantly, and completely. Romans 10:9-10 says: "*That if you confess with your mouth Jesus as Lord, and believe in your heart that God raised Him from the dead, you will be saved; for with the heart a person believes, resulting in righteousness, and with the mouth he confesses, resulting in salvation.*" Right now, Jesus is holding out His hands to you in invitation. **All are invited to come to Him. All are invited to repent and believe.** Jesus is the **ONLY** cure to your spiritual disease. You do not need to go to eternal punishment in hell for your sins. No matter where you have been or what you have done, come to Him and He will welcome you with open arms.

But make no mistake, time is of the essence. Do not say "*tomorrow I will come to Him.*" **Tomorrow may never come.** Isaiah 55:6-7 says, "*Seek the LORD while He may be found; call upon Him while He is near. Let the wicked forsake his way and the unrighteous man his thoughts; and let him return to the LORD, and He will have compassion on him, and to our God, for He will abundantly pardon.*" Do not postpone coming to Christ for what you think is a more convenient time, but

honestly confess your sins, repent of your sins, and believe in Christ **NOW**.

THIS NEXT SECTION IS ENTITLED “HE DIED FOR HIS PATIENTS.”
IT WAS WRITTEN BY WILLIAM PLUMER IN 1867.

“The whole head is hurt, and the whole heart is sick. You are sick from head to foot – covered with bruises, welts, and infected wounds!” (Isaiah 1:5-6) Often in Scripture, sin is spoken of as a disease, a sickness, a hurt. Christ, as the great Physician, has the only sovereign balm.

Sin is a **dreadful** disease! Yes, it is the very **worst** disease! It was the **first**, and so is the **oldest** malady. It infected man very soon after his creation. For six thousand years sin has committed its ravages and been gaining inveteracy. No other disease is so old. Sin is also a **universal** disease! Other maladies have slain their thousands; but sin has slain its millions! The whole world is a graveyard, full of death and corruption. No person ever lived without sin. As soon as we begin to live, we begin to transgress.

Sin makes men spiritually blind, and deaf, and dumb, and lame, and lethargic. Sin is a terrible compilation of diseases. It is a rottenness in the bones. It is a maddening fever, a wasting consumption, a paralysis of all the powers. Human nature is wholly corrupt! Sin is a **perpetual** disease. It rages day and night; on the sea and on the land; in the house of mirth and in the house of God. Sin is a **hereditary** disease. We are conceived in sin and brought forth in iniquity. Sin is also **contagious**. Sinners are enticers, seducers, corrupters.

Sin is also the most **deceitful** and **flattering** disease. One of its strong delusions is, “*You shall not die!*” See the throng of ungodly people marching to perdition – the slaves of Satan, the servants of corruption, the enemies of God! Their mirth would make one think them to be the happiest of people – and not, as they really are – condemned criminals, on their way to the eternal prison-house of inflexible justice! Sin has its delusive dreams. The worse a man is, the better he thinks himself to be.

Sin is the **worst** disease, because it is the parent of all other

diseases. But for sin, we would never have seen a human being in pain, or sicken, or die. Suffering and agony have one parent – sin! Other diseases are calamities – but sin is a **wickedness!** Sin is not a misfortune – sin is a crime! It is a wicked thing to be a sinner. Transgression brings guilt. God is angry with the wicked every day. The more sinful anyone is – the more is God displeased with him.

Sin is the most **loathsome** of all diseases. Pride is the worst kind of malady. No heart is so vile as a hard heart. No vileness compares with an evil heart of unbelief. No sight is so appalling as a sight of vile affections. Sin is horrible and abominable to God! Sin is also the most **dolorous** disease. They multiply their sorrows – who hasten after transgression. The most bitter cries that ever were heard – were extorted by sin.

Other diseases do but kill the body – but sin **kills soul and body in hell forever!** Sin will rage more violently beyond the tomb than on earth. It will be followed by eternal regrets and reproaches, eternal weeping and wailing, eternal wrath and anguish!

Sin **cannot be cured** by any means of human devising. All reformations can never cure the heart. *“I fast twice in the week, I give tithes of all that I possess,”* said the Pharisee – while spiritual wickedness reigned within. We may weep and lament over our sins – but that will neither dethrone sin nor atone for it! Our tears are nothing; our works are nothing; all our righteous deeds are as filthy rags; they are of no avail.

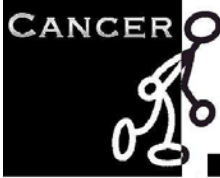
The **only remedy for sin** is found only in Jesus! He is the **Physician of souls**. None but He can cure a sin-sick soul. He makes no charge for all His cures! **He died for His patients!** His blood cleanses from all sin. With His stripes we are healed. Christ’s death atones. By His sufferings we have remission of sin. In all cases where it is applied, **the gospel remedy** is sovereign and effectual. It availed for the dying thief, for the bloody Saul of Tarsus, for the cruel jailor, and for millions and millions who once esteemed themselves as vile, and as worthy of everlasting death!

And now, poor, sin-sick, dying soul – flee to this Physician, submit

your case to Him, and seek for the healing remedy! If you stay away, you must die! **“The wages of sin is death.”**

“The blood of Jesus cleanses us from every sin!” 1 John 1:7





STEP OUTSIDE THE BOX

APPENDIX 3

THE VIC WHILEY STORY

THIS CHAPTER IS DEDICATED TO MY FRIEND, VIC WHILEY, A "KIWI" FROM NEW ZEALAND, WHO BEAT TERMINAL CANCER AND IS AN INSPIRATION TO ME AND TO EVERYONE HE MEETS.

The following story is the real life account of Vic Whiley, a man from New Zealand whom I have gotten to know via email and the internet. He was diagnosed with Stage IV cancer, a friend named Troy loaned him this book, he read it, chose one of the recommended treatments (*Vitamin B₁₇ via apricot and apple seeds*), and cured his cancer. **This is his story.**

INTRODUCTION

"Kia Ora" My name is Victor Whiley I am a sixty year old Maori New Zealander employed as a Registered Nurse on an Acute Inpatient Mental Health Unit. My battle with cancer started in February 2007 after a visit to the local G.P. (Doctor) for my usual 6 monthly medical type 2 diabetes checkup.

A few days later my G.P. rang and said he was referring me to the main hospital for an ultra sound x-ray as he was not happy with my blood test results. I asked my G.P. what he thought it could be and he replied that he suspected that I may have Lymphoma and I replied "you mean cancer of the lymph glands" he said "yes".

Then I thought cancer, what do I know about cancer, not a lot very little except people who got cancer died. At the time I had some very close friends and family who were having treatment for cancer and for most of them their prognosis was not good. One thing I do know is that people who smoked cigarettes were at risk of getting cancer. The advertisements read "*smoking kills*" and smoking causes cancer. I gave up smoking the day my G.P. told me he suspected I had Lymphoma. Further tests proved my G.P. to be correct.

TESTIMONIAL

The following testimonial is a true and accurate account of how I over came stage 4 cancer of the Lymph glands also known as Hodgkins or Non - Hodgkins Lymphoma. In my case my type of Lymphoma is called Follicular Lymphoma or cancer of the lymph nodes. Make no mistake any type of stage 4 cancer is serious it does not get any worse. Stage 4 cancer is often referred to as the "terminal stage" more like it's the end of the road rather than the road to recovery.

After I had the ultra sound x-ray my Haematologist Doctor Issa (*a kind and caring female doctor*) said I would need to have further blood tests, a CT scan, a lymph node biopsy, and a bone marrow biopsy. The early indications showed that I clearly had stage 1 Follicular Lymphoma. On the 7th February 07, I had a Lymph Node biopsy, then on the 13th February I had a CT scan and a week later I had a bone marrow biopsy.

The next 3 weeks my wife and I attended the funerals of my golf mate Manuel and my brother-in-law Colin both of them died from complications caused by cancer and not the cancer itself. We had just returned home from my brother-in-laws funeral when on the Tuesday Doctor Issa rang to say she would like to see me urgently. She said she was sorry to inform me that the results of all my tests showed I had Stage 4 cancer and needed to commence chemotherapy as soon as it could be arranged.

STAGE FOUR CANCER

I put the phone down my eye's welled up I said to my wife "Lex, the doctor wants to see me urgently, she say's I have got stage 4 cancer." At that moment the tears started to flow, Lex and I hugged each other and cried our eyes out, it was our sad time. It was like our life was about to crash and burn. I think it all came to a head with the death's from cancer of family, close friend's and loved one's. It was like I had been handed a death sentence.

A week later, I took sick leave from my place of employment and about this time a close work colleague Troy came to visit me. He had just returned from the funeral of his father who also had cancer. While we were talking Troy lent me a book on cancer titled Cancer - Step Outside the Box by Ty M. Bollinger. Over the next five months, this book was to have a profound impact on my cancer recovery. This book taught me a lot about cancer and more importantly about how to beat cancer.

As a nurse with over thirty years experience, I knew little about cancer but that was all about to change. I decided on my way to hospital for my first chemotherapy session that nothing but a very positive can do mental attitude was the way to go. I repeated to myself "seek and ye shall find", and "The lord helps those who help themselves".

These couple of mantras or sayings I repeated to myself many times over the next five months of my cancer treatment. I also believe in the power of your own mind to resolve issues and therefore mind power should never be under estimated. The use of your own imagination is another way of resolving issues.

Dreaming, visualization, and imagination are things we all do. It's like the title of the book, thinking outside the box or to as the title aptly says "Step Outside The Box." World champion golfers Tiger Woods of America and Greg Norman of Australia rarely play a shot without first going through their visualization skills of seeing the flight of the ball from start to finish.

I have a number of positive sayings, mantras, and jingles I recite all the time so that I am able to access my subconscious mind. The subconscious mind never lies and it has never let me down. The only requirement that is needed is self honesty because you will not fool your own subconscious mind. In America they refer to visualization and imagination as “magic thinking.” This is total garbage, rubbish I hope I never have to rely on magic to do my thinking for me.

THE LITTLE FRENCH BOY

About 10 years ago, I recall reading a true story about a little boy in a hospital in France who was dying from terminal lung cancer. Doctors had stopped his chemotherapy and had given him 2 weeks to live.

After the first week, doctors saw a marked improvement in the boy’s health. By the middle of the second week, puzzled doctors decided to have the boy under go a chest x-ray. The chest x-ray showed the boys lungs were clear the cancer had gone. Mystified the doctors asked the little boy had he done any thing different over the last 2 weeks.

The little boy told the doctors that every day and every night he would close his eyes tightly and asked his hero Luke Skywalker from the movie Star Wars to come down and shoot the evil aliens (*his cancer cells*) inside his body. The little boy said "*my friend Luke Skywalker did it doctor. My friend went bam, bam and killed the evil aliens in my lungs*". Dumbfounded the doctors had no choice but to believe the boy.

The story of this little boy inspired me over the years and he is always there in my thoughts, like my "*bro*s" that have passed away, they will be in my thoughts forever. I also visualized my deceased mate Manuel in a spiritual way.

So to stay positive, I would see his face, his big smile, his fist clenched punching the air and saying "*nice one bro*". Manuel and I had some good times on the golf course.

CHEMOTHERAPY

I started chemo therapy on 30th March 07. I was initially put on a trial to test a new drug Rutuximab, also known as MabThera. This drug apparently was a very good drug for my type of cancer according to my Haematologist, who had just returned from attending successful trials of this drug in America. After my first chemo session, follow up blood tests showed abnormal liver function results.

On 20th April 07, I had my 2nd chemo session and a blood test taken a week later showed my liver levels to be so high a decision by the liver specialist was taken for me to cease the chemo trial because of the risk of going into liver failure. A liver biopsy was ordered immediately. On the 21st May 07, I started on a new regime of chemo drugs namely Mitoxantrone and Fludarabine. With most chemo drugs there are side effects. My hair fell out so I had to wear a hair piece. I also had to take medication for gout, constipation, nausea, mouth ulcers, and chronic fatigue.

The chemo drugs affected my immune system. I was given antibiotics to guard against infection. I became like the boy in a bubble and stayed inside my home until my immune system improved. I was on toxic chemo drugs and then given more drugs to counter the side effects of the chemo drugs.

As a type 2 diabetic, the 2 chemo sessions I had just completed created havoc with my blood sugar levels and I ended up as being a type 1 insulin dependent diabetic. It required me to take massive doses of insulin injections to keep my blood sugar levels under control. Taking high doses of insulin was a blessing in disguise because insulin is the key that opens the doors of good cells and cancer cells and then enables the chemo drugs and the alternative medicines to enter and destroy the cancer cells.

APRICOT & APPLE SEEDS

The 21st May 07 is a significant date, because not only did I restart my chemo treatment but I also started an alternative herbal regime

(the old apricot and apple seeds recipe) mentioned in the book Cancer - Step Outside the Box. The book also mentions insulin therapy and lucky for me I was already on insulin.

On the 2nd June 07, I had a blood test taken and a week later it showed my liver was clear. The liver biopsy result showed the cancer had not got into my liver and my liver was back to normal. On the 8th June 07, my haematologist ordered another CT scan and I had commenced the second session of my new chemo therapy.

On the 29th June 07, I saw my haematologist again and my wife and I sat in that doctors office while she bought up the test results of my last CT scan on her computer screen. The comments from my 2nd CT scan stated there had been an excellent response to treatment. **My cancer had all but disappeared.** The extensive mass in the abdomen had reduced in size to about 2cm, pelvic appearances were normal, the left inguinal adenopathy had resolved, and lung bases were clear.

STAGE ONE

My Doctor turned to me and said "Victor your cancer has almost gone I think I will re-grade you back to stage 1; come let us go and tell the ward charge the good news." On our return home from hospital my wife and I shed a few more tears but this time they were tears of joy knowing that since we had done our homework (as per the book Cancer – Step Outside the Box). I was 90% on the road to a full recovery.

STAGE ZERO

On Monday 13th August 07, I commenced my 6th and final chemo treatment. Doctor Issa spoke to me during her ward round and said she was stopping my chemo and then she said "Victor you are now stage zero your cancer's gone and I am giving you a clean bill of health". "Thanks doctor" I replied. Then she said "Victor I will see you again in about 10 weeks for a follow up CT scan and a stem cell biopsy, we want to store your stem cells in case your cancer returns". As she

carried on with her ward round I looked at her and thought wow what a wonderful person she is. Her field of expertise is Lymphomas. As she was leaving the ward she said "Victor you are now officially in remission." I replied "thank you for everything doctor."

THE ALTERNATIVE TREATMENT

I decided to follow suggestions relating to herbal treatments as per the book Cancer - Step Outside the Box because I did not feel confident that chemotherapy was the answer, so I started the herbal process with a daily "body cleanse." I figured being Stage 4, I had nothing to lose and everything to gain.

In the mornings, I took twenty mls of Aloe Vera juice, then ten mls of prune juice on my weet-bix and I also drank copious amounts of mineral (spring) water as often as possible day and night. As well as the above I took apricot and apple seeds ground up and added to a freshly juiced drink of one apple, one orange and one carrot daily. To complete the herbal treatment I put myself on a strict diet and nutrition programme.

CONCLUSIONS

I used both conventional and alternative treatments to help me to beat my cancer and it proved to be a successful combination. However, **in retrospect**, the more I read about conventional treatment for cancer, the more I am convinced cancer patients and innocent caregivers are being "hoodwinked" and "ripped off" by big drug companies. It appears the almighty dollar or money is of more value than a person's life.

I think my testimonial would not be complete without mentioning cancer statistics. Over the last 50 years cancer survivors were shown to be in the 3% to 4 % range. Today's statistics show cancer survival rates to still be in the 3% to 4% range. What these statistics tell us is that nothing has changed in the delivery of conventional cancer treatments in over fifty years. It's like someone has pushed the

pause/stop button on conventional cancer treatment 50 years ago and it shows with the low cancer patient recovery numbers.

The low cancer survival figures are not a good read for cancer patient confidence. The cancer treatment record is conspicuous for its failures rather than its successes. Lack of progress means cancer treatments are set up more to fail rather than succeed.

Ty's book saved my life and when I hear the song "Stand by me," I think of him out there like a lighthouse battling away for us cancer sufferers.

"Kia Ora Tatou" and God Bless!



Vic Whiley
Cancer survivor
awhiley@xtra.co.nz



STEP OUTSIDE THE BOX

APPENDIX 4

DAVID VS. GOLIATH:

“THE FDA AND THE FTC ARE THE LEG-BREAKERS FOR THE PHARMACEUTICAL CARTELS.” –DR. GARY GLUM

JASON VALE & THE CANCER MAFIA

*M*y first experience with alternative cancer treatments was in 1997. My father had recently died, and I was determined to learn all I could about alternative treatments. I don’t remember exactly how, but I stumbled across some information about vitamin B₁₇ and ordered a video from Jason Vale, an arm wrestler who had cured his terminal cancer through eating apple seeds and apricot seeds.

After my wife and I watched the video, we were flabbergasted. The video contained the “Extra” TV show interview that spotlighted Jason’s miraculous recovery from cancer, and it also contained voluminous amounts of data about vitamin B₁₇ and its effects on cancer cells. This was the genesis of my crusade to learn and spread the word about alternative cancer treatments. It’s only fitting that twelve years later, I would finally get the opportunity to interview Jason. This entire chapter is the synopsis of a phone interview I did with Jason Vale on January 24, 2009.

Jason Vale, a highly articulate New Yorker, was diagnosed with terminal cancer when he was only eighteen. *“I had a rare type of*

cancer called Askin's tumor. At that time, there were only twenty recorded cases of this type of cancer, and no one had ever recovered. The death rate was 100%."

See the actual letter to Dr. Rabinowitz below.

BOOTH MEMORIAL RADIATION THERAPY ASSOC.
Booth Memorial Medical Center
Flushing, New York 11355
(718) 670-1500

JOHNT FAZEKAS, M.D.
DIRECTOR

NIKITAS KESSARIS, M.D.
RADIATION PHYSICIST

DAVID YEGA, M.D.
RADIATION ONCOLOGIST

October 6, 1986

Dr. Sidney Rabinowitz
43-70 Kissena Blvd.
Flushing, N.Y. 11355

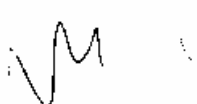
Re: Jason Vale

Dear Dr. Rabinowitz:

I had the pleasure of seeing this 18-year-old high school graduate soon to enter Stony Brook University, suffering from a "neuro-epithelioma of chest wall". His history began in the early summer of 1986 when he developed pain in the left chest with unexpected loss of weight, approximately 20 lbs. over a period of 10 weeks. He denies cough and hemoptysis which led to a chest X-ray, showing a density at the left lung base. This was felt to represent pneumonia and he received a course of antibiotics with subsequent chest X-ray showing no improvement of the basilar density. This led to a CT of the thorax on 8/8 showing a consolidation of fluid and atelectasis. A clinical diagnosis of empyema was made and it was recommended that this be surgically drained with a left thoracotomy done on 8/11/86. Review of this operative report indicates the presence of a large tumor mass, approximately 15 cm in width and 25 cm in length adherent to the chest wall and involving the anterior, mid, lateral, and part of the posterior wall. The mass was removed totally and the tissue was seen by several pathologists including Dr. Hadju of Memorial Sloan Kettering as well as Dr. Dickerson of Massachusetts General Hospital. The final diagnosis is a neuroepithelioma, certainly a very rare tumor, which in this case shows numerous mitoses, necrosis, and other signs of malignancy. I will perform a library research of the so-called Askin tumor with special emphasis on the possible role of radiotherapy. This patient was also seen in consultation by Dr. Sordillo of Memorial Sloan Kettering and I will speak with him personally as well as to obtain the return of Booth CAT scan and other pertinent X-rays. The patient has recovered well and I believe there are plans for chemotherapy following irradiation.

Past medical history is totally negative, except the patient states he has been having pain in his upper left back for about 2 years. Since he also plays hockey and is involved in frequent violent contact, this symptom has been attributed to trauma. He has regained

Continued.....



Page 2
 Re: Jason Vale

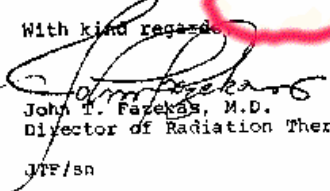
his weight and has no symptoms of bone pain, cough, or malaise, consistent with complete work-up including CT of abdomen, ultrasound of his testicles, bone scan, and laboratory evaluations, all of which are negative (with the exception of LDH elevated to 1094). Both alpha-fetoprotein and HCG determinations are also negative.

Physical exam reveals a pleasant and very healthy-appearing lad who looks his stated age of 18 and is in no apparent distress, totally recovered from his recent thoracotomy. His incision is beautifully healed and lung exam is normal, no nodes are palpable in the neck, and heart sounds are normal. A somewhat tender 1.5 cm left axillary node is appreciated today but this is probably of no clinical significance. On abdominal exam, the liver and spleen are nonpalpable and no masses are felt. No boney tenderness could be elicited except for some slight discomfort on palpating along his thoracotomy incision (as expected, the bone scan showed increased uptake along the site of thoracotomy).

IMPRESSION: Neuroepithelioma of chest wall (Askin tumor) with outside confirmation by Drs. Hadju and Dickerson.

RECOMMENDATION: I will continue to perform a search of the medical literature in order to define the potential role of radiotherapy in preventing local recurrence of this large neuroectodermal tumor and will adjust the dose and fields according to the total plan including whether he will be receiving Adriamycin or not. If long-term survival is a strong likelihood, then clearly the treatment regimen must be delivered in such a way as to avoid disabling complications related to the heart and underlying pulmonary tissues. Details as to exact plan, fields, and dosage will be forthcoming in a separate note. I have discovered several articles, including a section of the textbook by Dr. Hadju published in 1979 by the publisher Lee and Farber. The premier article appeared in Cancer, Vol. 43, #5, p. 2437, 1979 with 20 cases presented, most of whom received both radiotherapy and chemotherapy but with a uniform poor outcome and with essentially 100% mortality.

With kind regards,


 John T. Fazekas, M.D.
 Director of Radiation Therapy

JTF/sn

cc: Dr. Peter Sordillo
 55 E. 34 St.
 New York, N.Y. 10016

Dr. Fouad Lujam
 87-10 37 Avenue
 Jackson Heights, N.Y. 11372

Jason said that his mother didn't even show him the doctor's letter for a couple of months, since she was afraid of his reaction. But Jason told me that when he finally did see the letter, he wasn't afraid. He didn't worry. God had given him the peace that passes all understanding. "That alone was the victory" says Jason.

Jason had a huge tumor the size of a grapefruit between his back and ribs which was causing fluid in his lungs to build up. The surgeons removed the tumor. Although they recommended chemo and radiation, Jason decided not to undergo these treatments.

Jason said he immediately began to play hockey and handball again. However, within a year, he began to feel the same back pains he felt when he was first diagnosed. The cancer was back. Jason could hardly walk, as the tumor had now invaded his spinal cord. After a CAT scan revealed that the tumor was “*bigger and better than ever,*” they operated immediately.

Jason then opted to do both chemo and radiation, despite the fact that the doctors were a little hesitant to do so because the toxicity level from the chemo would be multiplied by the radiation. Within a couple of months, he had lost forty pounds and was near death. If it weren't for the fact that he was such a physical specimen, he would have died from the treatments. However, with his background as an arm wrestler and also with his young age (*only nineteen*), Jason survived.

He knew that something needed to be done. According to Jason, “*...it was then that I changed all of the foods that I ate without even realizing it. The chemotherapy made me so sick that I would nearly throw up at the smell of my old favorites, like Chinese food, Kentucky Fried Chicken, and pizza.*” So Jason began to “clean up” his diet.

When Jason was about twenty-five years old, it was discovered that he had a malignant tumor in his kidney. Jason said he felt like “*it was about to start all over again.*” When he went to the kidney specialist, he was told that he needed to have his kidney removed. The more questions Jason asked him, the more aggravated he became. Jason walked out of his office right before he was scheduled to have surgery, and he never went back.

Through God's providence, a friend from church, Bill DePap, gave Jason the videotape “*World Without Cancer.*” When the pastor told him to “*take it with a grain of salt*” since the man was a bit “*eccentric,*” this made Jason even more intrigued. This video documents the fact that Vitamin B₁₇ kills cancer cells. Jason said that

when the video ended, he was dumbfounded and knew this was the answer. That very night, he went to the grocery store to buy peaches and get their pits. He began to buy cases and cases of apples just to get to their seeds. The seeds, filled with vitamin B₁₇, were curing his cancer. At one point, Jason was eating the seeds of twenty to thirty apples per day. According to Jason, *“I would take out the seeds and throw away the apples. Mom would get the apples out of the trash and make apple pie.”* What a great mother!

He also believes in the power of prayer. *“My church began a one month prayer chain where every half hour someone new was praying for victory in the situation. Every half hour 24 hours a day someone new in my congregation was praying.”*

If you look back at page 157, you will be able to refresh yourself on the actual cancer killing mechanism of vitamin B₁₇, which is truly remarkable. According to Jason, *“...as I ate cyanide filled seeds, the cancer dissipated from my body.”* The effectiveness of vitamin B₁₇ in curing cancer is astonishing! According to Dr. Dean Burk, former head of the National Cancer Institute’s cell chemistry section, *“...when we add vitamin B₁₇ to a cancer culture under the microscope (providing the enzyme glucosidase also is present), we can see the cancer cells dying off like flies!”*

Jason reached national prominence when he appeared on the television show “Extra” as the arm wrestler self-cured of cancer with apricot kernels, provoking a response so great that the episode was run a second time. Immediately, Jason set up a website (www.apricotsfromGod.info) and began to supply people with apricot seeds and an information video through his company, Christian Brothers. Over the next few years, literally thousands of cancer survivors emailed Jason with their B₁₇ success stories.

Now, we all know that the FDA is nothing more than a den of thieves, legalized mobsters, a gang of thugs, who don’t care about people’s health but only care about protecting Big Pharma’s cash cow. Jason was quickly becoming a threat to the Cancer Industry. Since Big Pharma is unable to patent or claim exclusive rights to vitamin B₁₇ (*as it is derived from a natural source*), they have launched attacks of unprecedented vicious propaganda against B₁₇

despite the overwhelming proof of its effectiveness in controlling all forms of cancer.

His problems began Oct. 28, 1998, when the FDA sent him a three-page “warning letter” concerning his “promotion and distribution of the unapproved drug Laetrile in the form of ... ‘apricot seeds’, ‘vitamin B₁₇ tablets’ and ‘amygdalina’ ampoules.” The letter stated that the “labeling for these products make[s] therapeutic claims which cause the products to be drugs as defined in Section 201 (g) of the Federal Food, Drug and Act ...”

Jason eventually signed an injunction that he wouldn’t promote



apricot seeds as a cancer “cure.” He never signed any document stating he would quit selling apricot seeds altogether. All in all, Jason had over 28,000 customers worldwide. In the midst of all this turmoil, Jason went on to become the arm wrestling World Champion in 1999.

Eventually, without even one customer complaint in ten years, the FDA came in and seized apricot seeds and computers and brought Jason to criminal court for promoting this natural answer to cancer. The Cancer Mafia was doing their best to make an example of Jason. Bail was set at ... not \$5,000 ... not \$25,000 ... not even \$100,000. **Jason’s bail was \$800,000!** In the summer of 2002, Jason’s family had to put liens on their properties to pay the bail that was placed on him pending his trial.

The judge at his trial was John Gleeson, who was the prosecutor at the John Gotti trial. Being a competitor through and through, a “rule-oriented” guy (*in his own words*), and being principled on honesty and integrity, Jason said that he thought the judge would be fair. “*I trusted the judge since I thought he was smart...I thought he would go against the grain...but I was wrong. He sold out...he cheated...he wasn’t fair.*” At the trial, Gleeson arrogantly declared

that the injunction stipulated that Jason couldn't sell apricot seeds, despite the fact that is NOT what the injunction said. When Jason tried to explain to Gleeson what the injunction stipulated, Gleeson said “take it to the appeals court.”

On July 14, 2003, Jason lost his Constitutional Rights to be able to continue to tell his story of how he defeated cancer with apricot and apple seeds. He was sentenced to sixty-three months in the New York State Penn. This is truly amazing if you think about it. We have pedophiles, rapists, murderers, and drug dealers walking the streets, but if you sell a natural cure for cancer, you're going to jail. Is this America?

While in prison, Jason said that he spent almost a year in “the hole” (i.e. *solitary confinement*) for “silly stuff” ... like not making his bed properly or having too many booklets of stamps. He said he spent four months in the hole for getting into a fight with three inmates who wanted to watch “rap” videos on TV, but Jason wanted to watch American Idol. Let's just say the three inmates ended up in the infirmary. I guess they didn't realize Jason is a martial arts expert.

And his mother (*God bless her*) would sneak him apricot seeds when she came to visit. She would put them in mixed nuts bags, since they look just like almonds. He said he would sit there talking to his mom and eating the “*contraband*” apricot seeds, helping to keep his cancer at bay, right in front of the guards.

After almost five years in prison, Jason was released from prison on April 15, 2008. According to Jason, “it was the greatest day of my life.” Jason is currently petitioning FDA to allow him to sell apricot seeds without any “claims.” It's a sad state of affairs when you must get official FDA “approval” to sell apricot seeds, isn't it?

Of course, vitamin B₁₇ is only “*dangerous*” to the parasitic FDA officials whose salaries are funded by American taxpayers and to Big Pharma who hires and plants FDA officials and makes billions of dollars every year killing over **one hundred thousand** Americans with their man-made poisons.

Let's be honest here. The FDA is nothing more than a bunch of “hit men” for the Cancer Mafia and is in a state of treason toward “we the people.” When it comes to health fraud, the FDA is the biggest culprit.

Nevertheless, Jason is a free man! When I asked him what he was going to do now that he's free, Jason said that Brooklyn Queens Experiment (*a production company*) has purchased the movie rights for the Jason Vale Story – a major motion picture based on Jason's life. I don't know about you, but I can't wait to see the movie!!

Best wishes Jason! Fighting the FDA might have seemed like David vs. Goliath, but you're a GIANT in my book!



Jason Vale – taken January 2009
www.apricotsfromgod.info



STEP OUTSIDE THE BOX

GLOSSARY

Acetogenins – long chains of carbon atoms found in Paw Paw and Graviola which effectively reduce the growth of blood vessels that nourish cancer cells, inhibit the growth of M.D.R cells, and also reduce the production of ATP in the mitochondria

Acidic – having a low pH.

Acrylamides – carcinogenic chemical formed by the heating of starches; found in donuts, french fries, chips, etc.

Aerobic – “with oxygen”

Aerobic Respiration – the process of creating energy “with oxygen”; also referred to as “aerobic metabolism”

Alkaline – having a high pH

Allopathic – “conventional” medicine

Amalgam – Mercury fillings

Amylase – digestive enzyme that breaks down carbohydrates

Anaerobic – “without oxygen”

Anaerobic Respiration – the process of creating energy “without oxygen”; also referred to as “anaerobic metabolism”

Angiogenesis – the physiological process involving the growth of new blood vessels from pre-existing vessels

Antibiotics – drugs that fight infections

Antioxidants – chemical compounds or substances that inhibit oxidation

Antineoplastic – inhibiting or preventing the growth or development of cancer cells

Apoptosis – programmed cell death

ATP – “Adenosine triphosphate” – the “energy currency” of cells

Basal Cell Carcinoma – skin cancer that begins in the deep basal cell layer of the epidermis

Big 3 – surgery, chemotherapy, and radiation

Cachexia – the “wasting” cycle of many cancer patients

Carcinogen – a cancer-causing substance or agent

Cell Fibers – the “muscles” of our cells

Cell Membrane – the “skin” of our cells

Chelation – the process of removing a heavy metal from the bloodstream by means of a chelating agent (such as chlorella or cilantro)

Chlorophyll – a group of related green pigments that convert light energy into ATP and other forms of energy needed for biochemical processes; found in green plants, brown and red algae, and certain aerobic and anaerobic bacteria

Co-Enzymes – an organic substance that usually contains a vitamin or mineral and combines with a specific protein to form an active enzyme system

Collagen – the fibrous protein “cement” that holds our bones, cartilage, tendons, and connective tissue, and cells together

Conjugated Linoleic Acid (CLA) – naturally occurring free fatty acid found mainly in grass-fed meats and dairy products; builds muscle and reduces body fat.

Cytokines – “messenger cells” such as interferons and interleukins which set off a cascade reaction of positive changes throughout the immune system

Cytoplasm – the jelly-like outer part of a cell

Dioxin – any of several carcinogenic chemicals that occur as impurities in petroleum-derived herbicides

DMSO – “dimethyl sulfoxide”; a non-toxic, 100% natural product that comes from the wood industry

DNA – “deoxyribonucleic acid”; carries the cell’s genetic information and hereditary characteristics via its nucleotides and their sequence; capable of self-replication and RNA synthesis

EDTA Chelation – a therapy by which repeated administrations of a weak synthetic amino acid (EDTA, ethylenediamine tetra-acetic acid) gradually reduce atherosclerotic plaque and other heavy metal deposits throughout the cardiovascular system by literally dissolving them away.

EFAs – essential fatty acids

Electron – an elementary particle with a negative charge

Electron Transport Chain – the final stage of the Krebs Cycle

Enzymes – any of numerous proteins or conjugated proteins produced by living organisms and functioning as biochemical catalysts

Epidermis – the outer layer of skin

Eukaryotic Cell – a cell with a nucleus and organelles

Excitotoxins – substances, usually amino acids, that react with specialized receptors (neurons) in the brain in such a way as to lead to destruction of certain types of brain cells, i.e. *MSG and Aspartame*

Fasciolopsis Buski – a fluke that is parasitic on humans and swine

Free Radical – an atom or group of atoms that has at least one unpaired electron and is therefore unstable and highly reactive; damages cells and accelerates the progression of cancer and other diseases

Gluconeogenesis – the formation of glucose, especially by the liver, from noncarbohydrate sources, such as amino acids and the glycerol portion of fats

Glucose – A monosaccharide sugar the blood that serves as the major energy source of the body; it occurs in most plant and animal tissue. Also called *blood sugar*

Glyconutrients – around 200 naturally occurring biologically active plant monosaccharide sugars; researchers have identified a small group of 8 essential glyconutrients, which includes *glucose, galactose, mannose, fucose, xylose, N-acetylglucosamine, N-acetylgalactosamine, and N-acetylneuraminic acid*

Golgi Body – a net-like structure in the cell's cytoplasm which stores ATP

Glycogen - a polysaccharide that is the main form of carbohydrate storage in animals and occurs mainly in liver and muscle tissue; it is readily converted to glucose; also called *animal starch*

HCAs – “heterocyclic amines”; carcinogenic substances formed by cooking any meat, beef, lamb, pork, fowl, and even fish, at high temperatures

HCG – “human chorionic gonadotropin”; a hormone produced by the placenta that maintains the corpus luteum during pregnancy

HDL Cholesterol – “high-density lipoprotein”; also referred to as “Good Cholesterol”

Hemoglobin – red blood cells; the red respiratory protein of red blood cells that transports oxygen from the lungs to the tissues, where the oxygen is readily released

Hydrogenation – the addition of hydrogen to a compound, especially to solidify an unsaturated fat or fatty acid

Hydrolysis – the decomposition of a chemical compound by reaction with water

Hypoxia – lack of oxygen

Immune System – the bodily system that protects the body from foreign substances, cells, and tissues by producing the immune response and that includes especially the thymus, spleen, lymph nodes, lymphocytes including the B cells and T cells, and antibodies

Insulin – a hormone secreted by the pancreas which regulates the metabolism of carbohydrates and fats, especially the conversion of glucose to glycogen, which lowers the blood glucose level

Krebs Cycle – the cycle of creating energy within our cells; also called *citric acid cycle*

Lauric Acid – a fatty acid obtained chiefly from coconut oil

Leukocytes – white blood cells; engulf and digest bacteria and fungi; an important part of the body’s defense system

Lipids – fats

LDL Cholesterol – “low-density lipoprotein”; also referred to as “Bad Cholesterol”

Lypase – digestive enzyme that breaks down lipids

Melanocytes – cells that produce the pigment melanin that colors our skin, hair, and eyes and is heavily concentrated in most moles.

Melanoma– the most serious form of skin cancer; a malignant tumor that originates in melanocytes

Melatonin – a hormone produced from the amino acid tryptophan by the pineal gland; causes you to get sleepy when it's dark

Microbe – a microorganism, especially a bacterium that causes disease

Mitochondria – “cellular power plant”; an organelle in the cytoplasm of nearly all eukaryotic cells containing genetic material and many enzymes important for cell metabolism and energy creation

Monosaccharide – any of several carbohydrates that cannot be broken down to simpler sugars, i.e. *simple sugar*

Monounsaturated – of or relating to an organic compound, especially an oil or fatty acid, containing only one double or triple bond per molecule; monounsaturated fats decrease the amount of LDL cholesterol in the blood and include olive and avocado oils

MSM – “methyl sulfonyl methane”; basically DMSO with an additional oxygen atom attached to the sulfur atom

Mycotoxins – fungal toxins

Neoplasm– an abnormal new growth of tissue; a tumor

Neurons – nerve cells

Nitrosamines – carcinogenic substances produced by the blackening and burning of meat and especially fat

Nucleotide – the basic component of DNA and RNA

Omega-3 Fatty Acids – polyunsaturated fatty acids that are found especially in fish, fish oils, vegetable oils, and green leafy vegetables; also called **alpha-linolenic acid (ALA)**

Omega-6 Fatty Acids – polyunsaturated fatty acids that are found especially in nuts and grains; also called linoleic acids (LA)

Oncologist – a cancer doctor

Organelle – a differentiated structure within a cell that performs a specific function

Orthomolecular – the theory that diseases can be cured by restoring the optimum amounts of substances normally present in the body

Oxidation – the addition of oxygen to a compound with a loss of electrons

P53 – protein that is the product of a tumor suppressor gene, regulates cell growth and proliferation, and prevents unrestrained cell division after chromosomal damage; the absence of p53 as a result of a gene mutation increases the risk of developing various cancer

Pathogenic – capable of causing disease

PH Balance – the acid/alkaline balance in our body

Pleomorphic – having many forms

Polysaccharide – any of a class of carbohydrates whose molecules contain chains of monosaccharides

Probiotics – “good bacteria”; live microbial supplements which improve intestinal balance

Prokaryotic cell – a cell (*such as a bacteria*) which lacks a nucleus

Protease – digestive enzyme that breaks down proteins

Proton – an elementary particle with a positive charge

Protoplasm – the complex substance that constitutes the living matter of plant and animal cells; composed of proteins and fats; includes the nucleus and cytoplasm

rBGH – “recombinant bovine growth hormone”

Redox – oxidation-reduction

RNA – “ribonucleic acid”; transmits genetic information from DNA to the cytoplasm and controls certain chemical processes in the cell

Sesquioxide – an oxide containing three atoms of oxygen with two atoms (or radicals) of some other substance

Sodium Bicarbonate – baking soda; NaHCO_3

Sodium Nitrite – carcinogenic substance used to preserve and color food especially in meat and fish products

Squamous Cell Carcinoma – skin cancer that begins in the squamous cells of the epidermis; more aggressive than basal cell carcinoma

Trans-Fats – “pseudo-fats” which are produced by the partial hydrogenation of vegetable oils; present in hardened vegetable oils, most margarines, commercial baked foods, and many fried foods; known to increase the risk of cancer

Trophoblasts – cells that attach the fertilized ovum to the uterine wall and serve as a nutritive pathway for the embryo

Turmeric – spice that contains curcumin; has multiple anti-carcinogenic effects when consumed

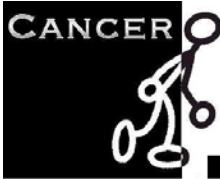
Vitamin B₁₇ – also called laetrile, amygdalin, or nitrilosides; includes a large group of water-soluble, non-toxic, compounds found in over 800 plants, many of which are edible; selectively toxic to cancer cells

Xenoestrogens – “foreign” estrogens; have been “altered” and act like free radicals in the body; shown to cause various types of cancer

Zeolites – natural volcanic minerals with a unique, complex crystalline structure



One of my favorite pictures of baby Tabitha with her Mommy taken in 2006



STEP OUTSIDE THE BOX

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