



## Cure Your Cancer

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# PREFACE



Hi. My name is Bill Henderson. About 10 years ago, in November 1990, my former wife, Marjorie began her **four-year bout** with cancer. She died on November 1, 1994. Her many operations, chemotherapy treatments and intense pain made her wish often in her last two years for a quick death, or “transition,” as she called it.

After watching that, it was hard for me to believe that millions of people each year had to endure that same **torture**. I have read widely in these ten years, searching for an alternative. **I have found many.**

This e-book is the result of my search. Not only have I found more humane and effective treatments for cancer, I have discovered that our medical system is **dominated by big drug company money**. Instead of pursuing the research into natural substances and therapies that seem to have **great promise** and which have, in fact, **cured cancer** for thousands of grateful patients, our system **suppresses** them.

With better information, I know cancer patients and their caregivers can work more effectively with their physicians to cure their diseases **permanently**. Also, those of us who don't have cancer yet can **avoid** it and other degenerative diseases.

With the **deluge** of information available today on the Internet, you need a guide to help you sift through it. My goal is to help you **co-doctor effectively** so you and your loved ones don't become victims of the “system,” as my wife, Marjorie, was.

My background is in computer software and marketing. After retiring from the U. S. Air Force in 1977, I founded a software company that sold specialized software to architects and engineers. It was the first of its kind in the world. We had clients in 42 states and 4 Canadian provinces. I sold that company in 1995.

In addition to my medical research, I have tried several Internet ventures, with some success, in the last three years. I have a Masters in Business Administration from George Washington University. I am an entrepreneur at heart.

This book, however, is a true **labor of love**. I know how much it can help you, if you will **trust me** and keep an **open mind**. I was 69 in January 2001. My family and I have probably dealt with over 200 doctors and at least 10 of them have been close friends. In the last 10 years, I have had several encounters with the medical system.

In 1992, I met Joe Davis, M.D. He started me on a workout plan that I have continued ever since. He also convinced me of the importance of proper nutrition. He founded several “fitness centers” called Ultra-Fit here in San Antonio.

In 1996, I had radial keratotomy done on one eye and laser correction on the other. In 1997, I had torn retinas repaired in both eyes. My vision is better now than ever before in my life. I had a hernia in my groin repaired very professionally in 1998. I had my sinuses cleaned out in 1999, which completely cured my chronic sinusitis. The doctor said she stopped counting when she got to **104 polyps removed**.

Like most men my age, I have an enlarged prostate gland. Two wonderful urologists have treated me for the last 17 years. In the last ten years, they have done four biopsies on my prostate, all of which were negative.

I feel much better physically now in every way than I did **forty years ago**. The picture above was taken during a visit to Ibiza, Spain in 1998.

I mention my recent medical experience only to emphasize to you that I am **anything but anti-doctor**.

When you purchase the entire e-book “Cure Your Cancer” you will receive with it four BONUS “booklets. Their titles are:

“Stop Your Aging With Diet”  
“Stop Your Aging With Exercise”  
“Beating Diabetes”  
and “Cure Your Back Pain”

The Table of Contents is interactive. That just means that you can click on a Table of Contents entry with your mouse and it will jump to that portion. This is an advantage of reading the book on the computer

screen. Of course, you may elect to print it on your computer printer at any time. This “sampler” version is **only 34 pages**. The complete book with the Bonus booklets is **145 pages**.

You will notice the words “**Error-Bookmark not defined**” in the Table of Contents starting at Chapter 2. That just means that when Adobe Acrobat was assembling this sampler it couldn't find those pages. You know computers – picky, picky, picky! Anyway, you can get a good idea of the content of the rest of the book and the Bonus booklets by looking at the Table of Contents.

I have avoided using footnotes in this book. It is not a scholarly work for researchers. It is a “how-to” book for people with cancer or who have relatives or friends with cancer. The sources I have used can be found in Appendix A, along with a list of many other resources. The resources include **on-line** guides to doctors and clinics where you can get a second (or third) opinion. As you will see, finding a doctor whose approach to your therapy is compatible with yours is **vital**.

Anytime you are ready to buy the complete book and the **four bonus booklets**, just [click here](#). You will be taken to the website where you can download the complete version for just \$14.95. There is no tax or shipping charge.

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

*The author of this book is a researcher and writer, not a physician. The facts presented in the following pages are offered as information only, not medical advice. Their purpose is to create the basis for informed consent. Although there is much that each of us can do in the area of prevention, self-treatment for clinical cancer, diabetes and back problems is not advised. The administration of therapy for these maladies, including nutritional therapy, should be under the supervision of health-care professionals who are specialists in their fields.*

# CURE YOUR CANCER

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## CHAPTER 1

### INTRODUCTION – UNDERSTANDING CANCER

*"If you have health, you have hope. If you have hope, you have everything."*  
Arabian proverb.

I am **thrilled** with the prospect of being able to help you cure your cancer or that of your loved ones.

The word cancer in your diagnosis **always** creates fear. You must accept this and vow to fight it. A cancer diagnosis is **not a death notice**.

#### An Instant Survivor Hot Line

Here's a Cancer Hot Line for you to call **right now**. It is **(800) 433-0464**.

Richard Bloch, a cancer survivor and co-founder of the tax-preparation firm, H & R BLOCK, INC, founded this Hot Line. In 1978, Bloch was diagnosed with terminal lung cancer and given three months to live. He is still alive and well 23 years later.

The above Hot Line connects you to a volunteer group of cancer patients who take phone calls from newly diagnosed cancer patients. Call them **now**.

Many cancer patients find support groups especially helpful. It certainly doesn't hurt to meet people who were given death sentences 10 years ago...and **are still alive**.

Now that you have a "lifeline" to another cancer patient, let's talk about **co-doctoring**, the main theme of this book

#### What is Co-doctoring?

Do you believe you have to co-doctor with your physician? So do I. Look at this as a "**How To**" **book** on co-doctoring.

First, you must understand the **causes** of cancer. Then, you can intelligently evaluate treatment options. Sensible cancer treatment involves treating the causes, **not just the symptoms**.

But you can't do this on your own. To treat cancer, you must be **tested often** to tell if the treatment is working. "Do it yourself" and you are almost certainly going

to die of your cancer. Learn to co-doctor and you have a good chance to **regain complete health**.

In other words, if you think your oncologist (cancer doctor) has all the answers, then you are **wasting your time** reading this book.

### Two Brief Examples

Let me tell you two brief anecdotes. A friend is hale and hearty today, because she listened to me and **took the natural substance** I bought for her. She was nearly dead after over two years of chemotherapy for her metastasized breast cancer. She started on the substance in October 1998 and **was well** (according to her oncologist) by December 1998. She is still not only well but she dances flamenco every Friday and Saturday night at a local Spanish bistro --- **and she still smokes**. Details are in Chapter 2.

Another doctor (radiologist) friend got a terminal diagnosis of metastasized melanoma (a form of skin cancer) just as I was finishing the first draft of this book in October 2000. He **stubbornly refused** to take anything his oncologist didn't recommend. He wouldn't even read this book. Three weeks later, he was dead.

Either of these people could be you or your loved one. Cancer cures are **available**. They are **non-toxic**. They are made from **natural substances**. They **do not destroy** your quality of life. They work on almost **all kinds of cancer**.

Why should you believe me? Well, first because I'm **not selling anything** (except this e-book and my continuing newsletter service, which you've already bought). And second because your only other choice is to **remain in "the system,"** like my radiologist friend.

### Don't Fire Your Doctor -- Yet

As an informed consumer of medical service, you will be **empowered**. When the doctor's advice tracks with your knowledge, you'll **confidently accept** his/her treatment. When you need to, you will intelligently opt to **seek a second opinion**.

Unless your doctor is constantly studying microbiology, neurology, endocrinology, nutrition, immunology, alternative medicine and lots more disciplines, he/she is **not fully qualified** to advise you on beating your cancer. No human being can read and evaluate all the information currently available.

Put yourself in your doctor's shoes. Daily several drug salesmen **bombard** her, each leaving her free samples. A Health Maintenance Organization (HMO) is looking over her shoulder, **criticizing** every diagnosis, every test. **Attorneys** await her least slip or recommendation of "unusual" treatment, misdiagnosis or prescription of the wrong drug. She is more and more **narrowly specialized**. Even keeping up with the **explosion** of information in her own specialty is virtually impossible because of the demands of patient care on her time.

Is it any wonder that 51% of doctors in a recent large survey said they **would not go into medicine again** and 65% said they would **not recommend it to their children** as a career.

Even if they weren't so busy, there are very few doctors who **understand** the relations between lifestyle, environment and disease. For the most part, this knowledge can only be gained by a search **covering many disciplines**. Precisely the search I have been engaged in for the last 10 years.

I'm not offering medical advice. I'm not qualified to do that. Nothing you read here should be accepted as **medical opinion**. However, I think I am qualified to offer you **information you may be unaware of** -- information which will help you cooperate better with your doctor to **heal** your or your loved one's cancer.

### **Get An Advocate**

If you have been diagnosed with cancer, you need to find your closest friend or relative and ask them to **be your advocate**. Cancer evokes emotions in almost everyone that are **hard to deal with**. You naturally fear for your life, you fear disability possibly **even more**. You are quickly exposed to confusing terms and **advice of all types** from well-meaning sources.

When your friend or loved one who is a cancer patient asks you to be their advocate, **accept gratefully**. There is no more spiritually fulfilling and uplifting role in this world.

Your service will quite possibly **save your relative or loved one's life**. It most certainly will help him or her **avoid the drastic damage** done to their lifestyle and well being by the cancer "system."

Let this book be your guide to use every resource available to help your loved one.

### It's Not All "Alternative"

This book will feature knowledge from **many M.D.s**. Most of them have broken the mold of the doctor who is concerned only with **treating symptoms** and curing disease. They have done unique research resulting in **breakthrough knowledge** about understanding the **causes** of cancer and treating them.

Equating the white jacket and stethoscope of the M.D. with **God-like knowledge** is nothing new. For thousands of years, people have entrusted their health care to the man or woman in the white jacket with the stethoscope around their neck.

Now we know better. With the help of the "**information explosion**" caused by the Internet, we are able to **co-doctor** as never before. The weak physicians decry this as a potential threat of "a little knowledge is a dangerous thing" and dismiss the cures we'll discuss as "**quackery**." The strong doctors welcome it.

### "Unproven Remedies"

In the past 70 years, at least **35 cures** for cancer have been discovered. You will find information on all of these in Chapters 2 and 3. Would it surprise you to know that **every one of these 35** is currently on the "Unproven Remedies" list maintained by the American Cancer Society (ACS)?

Doesn't it seem logical that **at least one** of these would have been thoroughly researched and investigated and found to have **some** use for at least **some** cancer sufferers? Isn't it mind-boggling that **every single one** is still labeled "unproven," in spite of the lapse of **decades** since their discovery?

But it's worse. Not only has our **cancer "system"** failed to prove and endorse these cures, the discoverers (most of them reputable M.D.s and researchers) have been **hounded** with lawsuits, license suspension and even jail sentences for treating cancer patients.

What do these cures have in common? **Only one thing**. None of them can be **patented** and sold through the "standard" distribution system monitored by our Food and Drug Administration (FDA).

And yet, the U.S. alone has spent **thousands** of man-years and over **fifty billion dollars** on cancer research just since the "War on Cancer" began in 1974. What's going on here?

## Drug Company \$\$\$\$

You can only understand the cancer treatment “system” in this country if you understand how much **power** the drug companies wield in our culture. Drugs used in cancer treatment are **all** produced and sold as “**chemotherapy.**” What this means is that synthetic drugs must be compounded, and run through years (typically about **10 years**) of testing. This process costs about **\$200 million.**

Gene therapy and immune system vaccines are being researched now. They, too must be tested through this **enormously expensive** system. No natural remedies need apply. They cannot be patented; ergo they can't get FDA approval.

Why not let “natural” remedies **co-exist** so people can make their own choices? That would seem logical, but there are Federal and State laws that **prohibit** this. Currently, under Federal law, **no natural substance** can be advertised as a cure for **any** condition – period. In California, for example, if you or I advertise for sale any remedy for cancer that does not involve surgery, radiation or chemotherapy, we can be **put in jail.**

## Drug Marketing

The marketing of toxic drugs lies at the heart of the “war on cancer.” For example, in one study, the **cost of drugs** was 55 percent of total treatment cost for small-cell lung cancer.

One company, Bristol-Myers-Squibb, spends more than **one billion dollars** per year on research and employs 4,000 scientists and support personnel. It holds patents on **more than a dozen drugs** approved by the FDA for the treatment of cancer; this accounts for **almost half** of the chemotherapy sales in the world.

Bristol-Myers-Squibb also **creatively influences** cancer research. It gives out awards, lectures and grants of many kinds. It pays for updates to orthodox cancer textbooks, and **supports research** and “**data management**” of clinical studies on its patented agents. Other cancer drug companies do the same.

Memorial Sloan-Kettering Cancer Center (MSKCC) in New York City is at the forefront of cancer research and has been for **at least the last 30 years.** Drug companies, again with Bristol-Myers-Squibb in the forefront, occupy a **very strong position** at Memorial Sloan-Kettering. At one time, in 1995, for example:

- James D. Robinson III, the **Chairman** of the MSKCC **Board of Overseers and Managers**, was a **director of Bristol-Myers Squibb.**

- Richard L. Gelb, **Vice-Chairman** of the MSKCC board, was **chairman of the board of Bristol-Myers Squibb**.
- Richard M. Furland, MSKCC **board member**, retired in 1994 as the **president of Bristol-Myers Squibb**. He has also been a director of the Pharmaceutical Manufacturers Association.
- Benno C. Schmidt, **Honorary co-chairman** of MSKCC, was the **founder and board member of Genetics Institute**, a Massachusetts-based company that manufactures drugs for the cancer marketplace. He was also a **director of Gilead Sciences (which makes cancer-related drugs); Matrix and Vertex Pharmaceuticals**. He received the Bristol-Myers Squibb Award for distinguished service to cancer research in 1979.
- Paul A. Marks, M.D., the **President and CEO** of MSKCC, was a **director of Pfizer**, which manufactures cancer-related drugs. He was also on the board of National Health Labs and of Life Technologies.

### **Conspiracy?**

Is this evidence of a **conspiracy** among drug companies to **suppress** “alternative” therapies for cancer? There are those who would answer that question **“Yes!” emphatically**. In my years of research, I have not found even one “alternative” cancer cure that has been **thoroughly researched** by the cancer “establishment” in the United States. I would say that the circumstantial evidence of a conspiracy is **overwhelming**.

The complete rejection of therapies outside the main stream by the cancer “system” is **unique** to the United States. Western European countries, Canada, Mexico, Australia and Far Eastern countries (Japan, Korea, The Philippines, etc.) are **much more tolerant** of the therapies we will discuss in this book.

It seems to me that our **political system** is much more under the sway of the drug company money than other democracies around the world. Most, but not all, large drug companies have their headquarters in the United States. This is **not a coincidence**. If other countries had political systems and medical societies more sympathetic to drug company interests, they would **move there**. With the global economy what it is today, a company’s headquarters can be easily moved.

### **A Pitiful Story**

Here's an excerpt from the September 25, 2000 Newsweek. The article was entitled "*Why Drugs Cost So Much.*" It pointed out that drug sales in the U. S. had gone up from **\$65 billion** in 1995 to **\$125 billion** in 1999. One government study predicts prescription-drug spending in the U. S. will reach \$243 billion by 2008.

The price of an average prescription went up from \$23.68 in 1991 to \$37.38 in 1998. Lobbying expenditures by drug companies in 1999 were \$83.6 million. A pitiful example of why this was an election year issue in 2000, according to **Newsweek**, is the story of Robert and Sarah Bergeon:

*"The South Milwaukee, Wis., couple spend about \$6,500 annually, nearly a third of their \$21,000 income, on the seven different drugs 71-year-old Sarah takes for heart disease and diabetes and the ones Robert takes for gout and blood-pressure problems. They are covered by Medicare, but the 35-year-old program has no prescription-drug benefit. 'We both worked hard all of our lives and never asked for help from anyone,' says Robert, 72, a retired printer who works part time bagging groceries to help pay for their medicines and sometimes skips his drugs to make sure Sarah gets hers. 'It's stressful now and it's scary. I don't want to see anybody else go through this.' "*

In my experience, there are many "Medigap" health insurance policies that cover most common medications at very low co-payments (\$5 for each generic drug prescription). A "Medigap" policy takes the portion of your Social Security check that is normally deducted for Medicare, Part B (about \$48 a month, in my case) and basically covers whatever Medicare doesn't, with small co-payments. For example, I pay \$6 for each visit to the doctor, or to any specialists to whom my Primary Care Physician refers me. I pay \$5 for each prescription.

If you or a family member is receiving Social Security, please look into Medigap policies. If you know the Bergeons (story above), please ask if they have looked into this. It is pitiful, but many seniors are never counseled on all their options for care at a reasonable cost, including prescription drugs.

### **World Without Cancer**

In his interesting book *World Without Cancer – The Story of Vitamin B17*, G. Edward Griffin puts it this way:

*"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.”*

Legislation claiming to protect the consumer of drugs is usually **written by** the drug industry. Politicians who are grateful for the financial support of the drug companies are eager to put their names on legislation and push for its enactment. Once it becomes law, it serves merely to **protect** the sponsoring drug companies against competition. Competition from natural cancer cures, for example. The consumer is **the victim** of this legislation, not the beneficiary.

In drug testing and marketing, unlike other industries that lobby Congress, there is the added necessity to pretend that everything is being done scientifically. Therefore, in addition to recruiting the aid of politicians, **scientists** must also be enlisted – a feat that is easily accomplished by the judicious allocation of funding for research.

This process is nothing new. Former FDA Commissioner James L. Goddard, in a **1966** speech before the Pharmaceutical Manufacturers Association, expressed concern about **dishonesty in testing** new drugs. He said:

*“I have been shocked at the materials that come in. In addition to the problem of quality, there is the problem of dishonesty in the investigational new drug usage. I will admit there are gray areas in the IND [Investigation of New Drug] situation, but the conscious withholding of unfavorable animal clinical data is not a gray area. The deliberate choice of clinical investigators known to be more concerned about industry friendships than in developing good data is not a gray area.”*

Goddard’s successor at the FDA was Dr. Herbert Ley. In 1969, he testified before the Senate committee and described several cases of **blatant dishonesty** in drug testing. One case involved an assistant professor of medicine who had tested **24 drugs for 9 different companies**. Dr. Ley said:

*“Patients who died while on clinical trials were not reported to the sponsor... Dead people were listed as subjects of testing. People reported as subjects of testing were not in the hospital at the time of the tests. Patient consent forms bore dates indicating they were signed after the subjects died.”*

Another case involved a **commercial drug-testing firm** that had worked on 82 drugs from 28 companies. Dr. Ley continued:

*“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... Record-keeping, supervision and observation of the patients in general were grossly inadequate."*

Money corrupts. Really big money **corrupts completely!!**

### **A Personal Anecdote**

About 4 years ago, my urologist prescribed **Hytrin**, a drug manufactured by **Abbott Laboratories**, for my enlarged prostate. It was quite effective in reducing my nocturnal ups and downs. It relaxes the prostate and bladder muscles. Hytrin is also used to treat high blood pressure, which I don't have.

For the first three and a half years, my co-payment for Hytrin was **\$60**. I have Medigap insurance that pays for prescription drugs. I needed a refill about once a month. When I asked the pharmacist if there was a generic, he said no, that Abbott Labs had a **patent** on it and only the named drug could be sold.

Well, guess what? In the middle of 2000, I happily found that Abbott Labs patent had **expired**. I found out only because my pharmacist filled my prescription with the generic (terazosin hydrochloride) and my co-payment was **\$5**, instead of \$60.

The plot thickens. In September 2000, I received a letter from my urologist's office. They were running a **clinical trial** on a "new" drug to treat enlarged prostates and they wanted **volunteers** for the test. I was curious, so I called them. It turned out that this office, the **largest urology clinic in San Antonio**, had a specialized staff for drug testing.

They asked me a few questions. Apparently, I qualified and they asked me to participate in the test -- what's called a **Random Clinical Trial**. It requires the participants to take no medication (stop the terazosin) for one month and then try the "new" medication for three months -- unless, of course, you got the **placebo** (sugar pill), which neither you nor the docs would know about. One half of the people would get the "new" drug and **one half the placebo**.

Guess what the "new" drug was? Not hard, was it. It was **Hytrin II**. A "new", and, of course, **newly patented** form of the drug. It was supposed to "improve the quality of the treatment" of BPH (Benign Prostatic Hypertrophy), which is what I, and most males my age, have, an enlarged prostate gland. I politely declined to participate in the clinical trial.

What's **wrong** with this picture? Well, several things:

- 1) Do you think it is **coincidental** that Abbott Labs just finished developing Hytrin II **a few months** after their patent for Hytrin I ran out?

- 2) Do you think it is **ethical** for a large urology clinic to act as the agent for a drug manufacturer in a clinical trial? Isn't this something of a **conflict of interest**?
- 3) Do you think either Abbott Labs or my doctor thought about the **financial impact** of a "new", drug on me or other seniors? What about people like the Bergeons (Newsweek article above)?
- 4) Why do you think the presidential race in 2000 made a BIG DEAL out of a "**prescription drug benefit**" for seniors? Could it have something to do with the **political contributions** from the drug companies? Remember, that prescription drug benefit comes right out of **taxpayers' pockets**.
- 5) Why aren't we debating about how to keep the drug companies from **gouging** Americans while they sell the same drug at **one-tenth the cost** in Europe and Canada?

### **Relief From Canada**

In September 2000, William Raspberry, wrote a column in the Washington Post about "*One Long-Term Cure for High Drug Prices.*" Here are a few paragraphs from that article:

*"There are at least two pieces of the problem of high cost of prescription drugs, Rep. Bernie Sanders, an independent from Vermont, has been saying for some time now.*

*But most of the political and journalistic focus has been on only one piece: The 'outrageously high price' of medications. He'd like to call attention to the other half of the problem: The fact that Americans 'are paying by far the highest prices in the world for the same exact drug – not a generic, but the same exact drug.'*

*The solution, he says is simplicity itself. Allow registered pharmacies and drug distributors to purchase FDA-approved drugs anywhere in the world for resale here. Reimportation, he calls it in the bill he hopes will pass Congress before the campaign recess."*

[NOTE: The bill passed and was signed into law by President Clinton. The last I heard was that the Bureau of Health and Human Services was delaying writing regulations to implement it because they were concerned for the "safety" of consumers....Hmmmm]

*“This is important stuff,’ Sanders said in a telephone interview from his Burlington office. ‘I traveled to Canada with a group of women with breast cancer, and we looked at the price of tamoxifen, a drug that is widely prescribed for the treatment of breast cancer. You could get it in Canada for a 10<sup>th</sup> of the U.S. price.*

*If this bill were to go into effect tomorrow, U.S. pharmacies would be purchasing tamoxifen in Canada and retailing it here at 30 to 50 percent less than they now charge.’*

*Sanders says the same thing applies to any number of drugs – all approved by the FDA and originally manufactured in or exported from the United States.*

*‘Pharmacies should be able to purchase these drugs the same way other companies purchase shoes, slacks or washing machines,’ he says.*

*...The biggest obstacle to passage this term is the pharmaceutical industry, Sanders says. ‘They are the most powerful lobbying force on Capitol Hill,’ he said. ‘They’ve spent tens of millions in opposition of this bill.’”*

### **Another Recent Press Article**

Here is an excerpt from an article in the **Boston Globe**, October 2000 by Derrick Z. Jackson. He is talking about the shameless use of our youth as advertising billboards by big business:

*"A reminder of this was in the Boston Globe sports section recently. Red Sox outfielder Darren Lewis was photographed with a group of children. Lewis was pointing to a new ball field at the Roxbury Boys and Girls Club.*

*Far more striking was that nearly every one of the children in the picture wore exactly the same T-shirt. The T-shirt was for Claritin allergy drugs, an official sponsor of Major League Baseball.*

*The caption under the photo said Lewis offered a 'helping hand' to the youths. As the children's chests blared 'Claritin (loratadine), Claritin (loratadine), Claritin (loratadine), Claritin (loratadine),' it was clear that it was the children who were far more helpful as unwitting billboards for the pharmaceutical industry.*

*...Claritin is a particularly ironic case, finding the time to play urban savior at the very time it is under attack for gouging the kids' parents and elders. Recently on the presidential campaign trail, Vice President Al Gore singled out Claritin, made by Schering-Plough, with Claritin as its flagship drug, which had a profit of \$2.1 billion in 1999 on sales of \$9.2 billion. The 23 percent return on revenues was four times higher than the average return, for example, for airlines.*

*According to a Wall Street Journal feature in August, drug companies spend more money on salespeople than on scientists. Schering-Plough, instead of working with Congress to make drugs more affordable, now spends more on advertising Claritin than Coca-Cola spends on Coke or what Anheuser-Busch spends to push Budweiser and its Super Bowl lizards.*

*Instead of seeking to compromise with politicians on Capitol Hill who note that 20 pills of Claritin cost \$44 in the United States while they cost \$8.75 in a more universal-health care Europe, Schering-Plough has reportedly tripled its lobbying budget to \$6.6 million. It has hired former U. S. Rep. Bob Livingston to lobby for patent extensions and the license to further gouge."*

### **So What?**

Where does all this leave you, the cancer patient or caregiver? Well, hopefully, it leaves you **somewhat skeptical** about claims by the cancer "industry" that all therapies not sold by Bristol-Myers-Squibb or Merck or Abbott Labs or whoever are **"unproven" and therefore pure "quackery."**

As a bare minimum, to avoid what happened to Marjorie, my former wife, and me, you **must** educate yourself. You must be prepared to get more than one opinion. Then, when you've found the doctor (or homeopath or naturopath) that you trust, you **must be prepared to co-doctor** with him or her throughout your treatment.

This book is designed to end your **blind** faith and trust in our system of cancer "therapy" and arm you with the power to search beyond it. Faith is fine, if it derives from the **power of knowledge** and trust in your physician.

### **You Have The Power -- Use It**

I'm going to arm you with **information** -- from books, the Internet, newsletters, magazines and any other source. You will be able to **take charge** of your health. I am hoping you will not be satisfied with **treating symptoms**. You will want to **treat causes**.

But before you can treat causes, you need to understand them.

Several years ago, one of my wife's doctors told me, "80% of it is still mystery to us." At the time, I didn't know what he meant. Now, I think I do.

What he meant was that what happens in your body **at the cellular level** is indeed mystery to almost all doctors.

- Interactions between your **brain** and your **immune system**.
- What **stress** does to your immune system.
- Exactly what **chemotherapy** does to your immune system.
- What other treatments are available to **cure cancer**.
- How **non-toxic substances** can boost your immune system.
- How exercise and nutrition affect diseases like **diabetes**.
- What "**free radicals**" do to your health.
- Which **antioxidants** are the most effective against free radicals.
- What **natural substances** provide your body with antioxidants.
- **...and many, many more.**

Let's get down to business. Let's first take a look at what causes cancer.

### Cancer is Simply...

A cancer diagnosis scares **all of us**. I have **no more vivid memory** than seeing my former wife's body after it had been wracked by **four years of cancer**, chemotherapy, operations and painkilling drugs when **she died** on November 1st, 1994.

Her bout with cancer started me on my search for answers. How can we cure it **gently**? How can we **prevent** it? To do either, we must first **understand** it.

#### Some Cancer Numbers

First, let me give you a few numbers. Cancer is the second leading cause of death in the United States. About 22% of all deaths each year are blamed on cancer.

Notice the word "about". As I mentioned above, my former wife, Marjorie, died on November 1, 1994 after a **four-year bout** with cancer. On her death certificate, her doctor wrote "**heart failure**" as the cause of death. Obviously, any statistics on death rates need to be taken with a grain of salt. My doctor friends tell me that the law requires them to enter the **final** cause of death, not the **precursor**, whatever that means.

More than a **million** Americans are diagnosed with cancer **each year** and more than half a million death certificates cite cancer as the cause of death.

Another 800,000 develop **small, "non-invading" cancers** and various mild kinds of skin cancer. Both types generally do not spread and can be easily removed. These "non-invasive" cancers are **not counted** in the annual cancer statistics.

For **women 35 to 74**, cancer is the leading cause of death. For **men** of the same age range, cancer is **second** only to cardiovascular disease as the leading cause of death.

Despite the high incidence of cancer and our federal government's "**War on Cancer**", begun in the early 1970's and supported by over \$50 billion dollars of research, virtually **no progress** has been made in curing the most common forms of cancer.

According to the World Health Organization, there were **10 million new cases** of cancer in 1996, and in 2001 they predict a yearly total of **14.7 million**. These numbers are so huge that the suffering they imply is incomprehensible.

In the United States, the death rate from cancer had **risen 6%** by 1994 from 1970, just before the "War on Cancer" was launched. There has been a **slight downturn since 1994**, but it can all probably be attributed to people **stopping smoking**.

To put it another way, **every other man** and **every third woman** in the United States will get cancer -- unless we understand it better and make the lifestyle changes I will show you.

If a tumor is found early and can be removed, it will not **regrow or appear elsewhere about 50%** of the time. Once a cancer has **metastasized** (spread to other sites in the body), chemotherapy and/or radiation will stop it only about **10% of the time**.

Most cancers arise from our interaction with the world around us. Almost **one-third** of all cancers diagnosed in Europe and in the United States can be linked to **tobacco** use. These account for more than 150,000 deaths in the United States each year.

**Food choices** contribute to another one-third of the cancers, especially stomach and colon cancers.

**Thinner** people are at **lower risk** of breast, prostate and uterine cancer. This is probably because these cancers are linked to high exposure to the sex hormones, estrogen and testosterone. These hormones are **stored in fat**.

People who drink **alcohol** excessively have higher levels of **mouth and liver** cancer.

People who have spent too much time in the **sun**, particularly before the age of 30, are more likely to develop **skin** cancer.

Occupational hazards, such as **asbestos and formaldehyde**, account for about **5%** of all cancers.

The key words in cancer treatment today are "**avoidance**" and "**early detection**." Without a doubt, the best way to fight cancer is to avoid getting it in the first place.

### **What Exactly Is Cancer?**

What follows is information available in more detail in a book called *REAL AGE* by Michael F. Roizen, M.D. Dr. Roizen's book and the related website and daily "tips" are one of the **many resources** I will recommend to you (see Appendix A).

Cancer means the **growth of tumors**. It's a category that includes a broad range of diseases.

About 5 to 10% of all cancers stem from inherited genes. The other 90 to 95% are caused by **genetic "mistakes"** which develop **over your lifetime**. Mutations in your DNA after you are born are these mistakes. We accumulate them.

Cancer is a **disease of our DNA**. This is the substance that regulates the growth of the body. It is contained in every cell we have. It is the "**instruction book**" for your body. It determines the color of our eyes, how tall we are, that we have an arm instead of a wing...

If you have a computer and I give you two manuals, each **three inches** thick, you'll **never** learn to use your computer. But if I tell you to read pages 10 through 15 and you will learn how to use your computer, you will do that.

When your body needs a cell, at the last minute it decides if it needs a kidney, eye or fingernail cell. The body then tells that cell **which pages** of the DNA to read. When it takes the place of a dying cell, it begins to function in that capacity.

This DNA is **duplicated with every cell division**. Average adults have 75 trillion cells in their body. Once again – **75,000,000,000,000 cells**. 99% of the cells in our bodies are called "somatic" cells. All of them except brain and nerve cells get replaced thousands or hundreds of thousands of times during our lifetime. In **seven years** this process of cell division and death replaces virtually **every cell** in our bodies.

Another way to look at this is that **every day** about **205 billion cells** get replaced in our body. Why is this important? Because cancer is caused by mutations that occur during this process.

### Division Problems

When a cell divides, the DNA in that cell is copied and passed on to the new cell. But the DNA in any one cell can become damaged. Pieces of the instructions on the genes can get **knocked out or changed** – mutated.

If this mutation occurs in the wrong place – in an active gene, for instance – it can **disrupt the function of the cell**, causing it to die.

Your beautiful body includes a **regulatory system** that is mind-boggling. For example, when you get a simple cut on your hand, your cells go to work to repair the damage. When enough cells have gathered around the cut to heal it, the cells **stop dividing**. Ever wonder why? Because there is a “**suicide gene**” in the DNA which says “Enough, already.”

Not only is the total number of cells kept in check, but also “**proofreader**” genes in the DNA look for mutations. When they find one, they either fix it or kill the cell. They are on duty 24/7. Isn't this stuff **amazing**?

Your **immune system** also kills off these damaged cells by the millions every day. It is your **second line of defense** against mutated cells. We'll discuss this in much more detail in Chapter 2.

If the mutation happens, however, in a portion of the cell's DNA that **controls cell growth**, i.e. an “oncogene,” the result is a rapidly growing and dividing cell – **out of control** – or what we call “cancer.”

The cell has **lost its “suicide”** function. The “**proofreader**” gene missed the mistake. Your immune system **is too weak** to provide its normal second line of defense. Result: **The Big C**.

The mutated cells usually travel to the **weakest and most highly stressed organ** in your body (in a process that is poorly understood) and you have a tumor. The cancer tumor grows because the “**daughter**” cells inherit the same mutation.

How do these mutations occur? Two ways:

- One is a **random mistake** in the DNA duplication process. Not much chance for you to control this. But not much reason for concern, either. The cell cycle controllers (proofreaders and suicide genes) and your immune system kill these “mistakes” as soon as they happen.
- The second way is damage to the DNA caused by “**free radicals**” or other irritants like radiation.

### What Are Free Radicals?

Free radicals, the most common cause of cancerous DNA damage, **are** under your control. What are free radicals? Every day, we produce or take in millions of them. They are compounds that have **one unpaired electron** in their atomic makeup.

Try as you might, you **cannot avoid** free radicals. They are in your body and in the atmosphere. They result from the process your body uses to break down food, among **many other causes**. But they are also caused, and can be controlled, by the lifestyle decisions we make every day. What lifestyle decisions? Want a few examples?

- **Cigarette smoking** causes the largest number of free radicals of any lifestyle activity. Eventually, the number of free radicals it produces overcomes your body’s elaborate defenses and you, the smoker, get lung cancer, emphysema, heart disease, and many more maladies.
- The **more fat** you take in, the **more free radicals** you produce.
- Food and vitamins and other supplements provide “**anti-oxidants**” which can kill off the free radicals by the **millions**.
- All of these lifestyle choices are **cumulative** – for better or worse.

In addition to cancer, free radical damage also causes senility, arthritis, hardening of the arteries, and the declining function of your immune system as you age.

### Helping Your Immune System

A multitude of studies in recent months confirm the immune system’s function in both preventing and **curing** cancer. Almost every day a new study is published in the search for drugs and vaccines that boost the immune system’s ability to fight off cancer.

As we will see in Chapter 2, these drugs are **not necessary**. At least one substance that is **non-toxic and harmless** to take has been proven to boost your immune system's ability to "mop up" mutated cancerous cells.

Here's a quote from Dr. Roizen's book:

*"As you age, your second line of defense, your immune system, tends to be less vigilant and does not as readily detect and destroy these abnormalities. The weaker your immune system, the more likely that it will not provide the necessary backup. The longer you live, the more likely that you will get improper cell divisions, the more likely that the DNA in a specific cell will contain a mutation, and the more likely that your immune system won't be there to catch a mistake. The most important thing to remember is this: **You can slow, and even reverse, the rate of aging of your immune system.**" [Emphasis added].*

Dr. Roizen goes on to explain causes and prevention measures for various types of cancer. If you would like to read more of his work, his book is called *REAL AGE --Are You as Young as You Can Be?* copyright 1999 by Michael F. Roizen, M.D. Also, check out his website: <http://www.realage.com/>

My wife Terry and I took Dr. Roizen's quiz to determine our "Real Age". The quiz covers a wide variety of **lifestyle questions**, each of which either adds to or subtracts from your chronological age. Mine came out to **minus 16** (making my "Real Age" 52). My wife's came out to **minus 14** (making her "Real Age" 32). To take this quiz, just go to his website by clicking on the link above.

Dr. Roizen has an extended discussion on antioxidants (Vitamin C, E, etc.) and their role in controlling the "**free radicals**" which damage the genes in your cells.

It is pretty clear from all the research I have done that most cancers can be prevented by proper **diet, supplements and exercise**. Each of these three can be visualized as a leg on a three-legged stool. If any one is neglected, the stool collapses – your body degenerates and you get sick. We will cover supplements in this chapter. Diet and exercise are the subjects of "booklets" which accompany this book.

### Treating Your Cancer

The succeeding chapters in this book will deal **in detail** with specific options available to every cancer patient. Many of these are supported by major research efforts. Many of them are supported by groups of survivors that have formed to get the information to other cancer sufferers.

In **Appendix A, Resources Summary**, is a complete list of the resources you can use to find more detail than I can include in this book. You can even locate

doctors in your area who specialize in "alternative" or "integrative" medicine. Also, the websites will allow you to keep up-to-date on new developments as they occur, as will my newsletter.

## Cancer Prevention

Many of the anti-oxidants our body needs to gobble up the free radicals and prevent cancer **must come** from supplements. If you've talked to your doctor lately about this subject, you were probably not encouraged by his response. Most physicians feel that supplements are **unnecessary**. A "proper" diet will provide all the vitamins, minerals, enzymes you need, they say. Just eat a "balanced" diet.

One prolific author on cancer – it's treatment and prevention -- is **Ralph W. Moss, PhD**. Dr. Moss has written **10 books** on cancer therapy, causes, cures, prevention, etc., including *Questioning Chemotherapy*, *Herbs Against Cancer* and *The Cancer Industry*. This excerpt [along with **my comments** in red] is from his latest book, published in 2000, called ***Antioxidants Against Cancer***.

### ***"Attitudes of Doctors***

***Thousands of scientific articles point to the power of antioxidants, yet many doctors are not taught about this in medical school. Others may know about this exciting development but shy away from it because they fear peer pressure or stigmatization. And all too often, doctors respond to positive reports with a warning that patients should not take food supplements."***

***"The conventional line is that research is promising, but there just isn't enough data on which to base firm conclusions..."***

Are you beginning to see the importance of "co-doctoring" with your physician?

***Certainly, few medical interventions can have less risk than eating a diet high in antioxidants. We are not talking about taking arsenic here, but about brightly colored fruits and vegetables, as well as concentrated extracts. Yet many physicians draw the line when you discuss antioxidants and say, 'Much too risky. Not enough known.' "***

I remember exactly when I first heard of Linus Pauling, Ph.D, and his theory about the antioxidant (anti-free radical) benefits of Vitamin C. It was 1953. I was 21 years old. My first wife was about to have our first baby. Dr. Pauling was touting 15,000 or so milligrams (15 grams) of Vitamin C a day as an anti-virus measure -- cut down your colds, flu, etc. He was literally ridiculed by the medical profession. Since then, he is renowned as the only individual to be awarded TWO Nobel Prizes.

Do you think it would have taken 47 years for Dr. Pauling's antioxidant theory to become "verified" if there were the same profit margin in manufacturing Vitamin C capsules as there is in manufacturing chemotherapy "cocktails?"

*"No wonder laypeople are turning to books, magazines, and Websites for information on antioxidants, and that many patients **hesitate to even discuss** questions of nutrition with their doctor. Patients are becoming more educated (**sometimes more educated than their doctors!**) and more empowered."*

I certainly hope that **you** will feel "more educated than your doctor" and definitely **empowered** when you finish reading **this e-book**. Right now, that is my whole **reason for being!**

If you would like to read more of Dr. Moss's work, these excerpts are from his book *"Antioxidants Against Cancer"*, copyright 2000, by Ralph W. Moss, Ph.D. You may also want to visit his website: <http://www.CancerDecisions.com>.

### **Effective Antioxidant Supplements**

We've been talking about **antioxidants** in relation to cancer prevention. They are also important in the prevention of heart attacks, strokes, macular degeneration of the eye, and about **one hundred other illnesses** associated with aging.

The reasons for including antioxidant-rich foods and supplements in your daily routine go **far beyond cancer**.

Let me give you here the best source for a **supplement** that covers all the bases. If you know of a better one, I'd like to hear about it. Please post the information on the **Discussion Board** at my website:

<http://network54.com/Hide/Forum/74491>

For just **over 15 years**, I have been receiving a newsletter called "**Alternatives**" written by **Dr. David G. Williams**. His writings about everything having to do with healthy living have been **immensely helpful** to my family and me.

[By the way, **nothing** I recommend in this e-book **results in even one dime of income** for me. I am truly writing this for your benefit, not for mine. If I **ever do get paid** for anything, it will be clearly marked as an ad.]

You are very fortunate. Just a year or so ago, **Dr. Williams** completed his **website**. It now contains archive copies of his monthly newsletters, all the way back to 1985. This is a treasure trove of health information. You can purchase for four or five dollars any of the back issues that interest you. Check it out at <http://www.drdauidwilliams.com/>.

About the antioxidants...Dr. Williams, about 4 years ago, put together something he called "**Daily Advantage**". It is a little transparent plastic package containing 7 capsules. My wife and I each take one package with breakfast and another with lunch, as Dr. Williams advises.

Here's how he describes the "Daily Advantage" nutrient package:

*"I've carefully chosen the **65** vitamins, minerals, antioxidants, herbs, superfoods, amino acids and digestive enzymes that are in Daily Advantage, based on all my **years of research** into nutritional supplementation.*

*...these hard-to-find nutrients work together to **supercharge the antioxidants** in the vitamin complex, making the overall formula more powerful and better able to destroy the **free radicals** attacking your cells."*

Here are the ingredients in each Daily Advantage set of capsules:

### **Essential Vitamins and Minerals:**

▪ Vitamin A	5,000 IU
▪ Vitamin C	2,000 mg
▪ Vitamin D	800 IU
▪ Vitamin K	60 mcg
▪ Thiamine (Vitamin B1)	50 mg
▪ Riboflavin (Vitamin B2)	50 mg
▪ Niacin	126 mg
▪ Vitamin B6	110 mg
▪ Folic Acid	400 mcg
▪ Vitamin B12	100 mcg
▪ Biotin	300 mcg
▪ Pantothenic Acid	150 mg
▪ Calcium	1,000 mg
▪ Iodine	100 mcg
▪ Magnesium	500 mg
▪ Zinc	20 mg
▪ Selenium	200 mcg
▪ Copper	2 mg
▪ Manganese	10 mg
▪ Chromium	200 mcg
▪ Molybdenum	100 mcg
▪ Potassium	100 mg
▪ Vanadium	150 mcg
▪ Choline	100 mg
▪ Quercetin	50 mg
▪ N-acetyl cysteine	50 mg

- Trace Minerals Complex 50 mg
- Lemon Bioflavonoids 40 mg
- Para-aminobenzoic acid (PABA) 30 mg
- Inositol 100 mg
- Silica 26 mg
- Rutin (from buckwheat) 10 mg
- Hesperidin (from citrus peel) 10 mg
- Boron 1,000 mcg

### **Advanced Antioxidant Shield**

- Vitamin A (as beta carotene) 15,000 IU
- Vitamin E 400 IU
- Tocotrienols (from rice) 20 mg
- Coenzyme Q10 10 mg
- Alpha-Lipoic Acid 10 mg
- Lutein (from marigolds) 6 mg
- Lycopene (from tomatoes) 6 mg

### **Herbal Superfood Booster**

- Spirulina (from algae) 750 mg
- Turmeric (from root) 200 mg
- L-Taurine 200 mg
- Siberian Ginseng Root 180 mg
- Bee Pollen 100 mg
- L-Carnitine 100 mg
- Royal Jelly 50 mg
- Astragalus (from leaf) 50 mg
- Ginger Root 50 mg
- Gymnema Sylvestre 50 mg
- Pancreatin 50 mg
- Ox bile 50 mg
- Green Tea Extract 50 mg
- Siberian Ginseng Extract 50 mg
- Panax Ginseng Extract 40 mg
- Betaine Hydrochloride (HCL) 20 mg
- Ginkgo Biloba 10 mg
- Lipase 10 mg
- Cellulase 10 mg
- Maltase 10 mg
- Protease 10 mg
- Amylase 10 mg

You can get more information at his website or by calling **Mountain Home Nutritionals** in Ranson, West Virginia, the people who distribute **Daily Advantage** for Dr. Williams. They can be reached at (800) 888-1415.

We pay about **\$44 monthly apiece** for Daily Advantage, including shipping by Priority Mail. I cannot even imagine how much it would cost us to buy these ingredients at the local health food store. We attribute our glowing health largely to this product, a **sensible diet** and **regular exercise**. We don't smoke. We drink very moderately (less than one glass of wine or equivalent per day).

## Vitamin B or Not to B

I can't tell you how many lists I have read of vitamins, minerals, amino acids, etc. like the one above and **what each does for my body**. Have you done that? Doesn't each one make your **eyes glaze over**? They sure do mine.

To this day, I have **no idea** why it is good for me to eat some choline, querectin, astralagus or ginger root each day. If a gun were held to my head, I **could not** tell you what all of Dr. Williams' **65 ingredients** do for me...or what dire results would threaten my body if one were eliminated.

The **exceptions** are the **antioxidants** -- which include Beta-carotene, Vitamin E, tocotrienols, coenzyme Q10, alpha lipoic acid, lutein and lycopene. These I have studied enough to **know why** they are good. They are the best thing you can take to **prevent cancer** and lots of other **degenerative diseases**. Also, I know that **Vitamin C** is great for your production of **collagen** that supports your joints, soft tissues and proper bone formation. It also helps maintain **strong blood vessels**, your **immune system** and your body's own repair capabilities.

All I can tell you is that since beginning his **Daily Advantage** supplement program in 1996, my wife and I have had **no recurrence** of the many colds, flu and other maladies that we suffered through before we started on it. This includes many years when I took Centrum Silver and many other "drugstore" supplements every day.

We have **lots of energy**, we **sleep well** and we enjoy **exercise**. We also enjoy **sex**. She enjoys her **gardening and cooking**, as well as **Yoga**. I walk 18 holes of **golf** twice a week, **sing** in a men's a cappella chorus and **play bridge** on the computer with people from all over the world.

*"Look to your health: and if you have it, praise God, and value it next to a good conscience; for health is the second blessing that we mortals are capable of: a blessing that money cannot buy."*

----IZAAC WALTON

## After Antioxidants, What?

So, you've bought Dr. Williams **Daily Advantage** or whatever you think is better and you're **taking it every day**. Is that all? Not quite.

### Ultra-Fit

The doctor most directly responsible for my gaining control over my health is **Dr. Joe Davis**. I met him at one of his Ultra-Fit "wellness" centers here in San Antonio in 1992. I was 60 years old.

Dr. Davis is an **internal medicine** specialist. He also is a **human being** who has fought through **obesity** and **alcoholism** to become a competitive weight lifter and founder of multiple Ultra-Fit centers around the country.

His book "Ultra-Fit" and the wellness centers were the result of his working with **thousands of patients** over a span of **15 years**, most of whom were obese and out-of-shape.

Let me quote from Dr. Davis's book "Ultra-Fit" along with **my comments**.

*"It is my personal belief, as a physician of internal medicine, that **dietary factors** serve as the principal cause of our **most common killers** in the United States."*

See what I mean about his impact on me? It took me only **15 minutes** or so talking to him to realize that I had met a **very unusual doctor**.

*"The consequences of eating **too much fat** result in huge, staggering, burdensome **problems**. It costs society **billions and billions** of dollars each year to stem fat-related diseases."*

Which diseases is he talking about? **All** degenerative diseases. Specifically: cancer of the colon; cancer of the breast; cancer of the uterus; cancer of the prostate gland; cancer of the lung; gouty arthritis; degenerative arthritis; heart attacks; high blood pressure; strokes; diabetes; and suicide, to name a few.

*"I am not over-dramatizing fat-related illnesses. Sure, **other factors** figure into the equation that triggers **any one** of these illnesses."*

However, simply because you carry **excess fat** on your body you **increase your chances** of developing one of these illnesses in your lifetime. The **longer** you carry excess fat, the **greater** your chances."

Dr. Davis is not trying to make you feel guilty. In fact, he says the blame for all the obesity in our society belongs to evolution.

"The human animal has **evolved genetic machinery** for conserving and **storing calories as fat** during intermittent periods when food is lacking. Only since the twentieth century have we developed the technology for food production, storage, and distribution so that, for practical purposes, we **no longer suffer from a lack of food** -- or at least not in the affluent parts of the world.

Think about that. For millions of years, man constantly **searched for food**, suffered famines. Suddenly, in the last **fifty years**, the United States suffers from **excess** food production.

*It takes **work not to become fat** in America!"*

### Where To From Here?

Free radicals are **bad**. Fat causes **more**. What do we do about it? Dr. Davis prescribes **changes in lifestyle** – diet, exercise and even mental images – along with hundreds of examples of how his patients applied these ideas.

If you want to explore Dr. Davis' ideas further, see Appendix A, item 4.

His prescription has been effective for me. Would it work for you? Possibly. Several "booklets" come with this book. In the first two, "**Stop Your Aging With Exercise;**" and "**Stop Your Aging With Diet;**" I will cover in detail how I have applied the ideas of Dr. Davis and other physicians and therapists.

Two other booklets accompany this book. They are called: "**Beating Diabetes;**" and "**Cure Your Back Pain.**" Purchasing my e-book "Cure Your Cancer" gets you **all four** of these booklets as my way of saying "Thank you."

Now, we will turn to your most immediate concern – "How do I put this knowledge to work to **cure** my (or my loved one's) cancer?" If you feel this would be worthwhile for you, please [click here](#) to purchase the rest of this e-book and the four "bonus" booklets. The cost is \$14.95 US (no tax or shipping charge).