National Health Federation BULLETIN

FEBRUARY, 1975

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THE SUGAR SITUATION
A Blessing In Disguise

Ida Honorof's Comments On
The Sugar Rip-Off
and
Are You On the "Stuff"?
By Jay Patrick

The FDA

The laws under which the Food and Drug Administration operates • FDA's authority and scope of activities • How to find out about FDA regulations • How you may comment on proposed regulations • How to petition the FDA

A PLOT TO DESTROY HEALTH MAGAZINES

Watch for renewed efforts to enact legislation giving FDA authority to regulate precisely what can and cannot be stated in advertising of health and nutrition products

WARNING: YOUR CONGRESSMAN MAY BE DANGEROUS TO YOUR HEALTH

An expose of AMA's attempts to influence health legislation through political campaign contributions

Complete contents on inside of front cover

Dedicated to the Protection of Health Freedoms

THE
NATIONAL HEALTH FEDERATION
BULLETIN

Protection of Health Freedoms — *Published Monthly*

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The Bulletin serves its readers as a forum for the presentations and discussion of important health issues including the presentation of minority or conflicting points of view, rather than by publishing only material on which a consensus has been reached. All articles published in the NHF Bulletin—including news, comments and book reviews—reflect the individual views of the authors and not necessarily official points of view adopted by the Federation.

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FDA Plots To Destroy Health Magazines and Publications

By CLINTON R. MILLER
NHF Legislative Advocate

The U.S. Food and Drug Administration is out to cripple, then dismantle, and finally destroy *Prevention, Let's Live, Better Nutrition,* and all other similar health magazines.

To do this FDA needs to have Congress grant it authority to regulate advertising of food supplements. Fortunately FDA does not have that authority now. Congress has wisely split and balanced the authority to regulate the sales promotional activity of vitamin companies between FDA and the Federal Trade Commission.

FTC has been given exclusive jurisdiction over advertising of vitamins and minerals and other foods. FDA has been given exclusive jurisdiction to regulate their labels and labeling.

With a few glaring exceptions, like the Prevention and Viobin cases which FTC lost, it has regulated advertising of foods and food supplements far better and more fairly than FDA has regulated vitamin labeling. FTC has had the courage to take action against advertising of falsely labeled white sugar, Wonder Bread, etc.

FDA, on the other hand, has carried on a continuing campaign of harassment against the labeling of health food supplements. At the same time — FDA has stubbornly opposed label reform legislation which would give consumers complete ingredient labeling.

Advertising is the lifeblood of health magazines. FDA knows this. If FDA can choke off the advertising, it can strangle the magazine. It is as simple as that.

This is the reason the National Health Federation was shocked and disappointed when Representative Paul Rogers, the ultra-powerful House Health Subcommittee Chairman, unceremoniously killed the Proxmire Nutritional Freedom Bill and substituted in its stead H.R. 16317 with a horrendous provision giving FDA control over vitamin and food supplement advertising.

Representative Peter Kyros (D-Maine) was listed as the chief sponsor of H.R. 16317, known by some as the Kyros-Rogers Bill. NHF strongly opposes it. We are joined in our opposition by the

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National Nutritional Foods Association and the Federation of Homemakers.

The FDA engineered advertising clause is a principal, but not the only reason NHF is opposed to H.R. 16317.

NHF is more strongly than ever in favor of the Proxmire-Hosmer Bill. It passed the Senate, September 24, 1974, in plenty of time to have been passed by the House. It would have been law today, had it not been for Chairman Paul Rogers. He can take the credit (or blame) for killing the Proxmire Bill. Rogers killed the Proxmire-Hosmer Bill by refusing to report it out of his House Subcommittee. He then made a powerful, nearly successful attempt to get his Bill (H.R. 16317) enacted instead.

We can thank Senator Kennedy for inadvertently killing the Rogers Bill at the last moment. He refused to go to conference with the House for reasons other than his opposition to the Rogers Bill. Ironically, Kennedy was one of the 10 who voted against the Proxmire Bill in the Senate.

Senator William Proxmire (D-Wis.) gave the Senate one good reason why it is important NOT to give FDA authority over advertising:

"The Food and Drug Administration and much, but not all, of the orthodox medical profession are actively hostile against the manufacture, sale, and distribution of vitamin and minerals as food or food supplements.

"They are out to get the Health Food Industry and to drive the Health Food Stores out of business. And they are trying to do this out of active hostility and prejudice." *(Congressional Record 12/12/73)*

Representative Wayne Owens (D-Utah) decided to poll his constituents when faced with two essentially opposite vitamin bills He knew the Proxmire Bill had no provision giving FDA control over vitamin advertising and the Rogers Bill (H.R. 16317) did. Rep. Owens asked the following question:

"5. Do you believe that the FDA should have the power to regulate vitamin advertising?" (1.8% voted Yes, and 98.2% voted No.)

We urged Reps. Peter Kyros and Paul Rogers, on the basis of this Utah poll, to run a poll of their own constituents in Maine and Florida. Both refused.

Rep. Owens also asked:

"Which bill would you rather see passed, my bill which I sponsored which is identical to the Proxmire-Hosmer Bill or H.R. 16317?" (95.6% voted for the Proxmire - Hosmer bill and 4.4% voted for the Rogers Bill.)

The targets of Roger's Bill, H.R. 16317, are *Prevention*, *Let's Live*, and *Better Nutrition*. These rapidly growing periodicals have a combined circulation approaching 2 million. They are the headwaters of the natural food supplement and health foods movement. They are also frequently highly critical of FDA, AMA, and the drug and synthetic food industry. The AMA-

FDA problem has been to find a way to silence this criticism without rousing the ire of defenders of freedom of the press.

FDA has been scheming for years to concoct a ruse to get an unwitting Congress to give it vast authority to regulate advertising of health foods and food supplements wthout antagonizing the press, FTC, vitamin suppliers, or consumers.

For good reasons, FDA has long been the most feared and hated federal agency by millions of health-minded consumers and an increasing number of enlightened Congressmen. Any attempt by FDA to openly seize control over advertising of food supplements would and should arouse suspicion and active opposition from those who are aware of FDA's open hostility to the sale and promotion of natural foods and food supplements.

Book and magazine burning is not beneath FDA. They proudly boast of impounding and burning—literally burning—all of Dr Wilhelm Reich's books, journals, notes, pamphlets, bulletins, and all documents pertaining to his experiments they could seize. (See chapter 15 of the *Dictocrats* by Omar Garrison on "Book Burning and Prior Restraint," available from NHF for $1.00.) This infamous act took place here in America while Dr. Reich was dying in the federal penitentiary at Lewisburg, Pa. He was convicted under the Food and Drug Act—not for having harmed or injured anyone—but for "criminal contempt" for refusing to appear in court to answer FDA's trumped-up complaint against his unorthodox health views.

FDA wouldn't hesitate today to seize and burn all copies of *Prevention* and other health magazines were it possible to do so. The trouble with book-burning fires is that the smoke, in some strange way, arouses in patriots deep feelings of smoldering resentment against such acts of open tyranny. Millions agree with John Steinbeck when he said, "When books are burned, the ultimate in tyranny has happened."

There is another way to ban books and magazines other than burning them. It is to get Congress unwittingly to give a tyrannical, openly hostile agency like FDA the authority to prescribe what *will* be in an advertisement appearing in health magazines, as well as what *cannot* be in the advertisement. It is one thing to prohibit false and misleading advertisements which the FTC is already authorized to do. And rightly so. It is quite another thing to give FDA authority to water-down or emasculate an advertisement or prohibit its appearance entirely.

If an ARTICLE in a magazine discusses the merits of a certain vitamin, and if an ad for that same vitamin also appears in the magazine, FDA (as provided by the Rogers Bill and the legislative history that preceded it) could proceed against the advertising as false and misleading if it didn't

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agree with the facts in the ARTICLE. The intent of FDA is made clear in the following statement from FDA to Paul Rogers in the Subcommittee Hearing on FDA's Vitamin Regulations, p. 200, Part I:

"Articles in health food oriented magazines, such as *Let's Live* and *Prevention*, provide an indication of what is being promoted for various therapeutic conditions. The fact that advertisements for vitamins, minerals, and other dietary supplements in the same magazines generally do not discuss intended uses beyond those as dietary supplements, presents a problem from a regulatory standpoint."

WHAT YOU CAN DO

What you can do to be sure FDA doesn't strangle your favorite health magazine by getting Congressional authority to regulate advertising:

1. Let your Congressman know by every possible method that you DO NOT want FDA to be given authority over vitamin-mineral advertising. NHF has prepared new form letters for 1975 which you may order.
2. Contact your two Senators and Congressman and ask them to reintroduce the Proxmire Bill in the Senate or House.
3. If Paul Rogers is still Chairman of the House Health Subcommittee we will want your congressman to sign the Discharge Petition, at the same time he cosponsors the Proxmire Bill.

Convention Talks Available On Cassettes

The Annual West Coast NHF Convention was an exciting educational experience. What a wealth of health-promoting, life-saving information . . . information which you can now have for your own benefit and to share with others. All addresses given at the 1975 Annual Convention are now available on cassette tapes at the following bargain prices:

30 minute lectures.....$2.50 each
45 minute lectures..... 3.00 each
60 minute lectures..... 3.50 each

10% off on orders of from 5 to 10 tapes; 20% on orders of 10 or more tapes. Order tapes from the convention program (printed in the December **NHF Bulletin**) making sure that you give both the speaker's name and the title of his address. California residents add sales tax to the above prices. Send all orders to:

The National Health Federation
P.O. Box 688
Monrovia, California 91016

Local chapters having difficulty obtaining speakers for chapter meetings, should consider the use of these tapes. In this way, the valuable information presented by these outstanding authorities can be brought to the chapter members. Follow the tapes with an open forum discussion in which all the members may participate and perhaps add their personal experiences.

The FDA...

Reprinted from
FDA CONSUMER

FDA'S Authority and Activities

I. The Laws

FDA's authority is limited to the scope of laws passed by Congress and assigned to the agency for enforcement.

Principal responsibility is enforcement of the Federal Food, Drug, and Cosmetic Act, enacted to insure wholesome foods, safe and effective drugs and medical devices, harmless cosmetics, and truthful labeling of such products.

Other laws administered by FDA include:

1. *The Radiation Control for Health and Safety Act* – protects the public from unnecessary exposure to radiation from medical x-ray and electronic products such as color TV's and microwave ovens.

2. *The Public Health Service Act* –regulates the quality of biologic drugs and the sanitary practices of interstate carriers and provides for a sanitation program designed to minimize public health problems associated with the production, processing, and distribution of products prepared by the food service, milk, and shellfish industries.

3. *The Fair Packaging and Labeling Act* – requires truthful and accurate packaging and labeling: FDA authority in this area is limited to foods, drugs, cosmetics, and therapeutic devices.

4. *The Tea Importation Act*—designed to insure quality of imported tea.

5. *The Import Milk Act*—requires certification that imported milk meets U.S. requirements.

6. *The Caustic Poison Act*—requires such substances be specially labeled.

II. FDA—A Sampling

1. Makes periodic inspections of food, drug, medical device, and cosmetic establishments and examines samples of these products to determine whether they are adulterated or misbranded.

2. Investigates consumer complaints of contaminated products, injurious effects, improper labeling.

3. Assists industry in voluntary compliance with the law and issues regulations designed to prevent violations.

4. Supervises the recalling of defective products from the market.

5. Initiates more than 1,000 court proceedings each year against law violations.

6. Requires manufacturers to prove the safety and effectiveness

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of drugs and biologicals before they are put on sale to the public.

7. Licenses manufacturers of viruses, serums, toxins, vaccines, blood and blood components, and allergenic products.

8. Tests every batch (except for legal exemptions) of antibiotic drugs and insulin for safety and effectiveness before it is distributed. Manufacturers pay for this service.

9. Investigates therapeutic devices and diagnostic products for safety and truthfulness of labeling claims.

10. Establishes standards of identity, quality, and fill of container for food products in line with congressional mandate to "promote honesty and fair dealing in the interest of consumers."

11. Passes on the safety of food additives and checks to see that they are used properly.

12. Enforces safe limits on the amount of pesticide residues that may remain on food crops, if any.

13. Passes on the safety of colors for use in foods, drugs, or cosmetics, and tests batches of color subject to certification.

14. Requires that all labels identify the manufacturer, list ingredients as required, and show the net contents of packages.

15. Carries on extensive research to study long-range effects of chemicals and drugs on animals and humans.

16. Protects animal and human health by regulating veterinary drugs and medicated livestock and poultry feeds.

17. Promotes the use of nutritional information in food labeling to aid consumers in selecting a healthful diet.

18. Conducts educational programs to encourage consumers to read the label and get the protection which the law is intended to provide.

19. Publishes a Drug Bulletin to alert the health professions on important changes that affect patient care.

20. Inspects all blood banks to insure the safety of transfusions.

21. Protects against unnecessary consumer exposure to radiation by inspection of manufacturers and tests of marketed products.

22. Checks imports of foods, drugs, devices, cosmetics, and radiation-emitting products to make sure they comply with U.S. law.

23. Cooperates with state and local officials in the inspection of foods, drugs, and other products contaminated by floods, hurricanes, explosions, and fires in assuring their removal from the market.

The Origin Of FDA

Federal regulation of foods and drugs came about through more than 20 years of work by "the Father of the Pure Food Law" and his fight against widespread abuses by industry at the turn of the century.

In 1883, Dr. Harvey W. Wiley, Chief of the Bureau of Chemistry in the U.S. Department of Agriculture, assigned some of his staff to study problems of food and drug adulteration. At that time, medicine shows were peddling "cure-alls" containing mainly alcohol; crying babies mere quieted with a "special medicine" containing opium; and sugared water mixed with dangerous coal-tar drugs was sold as a headache remedy.

These and other conditions resulted in thousands of deaths and injuries. Yet it took many years of repeated effort by Wiley to attract a storm of public protest, culminating in enactment of the Food and Drugs Act of 1906. It prohibited interstate sales of misbranded and adulterated food, beverages, and drugs.

An important consequence of the Act was its stimulation of similar legislation by state governments to control local food and drug traffic not subject to Federal jurisdiction.

In its first years, the Food and Drug Administration (not so-named until 1931) concentrated on developing scientific methods of analysis —which are still the foundation of food and drug protection—working out legal procedures and techniques of inspection that would withstand court trials, and winning many judicial decisions that classified strengths and weaknesses of the Act.

The Act of 1906 served as the basic fabric of consumer protection for 32 years, with amendments and similar Acts added during that period to meet other specific needs. Authority to protect consumers was augmented to cover milk, therapeutic claims for medicines, misleading and deceptive labeling, standards of quality and of fill of containers or food packages, and for printing warnings and antidotes on labels of caustic poisons for household use.

By 1933, the FDA had brought action in more than 22,000 cases involving adulteration and misbranding of foods and drugs. Then, as now, resources were spread thin to cover all the Agency's responsibilities; nevertheless, that year FDA sought a major revision of the Act, which would greatly extend its authority.

The 5-year legislative battle that ensued finally produced the Federal Food, Drug, and Cosmetic (FD&C) Act of 1938. Reiterating the authority of the 1906 document, the new version also: extended coverage to cosmetics and medical devices; required new drugs to be proven safe before marketing; provided tolerances for unavoidable poisonous substances; authorized standards of identity, quality, and fill of food containers; authorized factory inspections; added the remedy of court injunction to those of seizure and prosecution; eliminated the burden on FDA to prove knowledge or intent in adulteration and misbranding cases.

Since its passage, FDA's administration of the FD&C Act of 1938 and 11 subsequent amendments has provided the American consumer assurance of the world's highest standards for foods, drugs, and cosmetics. And more recently, regulation of biological and radiological

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products has been transferred to FDA's jurisdiction.

To support these evolved responsibilities, the scientific capability of the Agency nas also increased, with the largest single advancement being the new National Center for Toxicological Research, concentrating currently on the long-term effects of food additives.

Today's FDA employs 6,500 persons, less than half of whom are in the Washington, D.C., area and has a budget of about $200 million. With these resources, FDA regulates industries whose products are estimated in value at $300-400 billion a year. Just as the regulation of the market and the market itself has changed drastically since FDA's founding, so have the demands of consumers. Today's public is able to shape FDA actions as never before, because it is kept informed about decisions facing the Agency and because the Agency actively seeks consumer participation.

When and How To Report To FDA

Consumers who report problems in sanitation, labeling, and safety of products regulated by FDA help the Agency to protect all consumers.

Such problems, reported by phone or letter, often lead to discovery and correction of violations, in some cases requiring recalls or criminal prosecution.

To insure prompt and thorough action on his report, the consumer must first determine if, in fact, it was the *product* that was at fault. Was it used as directed? Was it stored properly? If he finds the product was at fault, he should report the problem clearly and accurately to the FDA office nearest him, or to the Food and Drug Administration, 5600 Fishers Lane, Rockville, Maryland 20852.

The following should be included:

- Your name, address, telephone number.
- Clear statement of the apparent problem.
- As much detail as possible about the product label, including code marks.
- Name and address of store where purchased. Date of purchase.

Save whatever remains of the product or container for your doctor's guidance or possible FDA inspection. You should also report the problem to addresses on the label and to the store.

FDA has limited jurisdiction over certain consumer products. If you have complaints about any of the following, these are the Federal agencies to inform:

- Suspected false advertising—*Federal Trade Commission.*
- Meat and poultry products—*U.S. Department of Agriculture.*
- Sanitation of restaurants — *local health authorities.*
- Suspected illegal sale of narcotics or dangerous drugs (such as stimulants, depressants, and hallucinogens) — *Drug Enforcement Administration, U.S. Department of Justice.*

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Are You On the "Stuff"?

By JAY PATRICK

It's a chemical with a molecular weight of 342.20, with a formula $C_{12}H_{22}O_{11}$. It is a stable in air and has a sweet taste. Yet during the past 50 years it was probably a major factor in the deaths of hundreds of millions of people.

If you were bottle-fed as a baby, you may be sure that this chemical was a principal ingredient. As a child it must have been in the candy you were given, as a reward for being good.

Soon most of you were in one way or another consuming two pounds of the *stuff* a week, never realizing that this deadly chemical is just too much for the human body, which is progressively thrown out of balance in trying to handle this pure white intruder.

Chemists call it sucrose. You may call it sugar. Dr. John Yudkin in his book *Sweet and Dangerous* (Peter H. Wyden, Inc., Publisher) does a thorough job of telling you what sugar in all its many disguises does to you, how it is implicated in most of the heart disease that will kill some 800,000 people in the U.S. this year, in hypoglycemia, diabetes, diseases of the eyes, teeth, skin, and joints. In fact this insidious chemical seems to throw the whole body out of balance (homeostasis) and can be a prime factor in almost any ailment known to man, including cancer.

Sugar was so rare a few hundred years ago that only rich people could afford it. Indeed, in 1598, a German traveler visiting England remarked on the black teeth of Queen Elizabeth and commented "a defect the English seem subject to from their great use of sugar."

Sucrose, the sugar we use most, breaks down readily into the simple sugars, dextrose and levulose, which the bacteria in our mouths just love, going quickly to work on our teeth within a few minutes after the sugar enters the mouth. But this is only the tip—the most obvious aspect of the proverbial iceberg. "What is bad for the teeth is usually bad for every part of the body," says Dr. E. Cheraskin.

In the health food field, there is a widely held view that raw sugar and molasses and honey are much better for us than standard, completely refined sugar. Dr. Yudkin disagrees with this concept, stating that the more raw the sugar, the more bacteria present — and that the amount of additional vitamins available is still negligible.

He further holds that, while both honey and molasses provide some additional nutrients, these nutrients are not in sufficient volume to compensate for the heavy load of sugar present.

I talked at great length with biochemist Irwin Stone, who is not only the world authority on Vita-

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min C but one of the leading enzyme chemists of the country, holding some 25 patents. Dr. Stone points out that honey is simply *hydrolized* sucrose sugar. Bees have extracted the sucrose from flowers and have hydrolized it in their bodies. On the other hand, when man swallows sucrose sugar, the first thing his body does is to hydrolize it into the equivalent of honey.

"Thus," says Stone, "when we purchase honey, we are just paying the bees for performing a chemical operation which is normally performed in our own bodies. – And the net result is that, although honey may contain a few vitamins not present in *refined* sugar, the body still receives a load of the same basic material."

"That's true about honey," says Dr. Cheraskin, "but, fortunately, honey has a sort of built-in safety mechanism in that few people can eat a whole lot of it without getting nausea. So it does work out better for most people, since they do get some vitamins, too."

Dr. A. M. Cohen, of Israel, reported recently at a meeting of the International Academy of Preventive Medicine in Washington on his studies of diabetes. Dr. Cohen found that long-term sucrose feeding leads to impaired glucose tolerance in both man and in the rat. He also found that succeeding generations of animals, when fed a high-sucrose diet readily developed diabetes.

Many other adverse ailments resulted—vascular changes, impaired kidney function, diabetic retinopathy. He also made a thorough study of the development of diabetes in the Yemenite Jews immigrating to Israel. In the Yemen area where they had previously lived, these people had a diet containing no sucrose, and the incidence of diabetes was extremely low. After living in Israel and consuming large amounts of sucrose, the incidence of diabetes rose substantially. Yet, by changing their diet from sucrose to starch, which is more slowly converted in the body, most of these adverse metabolic changes were either halted or never occurred.

In their latest book *Psychodietetics* (Stein and Day), Drs. E. Cheraskin and W. M. Ringsdorf, Jr., include sugar with other refined carbohydrates, such as white flour, white (polished) rice, all highly sweetened foods (desserts, sweetened beverages, candy), and all baked goods made from white wheat flour as primary factors in the high incidence of mental illness. They list abnormal sugar metabolism as causative in schizophrenia, depressive psychosis, nonspecific depression, alcoholism, manic psychosis, anxiety, irritability, fatigue, mental confusion, and uncontrolled emotional outbursts.

Molasses has a slight edge over refined sugar in that it contains a few vitamins and a few trace minerals. However, it is still the same basic chemical marauder, sucrose.

"Sugar," says Dr. W. D. Currier of Pasadena, "is nothing but empty, harmful calories. When ingested, it imposes a great strain on the body as it is metabolized, enormously stepping up one's requirements for vitamins and minerals.

"Furthermore," the doctor adds, "sugar, as well as fat, causes stickiness of the blood cells in the blood stream, a clumping of the red blood cells and platelets which tends to block the capillaries, the tiny blood vessels distributed throughout our bodies. These red blood cells are 7 microns in size and must go through capillaries only 3½ microns in diameter, bringing oxygen to the tissue and picking up carbon dioxide.

"This seemingly impossible feat is accomplished only because the red cells assume a pear shape and slip into the tiny vessels sideways. But those cells which get stuck together with sugars or fats cannot accomplish this gymnastic trick, so every organ, all tissues of the body suffer in consequence."

"But it's not always easy to pin down the responsibility of sugar in many disease conditions," says Dr. Cheraskin. "A man dies in a hospital, for instance, and the cause of death may be listed as pneumonia, when actually, his white cells may have been made so sick from high intake of sugar that he could not throw off the germ."

So what should we do about this situation? Obviously we should learn to stay away from sugar wherever, whenever, we can. Of course, we find it in so many unexpected places: in our tomato catsup, salad dressing, barbecue sauce, many condiments, even in crackers.

Certainly we can learn to avoid the things that are *loaded* with sugar, like those leading American deserts, apple pie and ice cream. With enough will power, one can thus bring his consumption to a tolerable level, made even more tolerable if he has a high daily intake of Vitamin C and other agents such as magnesium, zinc, and niacin, which aid the body in handling sugar. Of course, he needs all the other nutrients, too.

Personally, I found that, once I gave up the *stuff*, my sense of taste was much improved and that most of the sweetened things that I subsequently tasted seemed entirely too sweet. Yet, if one must have something sweet, there are other alternatives. It will offend many health-conscious people that I even mention saccharine, which is still allowed on the market. Saccharine is rated 300 times as sweet as sugar. So this means that to get equivalent sweetness, one need swallow only 1/300th as much as he would of sugar. Obviously, the body is receiving a whole lot less of a chemical than in the case of sucrose; and the total metabolic requirements are also proportionately reduced!

But a most promising sweetener is just being introduced. It is aspartame, offered by the Biochemics Division of G. D. Searle & Co. under the trade name Equa 200.

Aspartame is approximately 200 times as sweet as sucrose and is

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regarded as non-toxic at any reasonable use level. Accordingly, it has been approved by the FDA for use in a variety of foods and beverages.

This is a dipeptide composed of two naturally occurring amino acids, aspartic acid and phenylalanine. Aspartic acid is present in plants and is also produced in the human body. Phenylalanine is not produced in the human body but must be obtained from food and is regarded as essential for good health.

Equa 200 is being made only in Japan at present on a pilot basis, so its price is currently $100 per pound, but, based on its potency, this is like 50c a pound at a sweetness level 200 times that of sugar. Once their plant being constructed in Augusta, Georgia, gets going, say the Searle people, the price should get down to $50 per pound, equal to 25c a pound for sugar. That won't be bad, will it, since the price of sucrose recently soared to more than three times that level?

Despite growing use of narcotics in our society, it seems obvious that this *stuff*, sugar, ends up doing more damage than all the narcotics in the world put together. This is partly because it disables so many. Thus, for the many reasons listed, it is surely a drug, and it is evident that a wide-awake Food and Drug Administration, unhampered by powerful sugar interests, would so classify it, placing it on a prescription basis.

We all know about the warning label now compulsory on the cigarette package. Yet the adverse effects of high sugar intake, now averaging more than two pounds per person per week, must be far greater than the damage induced by the obnoxious cigarette. But sugar is such a nice looking, white, clean product!

Grandma used to use lots of it in those wonderful cakes and pies she made. We're so used to it that we can't somehow think of it as a real villain in our lives. Yet the facts indicate that it is probably the most degrading factor in man's modern environment.

It is our further misfortune that this drug is very versatile, that it serves as a major component in probably hundreds of thousands of things man eats, which, accordingly, should not properly be classified as foods.

Many researchers, including Dr. Linus Pauling, Dr. A. Hoffer, and Dr. E. Cheraskin, believe that if sugar were subjected to the same testing procedures that outlawed calcium cyclamate under the Delaney Amendment, this dangerous chemical would have to be taken off the market. Indeed, many scientists feel that calcium cyclamate (30 times as sweet as sugar), which soon may be reinstated by the FDA, is probably less harmful to the body, as used, than sugar, because so much less is required to make a product palatable to the millions who have become addicted to sweets.

Accordingly, all products containing this white villain should, if not withdrawn from the market, carry this labeling:

> WARNING: Contains sucrose. May cause systemic damage, heart disease, hypoglycemia, diabetes, vascular damage, diseases of the eyes, teeth, skin, and joints.

So don't you think we should, above all, get our babies off the *stuff*? This would at least give them a reasonably good chance to develop into healthy citizens. Then, too, we must somehow get our government to act in our best interests and to tackle the problem for what it is, *drug addiction.*

But it's a good thing for the health of our nation that sugar has gone to such astronomical price levels. Maybe we'll eat less of it now. We should export more of it to the Russians. As with Pepsi Cola, it can be our secret weapon against them.

$400,000 In AMA Political Action Funds Donated To Congressmen

In a report titled *Your Congressman May Be Hazardous To Your Health*, the Health Security Action Council has revealed that 42 congressmen, all but three of them Republicans, have received campaign contributions totaling in excess of $400,000 from the AMA's Political Action Committee. The report continues by stating that most of the congressmen involved are supporters of the AMA's health insurance proposal.

The Health Security Action Council is a group formed four years ago to support national health insurance legislation. The Council states that its report is based on information provided by the AMA committee and from the congressmen themselves or their re-election committees.

The chairman of the American Medical Political Action Committee, Dr. W. J. Lewis, criticized the report for singling out the 42 congressmen saying that his committee supported 200 House and Senate candidates, about half of whom were sympathetic to the AMA health insurance proposal.

At least 11 candidates, however, returned the contributions which they had received from the AMA committee because they believe voters are skeptical of politicians who take campaign money from special interest groups. "The special interest groups have turned so many people off the election process following Watergate," said Edward Murnane, campaign manager for Rep. Phillip M. Crane (R-Ill.) who returned a $1,000 contribution. "It is a form of influence peddling the American people will not tolerate."

The Achievement Of Health

A Personal Responsibility Needing Freedom Of Choice

By JOHN YIAMOUYIANNIS, Ph.D.
NHF Science Director

One of the major goals of The National Health Federation is to help keep healthy people healthy. This seems like an easy task. All you have to do is maintain a clean environment, eat properly, get sufficient exercise and sleep, live in the proper climate, have a good outlook on life and be fortunate enough, as most of us still are, to have genetics which allow us to function properly.

However, staying healthy is not an easy task. Our environment is being polluted to such an extent that none of the health factors are left unharmed. Even if we could obtain unpolluted food, the amount of junk food (candies, soft drinks, and other foods which are processed to death, fortified with junk, and preserved with poison) has increased to the point that, should you be hungry and go to the vending machine, the only machine you will find that does not contain junk food is the cigarette machine, which of course just contains poison.

In today's society few of us avail ourselves of the opportunity to get the proper amount of exercise. Many sit behind a desk all day, only to come home from work to sit in front of a television set. Then we wonder why we have trouble sleeping or do not feel relief from the night's rest. Quite simply, our bodies are tired of resting and our blood cholesterol levels and increasing rate of heart attacks show just how damaging this continual inactivity is.

And how many people do you know with a good outlook on life. How many people have to smoke or overeat to make life worth living? How many people have to abuse drugs, be they sedatives or marijuana—sleeping pills or heroin, to make life tolerable. "Hell, give me another drink, I'm not going to live forever anyhow."

It's hard to sell health. When we have it, we take it for granted, and it is not until we lose it that we appreciate how important it is. It seems as if we're trying to see how much we have to mistreat ourselves in order to get sick. "Yep, last night I went through 36 cans of beer and didn't even pass out."

Depending on the genetic makeup, climate can be an important health factor. For example, put an Eskimo into the Amazon jungles for take a person with the sickle-cell trait and have him or her live in the Himalayas and observe their general health. In addition to temperature and altitude, relative humidity, the severity of seasonal changes, and other climatic conditions have a profound effect on our health.

And while we cannot change our genetic makeup appreciably (except to make it worse with the help of mutagens such as thalidomide and fluoride), we can alter other health factors to accommodate what would otherwise be an unbearable genetic trait such as reducing the sugar intake of diabetics or the phenylalanine intake of phenylketonurics.

Another goal of The National Health Federation is to restore good health to sick people by encouraging them to adopt a sensible health-promoting program. Now it is harder to restore health than to maintain health, but in many cases the changed mental attitude of someone who is sick and realizes what is being missed by not having health can often make him or her become the most ardent follower of a health-promoting campaign and also the most ardent supporter of The National Health Federation. The unfortunate thing about this is that we have to wait for a crisis before we start doing something. How we wish that those with relatively good health would be our most ardent supporters, having the foresight to appreciate good health, the mental attitude to love life, and the desire to maintain their health.

When a person has ignored health-promoting practices to the extent that other methods are necessary to restore health or when a person for reasons of severe genetic abnormalities, injuries, acute infection, etc., finds it necessary to consult one of the healing arts, The National Health Federation feels that the patient should have the freedom to consult the healer of his choice. This is not to say we believe a person with a foot problem should go to the dentist but rather that all choice for treatment should be open to him. The trouble with the healing profession is that it is monopolistic and close-minded. Medical doctors are trained in only one of the healing arts and some of them engage in the quackery of pretending they are qualified to diagnose health problems involving toxicity due to new chemicals (pollution) or health problems involv-

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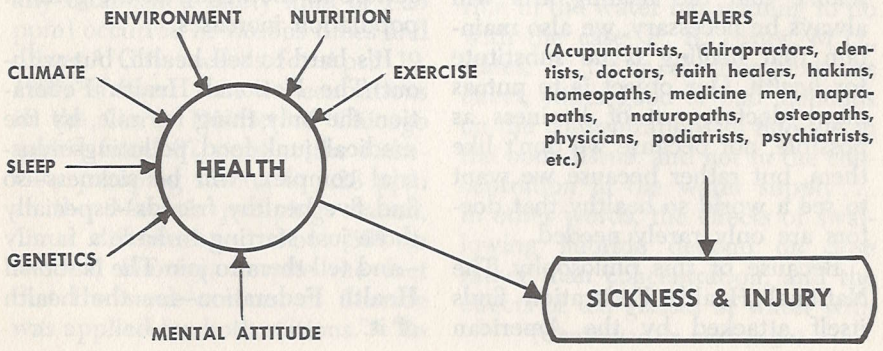

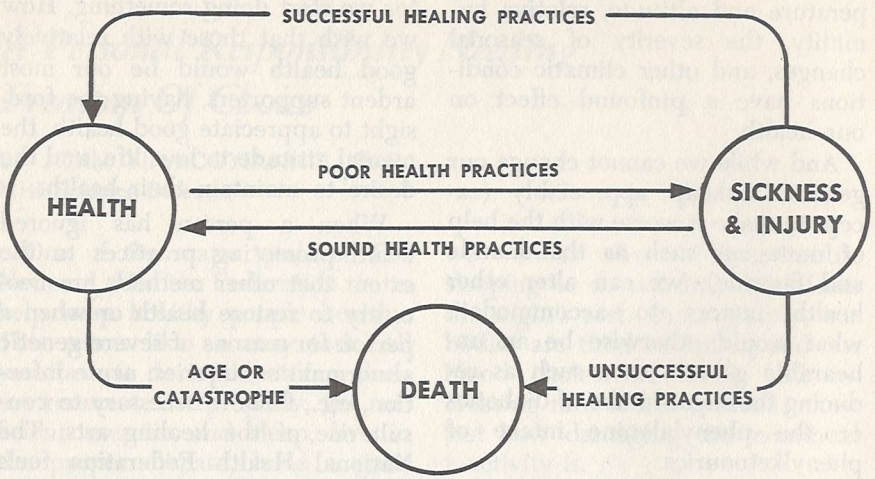

ing nutrition when they have never had training in nutrition and have never had a patient poisoned with 'compound X' before, but they are forced into this position by their own greed. Rather than allow a healing art that pertains to the area of nutrition, they maintain their monopolistic, price-fixing grasp of the healing arts, and in those areas where they have no expertise, they quack their way through.

Ultimately, the goal of The National Health Federation is health —good health for everyone through good health practices. While we realize that the healing arts will always be necessary, we also maintain that *healing* is no substitute for *health*. Our object is to put as many doctors out of business as possible, not because we don't like them, but rather because we want to see a world so healthy that doctors are only rarely needed.

Because of this philosophy The National Health Federation finds itself attacked by the American Medical Association, American Dental Association, as well as their friends at the Public Health Service; the junk food and drug industries as well as their friends at the Food and Drug Administration; polluting industries as well as their variance-granting friends at the Environmental Protection Agency; and finally by the politicians coast-to-coast that are beholden to these groups for their political lives. The National Health Federation is the only health organization that I know of that is beholden only to the consumer and can only gain in stature as the health of the general population increases.

It's hard to sell health, but without The National Health Federation the only thing for sale, by the medical, junk-food, polluting-industrial complex, will be sickness—so find five healthy friends—especially those just starting to have a family —and tell them to join The National Health Federation—for the health of it.

Fluoridation Cannot Be Controlled

By LEE HARDY

No. 17 In A Series

Fluorides can be inserted into public water systems in the proportion of one part of fluoride to one million parts of water. There the control ends. Jonathan Forman, M.D., in 1961 reported on studies made of the distribution of fluorides in public water systems. "Fluoridation can put in exactly one milligram in 100 centimeters of water," he states, "but it cannot distribute it equally throughout the system. Studies have been made in twenty cities which show that the delivery of fluorine in fluoridated water systems varies from zero to two parts per million. Practically all children living on a water main delivering two parts per million would be disfigured and poisoned."[1]

In 1956, when the Chicago water system was fluoridated, Chicago was conceded to have one of the finest water systems in the nation. Still, variations from zero ppm to 1.35 ppm (compared with the officially established safety limit of 1.25 ppm) occurred at various times and places.[2] City records for April 19, 1957, showed that concentrations in the North District of Chicago varied from .87 ppm at the Lakeview pumping station to 1.28 ppm at the Mayfair pumping station, "...a difference of about 50% in residual fluorine, despite the fact that the same amount of fluoride was applied for both stations."[2] "In terms of percentages, the City failed 99.4% of the time to maintain even a monthly average of (the intended) one part per million."[3]

There are records of instances of extreme danger from malfunctioning of mechanisms which insert fluoride into the water system. C. W. Blake, water chairman at St. Maries, Idaho, reported on February 23, 1956, that "...55 pounds of the stuff (sodium fluoride) was injected into the reservoir in 24 hours, which proves that you can't put too much faith in a machine."[4] For a town of fewer than 2,500 people this amounts to a considerable dosage.

There is a serious fallacy in the idea that water fluoridated at one part per million will supply the "right amount" for guarding children's teeth against decay. Aside from the fact that there is no "right amount" for fluorine in any human system, the concentration of fluoride in the water has nothing to do with the case. F. B. Exner, M.D., states, "...it is obvious that the effect, either good or bad, depends on the concentrations of fluorine in the body tissue, and not in the concentration in the water supply... in other words, the effects of swallowing fluoride depend on dose rather than concentration; and the effects of ten glasses of water with

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one part per million of fluorine are exactly the same as those of one glass with ten parts per million."[5]

It is known that the consumption of water varies greatly among individuals, and by the same individual under varying circumstances. In his testimony in the suit against the City of Chicago et al, Dr. Exner stated, "... people who perspire a great deal—lots of people in the summertime and people who work at hot heavy work – have been known to drink as much as twenty-five quarts of water a day, which they have to have to maintain their water balance, and there are people with certain diseases, notably a disease called diabetes insipidus, who may have to drink thirty or forty quarts of water a day to live ..."[6]

It is obvious that many a child will drink more than his allotted "one quart per day" of fluoridated water, and will thus run the chance of exceeding the presumed safe limit of fluoride ingestion. On the other hand, many children meet their fluid requirements by drinking milk, fruit juices, bottled drinks and the like which are not obtained from tap water. There is no way under fluoridation to make sure that any child ingests the prescribed amount of fluorine, or that he may not suffer harm from exceeding the amount.

In the preceding article we have observed that less than one percent of the water dispensed through a fluoridated water supply is used for drinking by children who are presumed to be benefited by it. The remainder goes for other purposes such as watering lawns and gardens, fighting fires, washing automobiles, filling swimming pools, taking baths, flushing toilets or for industrial uses. In all such uses the fluoride content eventually passes into the environment as a pollutant. In this way it adds to the fluoride content of foods produced on soils thus contaminated, and thus to the total ingestion of fluorides by those who eat them. For example, tea infusion has been listed as containing in excess of 60 ppm of fluorine.

In addition the air we breathe is a source of fluoride ingestion. As observed in early articles of this series, the air near industrial plants which emit fluorides has been a hazard resulting in the deaths of inhabitants of those areas. Now fluoride contamination is found in the air of many areas. The use of hydrofluoric acid in the refining of gasoline began in 1942 in the Los Angeles area. It is reported that 1942 was the first year in which eye irritation was noticed in that area. In the 1953-1957 report of air pollutants by the National Air Sampling Network, fluorides were reported as sixth among contaminating agents. It is probable now that fluoride contamination of the atmosphere has become a major factor wherever there is a great deal of automotive traffic.

It is obvious that there is no way for most individuals to escape the ingestion of fluorides which occur within their environments. The quantity which any individual ingests is beyond his control, and often doubtlessly exceeds the limits of safety. To this, uncontrollable amounts are added through the most inexcusable of all sources of pollution, the fluoridation of public water supplies.

1. Forman, J., "A Statement on Fluoridation," *Natural Food and Farming,* March 1962, P. 44.
2. Final Summary Submitted in the Fluoridation Injunction Suit Against the City of Chicago, P. 16.
3. Ibid., P. 18.
4. St. Maries, Idaho, *Gazette-Record,* Feb. 23, 1956.
5. Exner, F. B., "Behind Fluoridation—the Real Issue," *Natural Food and Farming,* June 1958, P. 6.
6. Exner, F. B., Final Summary Submitted in the Fluoridation Injunction Suit Against the City of Chicago, P. 11.

Are We Being Homogenized To Death?

The increasing incidence of atherosclerosis, coronary heart disease, and even multiple sclerosis may be intimately related to the prevalent practice of homogenizing milk, says Kurt A. Oster, M.D. Writing in *Medical Counterpoint,* he presents some rather convincing support for his theory. He says cows' milk is the only important food containing xanthine oxidase but that this enzyme, in non-homogenized milk, is ordinarily changed before absorption from the intestine. When milk is homogenized, however, the particle size of fats and proteins are so minute that these and the xanthine oxidase pass readily into the blood stream from the intestine. Once in the arterial system, the xanthine oxidase deposits itself in arterial walls and in the heart muscle, there destroying plasmalogen, a phospholipid which is an essential component of the cell wall membrane with the highest concentrations in the skeletal muscle, cardiac muscle, the lining of the arteries, and the myelin sheath of nerves. Dr. Oster regards the atherosclerotic plaque as the body's attempt to repair or protect the arterial wall damaged by the xantine oxidase.

– From *Pat-Ten Capsule*

BEQUESTS and GIFTS

BEQUEST IN WILL: Here is a suggested statement for the convenience of those who wish to incorporate into their wills a bequest to The National Health Federation:

"I give, devise and bequeath to The National Health Federation, a non-profit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of.....($.....) (and/or property herein described) for its discretionary use in carrying out its general aims and purposes."

INSURANCE POLICY GIFT: For those who wish to name The National Federation as sole beneficiary, or one of the beneficiaries, in an insurance policy, it is suggested that you obtain from your insurance agent the necessary legal form or application for your signature, before witnesses if required. The following designation is suggested:

"The National Health Federation, a non-profit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of.....($.....) for its discretionary use in carrying out its general aims and purposes."

MEMORIAL FUND: Should the donor desire to create a Memorial Fund in a will or insurance policy, state, after the sum of property described in the beneficial gift, that the fund is to be known and designated as the ".....(name)..... Memorial Fund."

The Sugar Rip-Off

By IDA HONOROF

The Bureau of Labor Statistics Wholesale Price Index rose 22.6% in the last year, higher than any 12-month span since 1947. Sugar prices, however, skyrocketed over 300% within one year. Recently, sugar prices rose 25% in one month. Sugar companies have registered all-time high profits. The Michigan Sugar Company (the largest sugar beet processor in Michigan) for example, on November 15, 1974, announced a profit of over 2,000% and their profits would have been over 4,000% "except for a change in accounting procedure."

This latest sugar rip-off is a BLESSING IN DISGUISE. During the meat boycott, consumers learned to do without animal protein – learned that vegetable proteins could provide them with essential protein and amino acids. They will now learn that they don't need refined sugar. Fruit, vegetables and honey can provide them with natural sweeteners.

Excessive use of sugar has been linked with hypoglycemia (low blood sugar), hyperglycemia (high blood sugar), coronary thrombosis, diabetes, blindness, tooth decay, seborrhoeic dermatitis, etc. "Americans eat more than 120 pounds of sugar per person-per-year," according to Dr. Lawrence Power, of Wayne University, addressing a recent National Food Editors Conference in Chicago. This includes visible sugar and the invisible sugar in hundreds of prepared foods and drinks.

According to Drs. Cheraskin and Ringsdorf, authors of *Psychodietetics*, ". . . sugar appears in the most unlikely products. Were you to shop diligently with an eye towards eliminating every food item containing sugar, you would have to scratch from your shopping list 90% of your normal purchases including baby food."

Dr. Michael Jacobson, Director of Center for Science In the Public Interest, estimates that about 19% of the average American's caloric intake comes from sugar. His recently released chart shows the sugar content of 65 different fabricated foods, some of them containing as much as 68% sugar! "Guesstimates" concerned him because manufacturers rarely disclose the precise sugar content.

We are reminded in *Psychodietetics* that since 1890, our diet has undergone two technological disasters from which it has never recovered–the milling process which strips off the outer bran coating and the wheat germ kernel when grain is made into flour, thus eliminating vitamins, minerals and essential amino acids; and the refinement of sugar into "pure" white sugar, a substance totally devoid of essential micronutrients. Refined sugar is a chemical menace for it lacks the very B vitamins and minerals necessary for its assimilation and utilization. The body then steals the vitamins from other foods or from storage depots in the body, creating a B-complex and mineral deficiency – a possible important factor in emotional upset.

Drs. Cheraskin and Ringsdorf say, "The sugar-laden American diet has led to a national epidemic of hypoglycemia, an ailment characterized by irrational behavior, emotional instability, distorted judgment and nasty personality defects. The disease is full of paradoxes. One might reasonably assume that eating too much sugar would raise the level of sugar in the blood, but the body does not work in such a simple fashion. Instead, LOW blood sugar is the result. Hypoglycemia is the exact opposite of diabetes, yet it is often the forerunner of that disease. In diabetes, too little usable insulin circulates in the blood stream. In hypoglycemia (also called hyperinsulism), there is too much. An excess of this sugar-related hormone, released by the pancreas in response to a rapidly rising blood sugar, drives blood sugar levels below normal, triggering a craving for sweets along with a variety of physical or mental symptoms.

"An abnormal plunge in blood sugar levels is perilous, sending shock waves through every cell in the body and affecting the nervous system and the brain most of all. An erratic mental state results, with a list of symptoms and complaints reading like a compendium on a bottle of snake-oil medicine. The crazy-quilt pattern of symptoms is hard to diagnose, easy to pass off as 'just an attack of nerves.' Most hypoglycemics are regarded as 'cranks' or 'complainers' by their families, 'hypochondriacs' by their doctors, 'neurotics' by society. Milder cases are advised, 'You'll get over it—eat something sweet when the craving hits.' The worst thing a hypoglycemic can do, for the more sweets he eats, the more insulin is released, the lower the blood sugar levels plunge, the more sugar is craved . . . on and on in a never ending cycle. Sweetened snack foods and drinks, and white-flour products are the most deadly for hypoglycemics. A normal pancreas, through its insulin production, is able to keep the body's blood sugar level under control and in balance, but when it is habitually assaulted by these offending foods, it panics and produces too much insulin, causing blood sugar levels to plunge downward. Every tenth person inherits a supersensitive pancreas genetically incapable of handling large intakes of sugar. Such a pancreas overproduces insulin quite easily. Quickly overburdened, it loses all ability to function with precision and becomes an ineffective regulator."

"Adult crimes, including murder, may also be hypoglycemic-related," says Dr. E. M. Abrahamson who

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found that "the brain waves of persons with low blood sugar are abnormal . . . with chronic sugar starvation of the brain cells, comes a fogged moral sense and distorted conceptions."

Dr. John Yudkin, physician, biochemist and researcher at London University and author of *Sweet and Dangerous*, points out that 1/5 of all deaths from coronary heart disease occurs in the U.S. and Britain. In these and other affluent countries, at least one out of three men over the age of 45 will die of heart disease. He believes that sugar is an important cause of heart disease, although not the only one.

Two "Space-Age" products, *Tang* and *Kool-Aid*, were reviewed at the April 16, 1973 U.S. Senate hearings on nutrition education. After Dr. Lloyd Tepper (H.E.W.) mentioned that two studies on *Tang* and *Kool-Aid* had shown a slight increase in the incidence of cavities, Kenneth Schlossberg, Hearing Staff Director, challenged him, pointing out that ". . . an increase of 43% to 92% is far more than a slight increase. The study on the drink products was conclusive."

Dr. Jean Mayer stated that "Diabetes is the second leading cause of blindness in the United States. Within 10 years, if we don't change our sugar habits, it will be No. 1. By 1980, 1-out-of-every-5 Americans will either have diabetes or inherit the characteristics of diabetes, which they can pass on to their children or grandchildren. There's a direct link between the amount of sugar we consume and the body's ability to combat diabetes."

Drs. Cheraskin and Ringsdorf recommend that all candy wrappers include the following warning: *This product can be dangerous to your mental health.* That sugar coated cereals should have an X-rating—more dangerous to children than pornography. That sugar-laden processed foods should be tagged with a skull and crossbones. That vending machines that spew forth sugar-filled snacks should carry large red warning signs, *Hazardous Product Within.* That refined sugar should be kept under lock and key, like other dangerous weapons, to be sold only to licensed users. That a high excise tax should be imposed on "junk foods" to support inmates of mental institutions.

In the Los Angeles area, a newly organized group, CHAMP (Consumer Health Against Monopolistic Profiteering), has called for a sugar boycott and is urging consumers to quench their sugar thirst with fruits, vegetables, and (moderately) honey. They believe that this present sugar rip-off is truly a blessing in disguise and that a sugar boycott will work to the participants' own health advantage. Their slogan is, *Get the sugar-monkey off your back—Boycott Refined Sugar.*

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THE FAMILY CIRCLE

By CHARLES I. CRECELIUS
President of The National Health Federation

Agribusiness is the name collectively given to those billionaire companies that have invaded the field of food production and marketing. A careful evaluation of the following quotation may give us the basic reason for the great increase in the price of sugar—up more than four times the price of a year ago. "Many of the corporations are conglomerates with no argicultural background. They've bought into food as a fertile field for growing, processing, distributing and **controlling the supply.** Agribusiness corporations now control 51% of our fresh vegetables and 95% of processed vegetables . . . 85% of our citrus crops . . . **100% of sugar cane** . . . 97% of broiling chickens . . . and 40% of eggs." (ABC News Close-Up, **FOOD: Green Grow The Profits.**) This is the important booklet we have mentioned in previous bulletins. 50c each—3 for $1.00. Available from NHF. Sugar, like drugs and oil, is a story of monopoly and profits. Sugar companies have joined the other two in gaining unusual windfall profits. Many nutritionists are hoping that sugar will price itself out of the marketplace to everyone's benefit.

The power of the pen is mighty. We suggest you make it a habit to write your elected officials regularly on matters of importance. NHF singles out only a few of the most timely issues for concentrated letter writing campaigns. Many others need attention. You will find a great satisfaction in being counted as one freedom-loving American who recognizes the inequities that exist and who further determines to do something about them. Think what could happen if everyone would!

NHF has many wonderful chapters helping in local communities to keep the fire of health freedom burning brightly. **Fred Hart,** Founder of NHF and Chairman of the Board of Governors, envisioned the Federation as being made up of many small neighborhood chapters. If this could be achieved it would give our organization much additional strength and stability. Our effectiveness could be greatly expanded.

Chapter workers feel frustrated when they lack a supply of varied programs to present or when attendance is below what is expected. These fears and frustrations would melt away under a program of chapter expansion in keeping with the provisions laid down by our founding fathers. Chapter expansion could move forward with new meaning and potential if each of us would embrace this idea and accept the following philosophy.

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"People often fail to realize that they can come together to learn something new even if they don't belong to a school or have a professional teacher around. In our culture, we undervalue our own and each other's knowledge and intelligence, and fall into the habit of being led. The way to break this habit is by breaking it. If you want to learn something and know someone who knows it, ask him or her to teach you. If no one knows what you want to learn, get some friends together and puzzle it out together." (from **Reading: How To** by Herbert Kohl.)

Five or ten people can form an effective NHF working chapter. Knowledge alone wll not win. What we do is the key. Please write us your intentions of forming a local NHF chapter. The process is a very simple uncomplicated one.

Requiem For the Late AMA Council On Drugs

Reprinted from SPEARS HOSPITAL NEWS*

Important insight into the political nature of the American Medical Association (AMA) can be gleaned from an article by Dr. John Adriani in the Sept.-Oct. edition of FREEDOM, the independent journal published by the Church of Scientology.

One of the important aspects of Dr. Adriani's hard-hitting article is that it authoritatively turns the spotlight on the decay setting in on the once august and celebrated AMA.

In a nutshell, Dr. Adriani charges the AMA with emasculating the work of the AMA's own Council on Drugs, a group charged with the responsibility of providing all required data concerning the identity, ingredients, strength and purity of all new and non-official remedies to the medical profession in the public's behalf.

Dissolved By AMA

The Council on Drugs, originally organized in 1905 as the Council on Pharmacy and Chemistry, not only had its findings diluted but in the fall of 1972 was itself dissolved by the AMA Board of Trustees in what was called "an economy measure."

What precipitated the Council's demise, according to Dr. Adriani, past-chairman, was the preparation, beginning in the mid-60's, of a compendium on drugs called AMA Drug Evaluations.

After a lapse of over two years and the expenditure of nearly $2,500,000, Dr. Adriani became alarmed at the lack of progress on the project by the Department of Drugs which had been assigned the task of preparing the volume under the Council's surveillance. Only one of 90 contemplated chapters had been written at this juncture.

*Published by Spears Chiropractic Hospital, 927 Jersey, Denver, Colorado 80220

When the Council chairman expressed his anxiety at the delay, an ad hoc committee was appointed to oversee a "crash program" to expedite preparation of the book. Eighty-nine chapters were then written in one year, sent to the press and in Dec., 1970, were ready for binding and distribution.

Then followed an incredible series of delays starting in Jan., 1971, when Dr. Max Parrott, chairman of the AMA Board of Trustees, asked that publication be held in abeyance because "industry (drug) had not seen and reviewed the book."

The book was summarily shipped to industry, and when Council members remonstrated, the chairman frankly stated they desired Council's cooperation on the matter because it meant revenues to the AMA of a substantial sum of money on the order of $10 million or more.

Later, industry served notice it was displeased with the book and offered to do rewrite. Hundreds of corrections were suggested by industry of which 36 were deemed to have merit by the ad hoc committee. The book finally appeared in April, 1971. It contaned a disclaimer inserted by the chairman of the Board of Trustees.

A Compromise Reached

The Council further recognized that the book had to be updated every 1½ to 2 years, but more haggling developed with the projected revisions about the value of a word such as "irrational" and a term like "not recommended" at the conclusion of its evaluation on specific drugs.

The trustees, the Council was informed, directed that the objectionable phrase "not recommended" be deleted from the second edition. A compromise was later reached whereby a reason was given for the not recommended judgement — which apparently stuck in the craw of both the Board of Trustees and the pharmaceutical industry.

The dissolving of the AMA's Council of Drugs followed.

A professor of surgery at Tulane University School of Medicine and clinical professor of surgery and pharmacology at Louisiana State University School of Medicine, Dr. Adriani wrote in the Church of Scientology journal that the trustees admitted they were "politicians" and were obliged to look with favor upon the drug industry for a compelling reason — because a sizable portion of the Association's budget was derived from pharmaceutical industry advertising.

The Council had looked at the argument from a different viewpoint, the patient's welfare. By abolishing the Council, the Board of Trustees were, in essence, saying they were no longer in the business of providing meaningful drug information to the medical profession.

The handwriting was on the wall even earlier when the Board of Trustees in the mid-50's sabotaged the Council on Drugs' "Seal of Approval" policy in an action related

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to drug industry pressure and influence.

Another signal relating to the decline and fall of the Council on Drugs was the curtailment of publication of three useful books on drug information for the practicing physician. Still another nail was driven in the Council's coffin when the Trustees abandoned the requirement that a drug be advertised in publications and journals of the Association by its generic name. Suddenly, trademark names appeared in advertisements, another concession to the pharmaceutical industry.

A Prognosis

Dr. Wesley Hall, a former president of the AMA, said the organization needs restructuring, according to Dr. Adriani, and unless it occurs the AMA will continue to deteriorate in scientific endeavors and become a socio-economic group whose interest will be self-serving and directed toward the physicians economic welfare and not the public's well-being.

Dr. Adriani's article suggests the AMA is guided more by economic and political motivations, that it actually suppresses information about the drug industry, and has little input from work-a-day physicians.

The past chairman of the late lamented Council on Drugs wrote the following prognosis on the AMA:

"... It is not dead on its feet and need not lie down to be embalmed, but if its direction continues in the same vein as it has in the past, it had better be prepared to do so. Perhaps the 'at large' voting that was adopted, whereby others than delegates are eligible for election and may be elected to the Board of Trustees, will be a first step in restructuring the AMA and eliminate the in-breeding of self-perpetuating medical politicians in high positions of trust.

"Perhaps this matter will come to an end and 'new blood' and 'youth' will have more to say about medicine and how it relates to the public's welfare. We sincerely hope so."

"I bequeath to..."

By R. A. LAURYE
NHF Business Administrator

A recent invitation from one of our good NHF members, which took me to his city for consultation concerning his wishes to continue in perpetuity his support of the Federation, reminded me that I should write in detail of a very important manner by which this can be done and a method which may interest many of you.

Basically, there are two methods by which one can continue to underwrite the goals and activities of NHF after one's demise. A commonly used plan is that of a testamentary trust established by terms of a Will, and over which the Probate Court would maintain continuing jurisdiction. This type of Trust results in continuing administrative and legal fees and, as a plan for the final disposition of an estate, creates unnecessary expense.

A second type of Trust is known as an *Inter-vivos Trust* or *"living trust."* This Trust is established during the lifetime of the donor, and provides that he/she is entitled to all income from the trust during his/her lifetime, and so much of the principal of the trust as may be necessary for support.

If you consider this manner of undergirding the NHF, you could be the trustor and trustee of the Trust and hence, would be able to determine what funds are necessary for your support and desires, up to the whole of the principal. Upon your passing, the National Health Federation assumes the responsibility of successor trustee, and is instructed to distribute the income and/or principal of your estate in such a fashion as you specify. For instance, you might make it a continuing trust by providing that just the income will be disbursed annually.

An alternative would provide that the income plus a given percentage of principal be disbursed annually. Furthermore, you might specify the particular purpose for which the Federation is to use the funds. Of importance here is the fact that the NHF Memorial Library is tax deductible.

Another important fact to consider in establishing an Inter-vivos Trust is that it may be revocable, so that should you change your mind at any time, the Trust may be changed or cancelled at any time and the assets returned to your name. The benefit of establishing an Inter-vivos Trust is that it avoids probate of your estate with all of the attendant delays and expenses involved. I have personally established an Inter-vivos Trust and am very familiar with it.

It would be my pleasure to hear from you, to answer any questions about this type of estate planning, and to assist in any way possible to assure you that your wishes will be carried out. It has been my experience in setting up this type of plan for other NHF members that it is the best way to insure the continuation of the Federation's program in the years to come.

WONDERS OF THE BODY

A temperature of 1000 degrees would be necessary if we were to depend on sugar for the driving energy to run a locomotive. In the body, this transfer of sugar to energy is done daily at a temperature of about 98.6 degrees. The body's ability to do this, of course, depends on the functioning of enzymes. At least three of the B vitamins are necesary for sugar combustion—B1, B2 and niacin—because they enter into the formation of essential co-enzymes.

Grey Panthers Take On AMA

Reprinted from FREEDOM

For many people, 65 and older, the promise of the "golden years" leaves a lot to be desired. Faced with compulsory retirement, the prospect of leisure after a working lifetime evaporates into boredom. The promise of travel or expanding a hobby is eroded as inflation ceaselessly eats into savings or an all-too-meager pension.

As the glitter to the promise wears off, there too often remains a stark reality of drudgery, illness, poverty and just plain being forgotten by a society which has no time and little respect for its elders.

But a group calling itself the Grey Panthers is determined not to be forgotten and has dedicated itself as well to ending compulsory retirement and age discrimination. It also intends to reform the quality of medical care received by the elderly and to re-involve the nation's senior citizens in the mainstream of American society.

Militant Oldsters

The Grey Panthers are, to say the least, an unusual group. While they characterize themselves as a group of "militant oldsters," their membership includes a fair share of youngsters as well.

The group was founded a couple of years ago by fiery 68-year-old Maggie Kuhn. Ms. Kuhn told *Freedom* that she and five other people were "retired or in the process of retiring, and all of us were very anxious about that."

So Maggie and her friends began talking about it. "We discovered," she said, "that there are many other people like us who were unwilling to just sit down and consign ourselves to bingo or rocking chairs or those horrible experiences that we call 'golden age playpens.' Glorified playpens? That's what society puts us into. We're treated like little babies, safe, out of the way, playing the rest of our lives. We just decided that wasn't for us."

If playing wasn't for Maggie and her friends, organizing a national group was.

Today, the Grey Panthers have what they call "networks" in Washington, Philadelphia, Chicago, Los Angeles, San Francisco, Tucson, and Gary, Indiana.

The major impact of the Grey Panthers to date seems to have been providing a purpose and involvement for people who might just be sitting at home doing nothing.

Panthers Vs. AMA

The extent to which the Grey Panthers have gotten people involved (and having a good time as well) was quite visible in Chicago this past June when the Panthers took on the American Medical Association which was meeting there for its annual convention.

Prior to the convention, Ann Binyon, a member of the Panthers, sent a letter to Dr. Malcolm Todd, then-President-elect of the AMA. In her letter, Ms. Binyon advised Dr. Todd of the Panthers' concern about the condition of medical care available to the elderly. Then she attached a specific list of changes which the Panthers demanded the AMA work for.

These included demands for more and better *home* medical care, which the Panthers feel is preferable to institutional care.

The Panthers also demanded that mandatory gerontology courses be established in all medical schools, and they pointed out that many doctors receive little or no training in the special health problems affecting the elderly.

Finally, the Panthers demanded that one of their members be given a seat in the AMA House of Delegates. They said, "It appears that an open channel of communication between consumers and providers of health services is long overdue."

Perhaps not surprisingly, the AMA failed to respond affirmatively to the Panthers' demands. And so, with a zeal usually associated with grandchildren, the Panthers took to the streets.

At noon on the fourth day of AMA's convention, a white van with a red cross painted on the side pulled up outside the convention headquarters at the Palmer House Hotel.

Over fifty Panther demonstrators had already been marching in a circle carrying signs like "The AMA is Dangerous to your Health."

A couple of young men, who turned out to be medical students, jumped out of the van-turned-ambulance. Just about that time, an elderly white-haired man on the sidewalk started to "grow faint" and began to slump. A big sign around his neck read "AMA."

As he fell, the two "doctors" rushed up and slipped a make-shift stretcher under him and eased him to the pavement.

A white-coated old lady with a stethoscope around her neck suddenly appeared and began trying to find the "patient's" pulse. None could be found.

One of the "doctors" opened the man's shirt, still unable to find "the AMA's" pulse. It looked as if the AMA were through.

Then the doctor found a pile of play-money where the heart should have been. When all the money had been removed, the doctor (with a grin) found the AMA's heart, and the 'patient' recovered consciousness and went off to parts unknown.

Working for Society

According to Maggie Kuhn, the Grey Panthers are not "hung up on old folks' issues. We're working for the general society," she says.

But, she adds, "there are almost 21 million of us over 65, and by the year 2000, most of the people will be 50 or over. If we persist in arbitrary retirement and denying the skills of a lifetime, then society will be dead."

The year 2000 is still a ways off, but for Maggie and her Grey Panthers, there is plenty of work to do right now.

FREEDOM is the independent journal published by the Church of Scientology

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Margaret Feldkamp
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(Received mid-November thru mid-December)

The FDA . . .

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- Products made and sold exclusively within a state — *local or state health department or similar law enforcement agency.*
- Unsolicited products by mail — *U.S. Postal Service.*
- Accidental poisonings — *Poison Control Centers.*
- Dispensing practices of pharmacists and drug prices — *State Board of Pharmacy.*
- Pesticides, air, and water pollution — *Environmental Protection Agency.*
- Toys and other consumer products—*Consumer Protection Safety Commission.*

Finding Out About Regulations

FDA regulations are printed in their entirety in two government publications, each of which may be found at major libraries or purchased from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. (Checks should be made out to the Superintendent of Documents.)

All new regulations, proposed regulations, and other notices issued by the FDA are published in the *Federal Register*, which is issued 5 days a week. This official publication also carries full texts of Presidential Proclamations and Executive Orders and the regulations of other agencies. Price $45 per year for U.S. mailing; $95 per year for foreign mailing.

Title 21 Code of Federal Regulations, is six volumes of all FDA regulations up to April of the current year. The 1974 paperback edition may be purchased as singles or as a set as follows:

Vol. 1—Parts 1 through 9—Price $1.95. General regulations, color regulations, and fair packaging and labeling regulations.

Vol. 2 — Parts 10 through 129 — Price $5.10. Food standards, nutritional quality guidelines, and food and additive regulations.

Vol. 3—Parts 130 through 140—Price $2.40. General drug regulations and veterinary drug regulations.

Vol. 4—141 through 599 (revising —price not available). Drug and antibiotic regulations.

Vol. 5—parts 600 through 1299—Price $1.75. Cosmetic regulations; also regulations covering hazardous substances, the Federal Import Milk Act, Tea Import Act, biologics, and radiological health.

Vol. 6—Parts 1300 to End—Price $1.55. Regulations issued by Drug Enforcement Administration, Department of Justice, for the control of narcotics and dangerous drugs.

How To Comment On Proposed Regulations

Regulations issued by FDA are first published in the *Federal Register* as proposals for public comment. At the end of the particular items is the deadline for receiving reactions to the proposal, along with the address and other pertinent information for interested parties.

Comments are solicited from the general public, academia, consumer groups, industry — in fact, all opinions are welcome and considered in the process of preparing a final regulation. Responses range in complexity from an opinion jotted on a postcard to lengthy memoranda or briefs in support of opinions. All responses are filed and available to public view in the Office of the Hearing Clerk.

Of particular interest to decision-makers are any new data and scientific findings pertaining directly to the subject of the proposal.

Comments should be addressed to: The Hearing Clerk, Food and Drug Administration, Room 4-65, 5600 Fishers Lane, Rockville, Maryland 20852. (Five copies are preferred.)

How To Petition FDA

Any member of the public—individually or with group support—can petition FDA to make or change a regulation. The petitioner addresses the Commissioner, clearly sets forth the problem or circumstance he feels requires action, and then proposes specifically what the new regulation should include.

If the Commissioner feels the petition has reasonable merit, notice of its filing and availability is published in the *Federal Register* with a request for public comment. The Agency may also simultaneously publish the petition and its own version of such a proposal, also for public comment, in which case the response to both proposals would be weighed in preparing a final regulation.

The petitioner should base the

proposal on sound and supportable fact, on the needs of all consumers, and on a reasonable assumed capability for industry compliance.

FDA Advisory Committees

FDA broadens its own expertise in areas it regulates by calling on accomplished persons outside the Agency to serve as advisers in their field of knowledge. Today these volunteers compose more than 66 groups. Their job is to discuss problems of concern singled out by the Commissioner and to offer what they consider the best solutions and alternatives.

Most of their meetings are open to the public, announcements of which appear in the *Federal Register*. Also, announcements of vacancies and invitations to nominate a new member appear in the *Register*. A person may nominate himself or someone else, but all vital information on pertinent professional and academic accomplishment must be supplied to indicate qualification for membership. Qualifications sought by FDA vary depending on the type of committee, the individual seat, and the current areas of concern. On many committees, there is standing membership offered for consumer representatives.

For those interested in finding out the authority, structure, functions, and membership of each committee, a free 153-page paperback titled "Food and Drug Administration Public Advisory Committees" is available from: Richard Schmidt, Committee Management Office, HFS-20, Rm. 7-83, FDA, 5600 Fishers Lane, Rockville, Maryland 20852.

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Mail to: The National Health Federation, P.O. Box 688, Monrovia, California 91016

THIS IS THE
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The National Health Federation is America's largest, organized, noncommercial health consumer group. It is a nonprofit corporation founded in 1955. Its membership is comprised of men and women in all walks of life, belonging to a variety of religious faiths and political persuasions, and engaged in nearly every profession and trade.

Its members believe that health freedoms are inherently guaranteed to us as human beings, and our right to them as Americans is implied in the words, "life, liberty and the pursuit of happiness." Yet, frequently, these freedoms and rights have been and continue to be violated. Too often, as a result of the unopposed pressures from organized medicine, the chemical industries, pharmaceutical manufacturers, and others, laws and regulations have been imposed which better serve these special-interest groups than the public at large. We see and hear of new instances daily. To name a few: spiraling health-care costs, consumer exploitation by leading industries, excessive devitalization and adulteration of our foods, restriction of certain types of treatment, banning of certain health books from the mails, the harrassment of those who advocate natural methods of healing and natural foods, the poisoning of our air, water and soil through greed and carelessness, and many other health-related issues.

The NHF opposes monopoly and compulsion in things related to health where the safety and welfare of others are not concerned. NHF does not oppose nor approve any specific healing profession or their methods, but it does oppose the efforts of one group to restrict the freedom of practice of qualified members of another profession, thus attempting to create a monopoly.

The public needs a strong voice, such as the NHF provides, to speak and act in their behalf in these health-related matters. Legislators need your support to balance the pressures exerted upon them by the special interests. The National Health Federation, through a special legal and legislative staff in Washington, keeps its members apprised of all health legislation, opposes inadequate or undemocratic health legislation, while supporting or drafting bills to protect the individual's health freedom.

Will you join us in this worthy effort?

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Opinions expressed in the Bulletin are those of the writers of the articles and are not necessarily the opinion of the National Health Federation.

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Every family in America should belong to the National Health Federation to —

1. Support the principle of freedom of choice and liberty in health matters.
2. Be a part of a strong and united consumer's voice in all health matters.
3. Work for beneficial and needed health legislation and, at the same time, oppose proposals which are detrimental to the health interests of the people or which do not provide for equality of recognition of all legally established health professions.
4. Support a united effort to reduce the cost of health care.
5. Oppose insults upon our ecology which have an impact on health
6. Oppose the use of chemical food additives which have not been proved absolutely safe or which are not needed.
7. Secure fair and impartial enforcement of food and drug laws and regulations.
8. Insist that all monies raised for health research and care be used exclusively for these purposes.
9. Compel all health fund-raising organizations to disclose in an annual report, the amount of funds collected and how the funds were expended.

THESE ARE THE THINGS THE NATIONAL HEALTH FEDERATION IS ORGANIZED TO DO — JOIN ITS RANKS AND TAKE PART IN THIS VITAL EFFORT ON BEHALF OF YOURSELF AND OF ALL AMERICA.

IMPORTANT NOTICE

If the last numbers in the code appearing under your name in the address above read 12-74 (or any earlier date), your membership dues are now past due and your membership has expired.

By prompt payment of dues now, you will avoid missing future issues of the **Bulletin** and will provide your Federation with the funds it needs to carry on its program in your behalf.

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