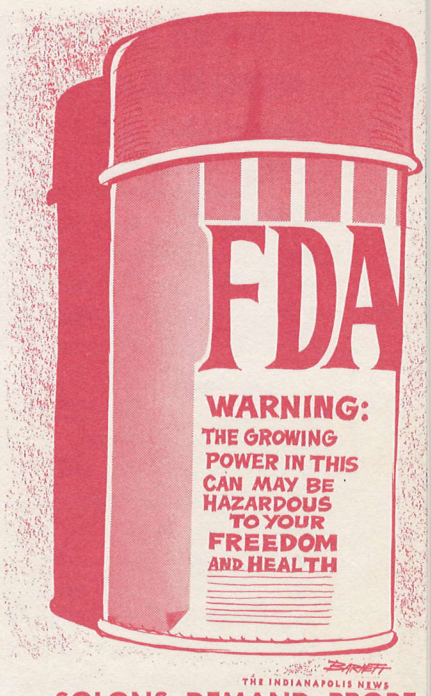
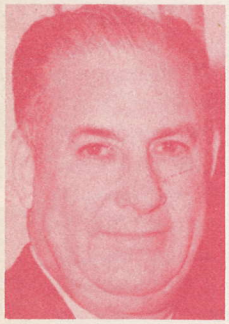
National Health Federation BULLETIN

OCTOBER 1975

50c



SOLONS DEMAND PROBE OF POWER ABUSE BY THIS U.S. AGENCY

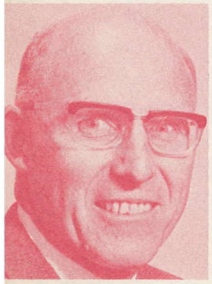


RAY EVERS, M.D.
'A FIGHTER'

JOSEPH GAUDIO
A PATIENT

CHELATION THERAPY:

Organized Medicine Resists, But Patients Swear By It



ARL REICH, M.D.
Has Used It In
Canada 20 Years

Megavitamin Therapy 'Lunacy,' Says AMA

★

RUTH DESMOND BARES FRUSTRATING DES TALE

★

NCI Officials Blasted NHF Cancer/Fluoride Report Without Reading

Dedicated to the Protection of Health Freedoms

THE
NATIONAL HEALTH FEDERATION
BULLETIN

Protection of Health Freedoms — Published Monthly

Volume XXI — Number 9 — October 1975

CONTENTS

National Health Federation Bulletin, published monthly January through December, except July-August which are combined, at 212 West Foothill Boulevard, Monrovia, California 91016, by National Health Federation, a nonprofit corporation. Don C. Matchan, Editor. $1.50 of the annual membership dues is paid as a yearly subscription to the National Health Federation Bulletin. Single copies, 85 cents. Second-class postage paid at Monrovia, California 91016.

Outlawed Now, California May Recognize It

Chelation Therapy Under Fire By Some Medical Organizations

While proposed legislation in California would give legal sanction to the practice of orthomolecular (and perhaps chelation) therapy, there appears to be a concerted attempt by the Boards of Medical Examiners in at least two states to throttle use of the latter for arteriosclerosis.

Perhaps the most famous case is that of H. Ray Evers, M.D., Meadowbrook Hospital, Belle Chasse, Louisiana, who has been involved in litigation by an embittered Board of Medical Examiners since September 1974. The chairman of that Board said publicly the Board would "go to every State Board in the country to stop the practice of nutritional medicine and chelation therapy," says Dr. Evers. His case is described in another story in this issue of *The Bulletin*.

In California, the Bureau of Consumer Affairs is busy tracking down doctors who use ethylene/diamine/tetracetic acid (EDTA) in treatment of arteriosclerosis. Declared illegal except for treatment of lead poisoning, the substance appears to interact with the plaque or inorganic calcium deposits that corrode arteries, dissolving it so it can be carried out of the body. Developed during World War II to counteract lead and mustard gas poisoning, it later was discovered to also be flushing out arteries. Since some forms of heart disease, and strokes, result from arteriosclerosis, the treatment has been a boon to countless individuals.

The Bulletin was told that two or three persons in the Bureau are working "fulltime" on chelation cases. One Bureau representative said "it's as hot an item as Laetrile!"

PRESSURE

The following story illustrates the kind of pressure being exerted by those opposing chelation therapy: Bureau personnel called on a physician (who must remain anonymous because he's studying for a Ph.D. in nutrition and can't risk the publicity), demanded to enter private examining rooms and talk to patients, and to also study the diagnostic records of each patient.

This doctor started using chelation therapy experimentally, "to see if it had any value," and found that he obtained "real good clinical results."

During the visitation, this physician was told his license was in jeopardy, but that if he would stop using chelation therapy the Bureau would consider not taking him before the Medical Board with a recommendation for disciplinary action.

Faced with this choice, aware that University Medical professors oppose chelation therapy, and that his chances of obtaining his nutri-

(Please turn the page)

tion degree might well be jeopardized, he halted the use of chelation therapy in his practice.

CHELATION TABOO

Another California M.D., Bruce W. Halstead, 2300 Grand Terrace Rd., Colton, has been trying unsuccessfully to date to become a member of the San Bernardino Medical Society. The Credentials and Professional Review Commission recommended to the Board that he be denied membership "if his practice includes chelation therapy for the treatment of arteriosclerosis." Asked to appear before a Society committee, Dr. Halstead said it was a "very strange hearing," that he was asked "hardly anything" about chelation therapy.

LAY SUPPORTERS

Chelation therapy is not without lay supporters. In two states, organizations have been established to organize lay support, politically, morally, and financially for the beleagured doctors.

Formation of the Association for Chelation Therapy (ACT), a tax-exempt corporation to disseminate information about chelation therapy, has been announced by Mrs. Collie Greene, 439 North Gerona Avenue, San Gabriel, Ca. 91775.

"We believe chelation therapy is one answer to mankind's greatest killer diseases—those of the cardiovascular system — arteriosclerosis, coronary heart disease, stroke, etc.," says Mrs. Greene. "We have learned about its value and we want to tell others about it. We are an enthusiastic group, we want to grow in order to help as many as possible learn about the field of chelation therapy. Please help us help others. Join ACT now!"

Mrs. Greene's group has endorsed and is engaged in a mail campaign in California to gain legislative support for the Mills bills (Nos. SB 710, 711, 712 and 713) which would recognize orthomolecular and chelation therapy and require the state Medi-Cal program to reimburse patients using that approach. One bill would establish a project to further research the field.

CASE HISTORY

Mrs. Greene's knowledge about chelation therapy is a result of her husband's experience following a myocardial infarction nearly three years ago. A doctors' panel advised heart surgery was "absolutely necessary or he faced a rapidly-declining life-span. He was told the surgery would involve a double bypass, plus resectioning of the heart due to severe damage."

Unconvinced that this was the answer, he searched for alternatives and a physician friend suggested he investigate chelation therapy. Upon learning that a number of doctors use chelation therapy to control and reduce arteriosclerosis, he sought the help of Dr. Evers in Alabama (now Louisiana).

"Five months after the treatments started," said Mrs. Greene, "he returned to work fulltime. He also enrolled in a cardio rehabilitation program of diet and exercise. Now, nearly three years later, he regularly plays volleyball, rides his bike 10 miles with ease, and walks four miles an hour. He believes chelation therapy has given him new life."

Mrs. Greene would like to be able to assist doctors ostracized by colleagues, or denied the right to practice chelation therapy.

Much further along organizationally than the California group, and seeking to expand membership to every state (now in 15 states) is a Louisiana group known as Concerned Citizens for Health, P.O. Box 15088, New Orleans 70175). Under the leadership of Dr. Fred J. Doughty-Beck, New Orleans chiropractor, this group has chalked up two successes in the fight to secure for Dr. Evers the right to practice chelation therapy. (Story page 5.) Responsible for the filing of several class action suits in May, C.C.H. was elated when a Parish Court on June 20 issued an order enjoining the State Medical Board of Examiners from depriving Dr. Evers of his license to practice. Then on July 25 C.C.H. obtained a temporary restraining order enjoining FDA from interfering with the doctor of patients' choice, the hospital of their choice, and the interstate shipment of Endrate.

The Harrowing Experience of Dr. Evers

Louisiana Medical Board's Vendetta Against Medic

Because he used chelation therapy for patients in many parts of the United States, the harassment and persecution of Dr. H. Ray Evers in Louisiana has become a cause celebre.

Moving from Alabama, he opened a practice and became administrator of Meadowbrook Hospital, 200 Beta St., Belle Chasse, La., practicing three months under a temporary license when his application for a permanent license to practice was denied.

According to Attorney Kirkpatrick W. Dilling, who describes Dr. Evers as a physician with a "spotless record" over 39 years, "great pressures were applied upon the Board (originating from a group including Congressman F. Edward Hebert, among others), to deny Evers his license."

In December Dr. Evers filed a petition for review of his case, and sought an injunction against the Board of Medical Examiners. The injunction was denied and on Jan. 14 this year he filed a motion for permission to present additional evidence. This was granted, and the Board held a hearing, after which it obtained a temporary restraining order against Dr. Evers, and subsequently he was sentenced to 10 days in jail on a contempt charge, later voided by an Appeals Court. The matter of his license is now on appeal, with Attorneys Dilling and Frank Weller handling it. (A Legal Defense Fund, c/o Kirkpatrick Dilling, 188 West Randolph, Chicago, Ill.

(Please turn the page)

60601 has been established, and Dr. Evers says "any contributions would be greatly appreciated").

NO INSURANCE BENEFITS

Both Medicare and Blue Cross have denied benefits to Meadowbrook Hospital, and refuse to compensate patients receiving chelation therapy although a Federal Administrative Judge already has ruled such payments must be made. These issues are being contested.

The Hospital Licensing Board refused to renew the license for Meadowbrook Hospital, "once again on tenuous reasons," according to Mr. Dilling, and this issue is pending for a review hearing.

A grand jury subpoenaed all of Dr. Evers' records, doing nothing with them, (except probably copying), then returning them. FDA seized the hospital's inventory of disodium edetate, on grounds it was misbranded because Dr. Evers uses it in his practice.

"This," continues Mr. Dilling, "is a vicious invasion of the right of a physician to prescribe medication for patients." This case also is being contested.

'A FIGHTER'

"Dr. Evers is a fighter," says Mr. Dilling, "and has counter-attacked with a civil rights action in Federal Court, and a patients' action in Plaquemines Parish Court, an injunction having been issued against FDA. A law suit has been filed in Atlanta based upon defamations originating there, and we are studying a suit to be filed in Alabama against Blue Cross and Medicare, among others, for reimbursement of unpaid hospital and medical charges.

"Dr. Evers is at the center of a controversy which involves the very nature of 'freedom of choice' itself. His resources have been strained to the breaking point, and he needs help . . . I strongly urge that anything which can be done in this regard would be most welcome to the doctor . . ."

'EVERYONE'S BATTLE'

Dr. Evers told *The Bulletin* he has been the target of a million-dollar malpractice suit filed by the chairman of the Louisiana Board of Medical Examiners, and that this gentleman also "has tried to tamper with the judges in the Federal Appeals Court."

"Ours is not a simple battle," he continued, "it is really a proving ground for a much larger war. If I am defeated, I believe nutritional medicine and chelation eventually will be destroyed nationwide. Other doctors using these methods will be afraid of reprisal, and in the end the people will suffer. I appeal to the friends and supporters of preventive medicine to help me financially in this battle with the medical demagogues . . . If it had not been for 'unorthodox' methods, many persons would not be alive today. Many need this type of therapy. A defeat for us would mean a defeat for them. Dr. Benjamin Rush, a signer of the Declaration of Independence, says, 'To restrict the art of healing to one class of men and deny equal privileges to others will constitute the bastille of medical science. Such restrictions are fragments of monarchy and have no place in a republic.'"

Dr. Evers added that Meadowbrook Hospital with a staff of "highly-qualified physicians and nurses" is "still functioning in spite of legal difficulties."

EDITOR ASKS 'WHY?'

There was an unmistakable tone of "righteous indignation" in an editorial in the *Plaquemines Gazette*, July 25. Titled "Preventive Medicine Gets Harassment As Unnecessary Surgery Is Cited and Probed," the editorial asked, "Why is the State Board delaying renewal of the license of Meadowbrook Hospital, an institution specializing in preventive medicine and degenerative diseases, which has no surgical department, and refers patients to surgeons only when surgery is necessary?

"Why does the State Medical Board delay in renewing the license to practice medicine to Dr. Ray Evers, a noted pioneer in preventive medicine who is obliged to act only as administrator of Meadowbrook Hospital while his talented skills of some 40 years are denied patients? . . . From a lay viewpoint, these denials of licenses appear to be a personal vendetta on the part of doctors who disagree with another doctor's practices, especially that of a physician whose walls are lined with citations in his field.

"Wouldn't you call this a violation of civil rights?—to say nothing of unethical practices by those who should be more concerned with helping rather than hurting—encouraging preventive measures and treatment to those suffering from degenerative diseases who usually are shunted back and forth?

"A number of people in the immediate Belle Chasse area and of the Parish have received chelation treatment at Meadowbrook, including your editors who are anxious and willing to testify in behalf of the treatment and the unusually fine operations of Meadowbrook Hospital. Why aren't these people given a chance to speak up for their own doctor and hospital treatment? Why must all the medical board hearings be held behind closed doors? The governor of the State has said he can do nothing, and he is ex-officio chairman of that board. Who then can get to the bottom of this situation, which if continued will deny patients treatment they want, and the people of this area a general hospital with an emergency department to be added if the question of licenses is solved sooner rather than later? Sometimes it is vital that the people speak up. That is what we are doing as just plain people—what about you?"

DOUGHTY-BECK'S APPEAL

An ardent supporter of the right of Dr. Evers to practice chelation therapy in Louisiana, Dr. Doughty-Beck, longtime NHF member and many-times speaker at conventions, said in a *Newsletter* that the June 20 court victory enjoining the

(Please turn the page)

Diagnosed 'Two Years To Live' — Heart

Palm Desert Man Tells Meadowbrook Experience

Although it took him two months to make the decision to become a chelation patient at Dr. H. Ray Evers' Meadowbrook Hospital in Belle Chasse, La., and he went through two more weeks of doubt after his arrival, Joseph Gaudio, 47-year-old bachelor in Palm Desert, Ca., is "grateful beyond words" that he "was directed by God to go there," and to the Meadowbrook staff, and for what he believes is life-saving treatment.

Mr. Gaudio's story dates to June 1974, when he was startled to learn, following a treadmill test and angiocardiography at Eisenhower Medical Center, Palm Desert, that without heart surgery he might have two years to live. The diagnosis was that the two major front arteries to the heart were 95% clogged with plaque (inorganic calcium), and the major artery in the rear was 70% clogged.

Admittedly "an emotional person," he was "badly shaken" with the news. His doctor suggested he see a specialist at Cedars of Lebanon, Los Angeles, and this doctor "said I'd die in two years if I didn't have the surgery, a three-way by-

---

Board of Medical Examiners from "further persecution of Dr. Evers" was "a victory more important for the people of the south, and the nation, than chiropractic licensure after 60 years of health slavery" (in Louisiana).

He castigated "the Louisiana medical allopathic slavery and health monopoly," and asked the public for "spiritual, moral and financial support."

". . . Dr. Evers has been publicly declared incompetent and unorthodox, he has been illegally entrapped, prosecuted, persecuted, and continuously harassed and threatened," said Dr. Doughty-Beck. "Hospitalization insurance companies serving his patients in many states have been pressured to not pay claims, threatening to force Dr. Evers into bankruptcy. Food and Drug Administration agents invaded the hospital and seized the chelation drug Endrate. FDA has pressured pharmaceutical suppliers and reduced Dr. Evers' Endrate supply as much as 75%. . . This is the work of the so-called protectors of the nation's health—the A.M.A. and the Louisiana State Board of Medical Examiners.

"The destruction of life-saving chelation, Dr. Evers and Meadowbrook Hospital places every M.D. in the nation in jeopardy, subject to the same prosecution and harassment. That we have no intention of permitting to happen . . . The cost wil be in the tens of thousands of dollars. We are in process of acquiring a charter. You furnish the funds, we will save chelation for the people throughout the nation."

pass removing leg veins and bypassing the clogged arteries leading to the heart. I told him I wanted to talk with others before deciding on the surgery, and he said 'maybe you enjoy hearing these things.' "

NO ALTERNATIVE

"The next appointment was with a doctor in Pacific Palisades who after seeing my treadmill report and the angiogram told me that statistically, the surgery was 'not all it's made out to be in the long range'—they don't get at the cause.

"I asked him what the alternatives were and he said, 'None. I wouldn't make any long-term investments, you're sitting on a powder keg, you could go at any moment.'

"For several weeks I was in a daze, a state of trauma. I'd go to bed wondering if I'd be alive in the morning. Daytimes I'd wonder if it was going to happen today.

"Somehow I thought there *must* be an alternative, but I didn't know where to turn. I believe God was directing me, because Betty Lee Morales came into my mind. I've known her a long time and figured that if anyone would know, she would. So I called her. She listened, then told me she was not telling me not to have surgery, but she urged me to look into chelation therapy, and told me how to locate Dr. Evers.

"I called him, told him the problem, and being a good doctor he told me he wouldn't be able to comment until he saw me, and my records. He did say he had had patients whose story sounded familiar to mine, and that after treatment they were able to again play golf."

'I'D BEEN BRAINWASHED'

Asserting that while he had "total confidence in Dr. Evers," Joe Gaudi says he had been "brainwashed" about "quackery," and that while the chelation theory "seemed to make sense" he still was undecided. He asked his original doctor if he knew about chelation therapy, was told he did, but that he was "too busy" to call Dr. Evers for more information, although he would "read the literature if you have any." Two other doctors told him that "If chelation were any good, we would be using it."

"They mean well," he told *The Bulletin*, "but they just don't know."

Mr. Gaudi's family urged him to go to Louisiana, but it took six more phone calls to Dr. Evers and more weeks of indecision—"mental torture, believe me!"—before he finally boarded a plane to Louisiana. To continue:

"And I'd been there two weeks before I finally got rid of the doubts. At Belle Chasse I saw many things with my own eyes that convinced me it did work. Patients were glad to share their experiences, and finally, instead of wondering 'How can the stuff in this bottle do what major surgery does?'—I was glad I was there, and looked forward to the five-day-a-week three-hour intravenous sessions."

He remained at Meadowbrook

(Please turn the page)

Hospital from August 6 until September 28, staying two more weeks than was considered necessary because "I wanted to be sure everything was okay." The only side-effects, he said, "slight nausea for a day or two" during treatment.

'EXCELLENT STAFF'

Upon arrival with his medical history and reports, he was given tests at Meadowbrook which revealed circulation below normal. He describes hospital staff and conditions as "excellent—I'll be indebted to them the rest of my life."

He said one day while chatting with patients, he experienced "a sudden surge of energy, something I hadn't had for years. Bang! I felt like a million dollars! It was not psychological. I walked through the hospital halls – it seemed as if suddenly I was a new person. Actually, I couldn't even sleep at night, and had to ask for sedatives. The nurses will confirm what a hard time they had getting me to sleep, there was so much energy."

PREJUDGED

Mr. Gaudio offered to testify at a hearing before the Louisiana Board of Medical Examiners regarding granting of a license to Dr. Evers. He described that session thus: "Dr. Evers brought my 'before and after' reports to the hearing – those from California showing the condition I was in when I went to Meadowbrook, and then the treadmill and circulation report from Meadowbrook. About eight doctors were at the hearing. One asked how I felt, and I told him 'great' – like a 19-year-old. I thought of course they would examine the reports on my case, but no – they didn't bother to look at them. Does that say anything about sincerity? I wondered, too, why some or all of them, if Dr. Evers' case was so important, had not made the 45-minute drive from New Orleans to Belle Chasse to visit the hospital, talk with patients, look at records. I got the impression their minds already had been made up."

Mr. Gaudio says he believes the doctors on the Board base their excuse for refusing to grant Dr. Evers a license on the fact "he can't say *how* chelation works, he can only show the case histories of those *for whom it works.*" During that hearing one of the witnesses was Dr. Bruce Halstead of Colton, Ca., who when asked how it works, replied, "You tell me how aspirin works!"

BELIEVES HE WAS 'LED'

While describing himself as "not a religious man," Mr. Gaudio says he believes he was led by God to go through these experiences "so I can help others. That I am doing, and will continue to do. My records may be viewed by doctors who may be skeptical, and I am glad to tell people about what happened to me."

He finds considerable disbelief, not only among professionals but among laypersons, however. He has told people about his experience, they've indicated they will get chelation therapy, but after talking again with their doctors decide on the bypass surgery instead. (Ed. note: This is a common experience with those who have used "unorthodox" health methods – right?)

Strong Support in State Legislature

Inclusion of Megavitamin Therapy in California Health Insurance Proposed

Legislation providing for inclusion of megavitamin therapy in the Medi-Cal insurance program, and preventing private insurance companies from discriminating against doctors who practice orthomolecular medicine has passed the California Senate and was expected to be approved in the Assembly in September.

SB 710 adds to the Medi-Cal formulary the prescription of vitamins, minerals and food supplements, hair analysis, provocative testing for allergy, and other nutri-

(Please turn the page)

'NO PROBLEM'

Some time after his return from Meadowbrook, Mr. Gaudio arranged to have a treadmill test at Loma Linda Community Hospital. He did not reveal his history to the intern, and after taking the normal test with stress set at 173, "I hit 170, and he told me there was no indication of any problem. I asked if he would let me run on it for a bit, he said it wasn't necessary, but agreed since I was persistent. He set the stress at starting point, and I ran for 90 seconds (it seemed like an hour and a half!), reaching a stress point of 175. I couldn't have done that last year."

He says he plans to use chelation therapy as a preventive measure – five bottles a year for the rest of his life. "It is a preventive thing – people shouldn't wait till the problem develops. Everyone over 50 should get circulation into balance even if there seem to be no symptoms."

TWO OTHER CASES

Two cases at Meadowbrook were described by Mr. Gaudio:

"One man, a retired banker, was senile – could not tell his name and couldn't dress himself. Three weeks of treatment cleared the clogged arteries at the base of the skull so he could repeat his name and dress himself. If the treatment were given when senility is starting, before brain damage has occurred, the entire syndrome might be avoided.

"Perhaps the most dramatic case was that of Jack Israel, 4609 Wendover Dr., Stone Mountain, Ga. He had a rare disease, the body gradually becomes rigid due to muscle calcification, and it is as if the person slowly turns to stone. The prognosis for Mr. Israel had been four months to live. He told me that within three weeks after starting the chelation treatment he had lost his addiction to morphine. His muscles after eight weeks of treatment were soft again, and he even sneaked out to go dancing."

tion and preventive-medicine diagnostic techniques and treatment modalities.

SB 711 prevents insurance companies including Blue Cross and Blue Shield from discriminating against doctors practicing megavitamin therapy. SB 712 establishes two demonstration projects under control of the State Department of Health in the field of clinical ecology and orthomolecular medicine.

Speaking in favor of the legislation were Drs. W. H. Currier of Pasadena, past president of both the International Academy of Metabology, and the International College of Applied Nutrition; Dr. Pauling; Richard Kunin of San Francisco; Michael Lesser, president of the California Orthomolecular Medical Society; Elizabeth Lodge Rees of Castro Valley; and George Fricke of Sacramento. Lobbyists for Blue Cross, Blue Shield and the Independent Life Insurance Association of California opposed SB 711, the University of California opposed SB 713, and Dr. Robert Hodges of UC Davis opposed all the legislation.

Phil Townsend Hanna, legislative advocate for the Committee for Medical Freedom, 1127 Eleventh St., Suite 501, Sacramento, lobbied for the measures, and during the movement of the bills through the legislature, urged public support:

"Don't be overawed by these lawmakers," says Mr. Townsend. "They are *your* representatives in Sacramento, and they want to know *your* opinion on this important legislation. Stress that the cost of preventive medicine, over the long haul, is much less expensive than the cost of crisis medicine. Cost of 'ordinary, customary and reasonable' treatment of schizophrenia could mean 20-30 years of institutionalization versus clinical ecology techniques of 30-90 days' hospitalization plus an outpatient vitamin prescription of 25c a day. Similar arguments may be made for almost all degenerative diseases."

Megavitamin Therapy 'Lunacy' Says AMA

The American Medical Association is not happy with the revised Proxmire-Schweiker-Rogers bills in Congress which would limit Food and Drug Administration authority to control vitamins and minerals.

An editorial in the *Journal of the American Medical Association* by Dr. Philip L. White said adoption of the measure would lead to "pharmacological lunacy."

The AMA staffer, described by the *Chicago Daily News* as a "nutrition expert," said the push for megavitamin therapy is being led by the National Health Federation.

"To illustrate the furor," the editorial continued, "congressmen reported last year they received more mail about vitamins than about Watergate."

"There is evidence that certain vitamins can cause acute toxicity, but little attention has been given it because no one thought the day would come when public figures would promote something as outlandish as megavitamin therapy." He said there is "no evidence of unique superhealth benefits from consuming an excess of any one nutrient. If there were some objective evidence of beneficial results, one would then use the rule of reason in evaluating the risk-to-benefit ratio. Testimonials are not evidence . . ."

Government Rescinds Discriminatory Order

Canadian Megavitamin Ruling Overturned By 'People Power'

While U.S. physicians are prevented from practicing orthomolecular concepts (megavitamin therapy) in hospitals as of last April 1 under Peer Review Service Organization (PRSO) regulations, patients in Alberta, Canada, have won the right to use megavitamin therapy and have it billed to The Alberta Medicare Commission.

Hailed as a signal victory for megavitamin therapy, Dr. Carl J. Reich, Calagary M.D. who has used megavitamins in his internal medicine practice for 20 years, suggests that U.S. citizens who believe this type of therapy is a legitimate charge for Medicare, organize protest meetings.

This is how an adverse ruling by the Alberta College of physicians and Surgeons was reversed by the government a year later. Here's the story:

In the spring of 1974, following a ruling of the College of Physicians and Surgeons of Alberta that megavitamin therapy was to be considered "experimental" and thus not qualify for payment under the government health insurance program, outraged Canadians formed Alberta Citizens Supporting Orthomolecular Therapy (ACSOM).

People were aroused because megavitamin therapy had been accepted in Alberta for several years. It was the first time, in fact, for an accepted therapy to be reclassified as "experimental." People were angered because "no orthomolecular doctors were consulted before the ruling was issued," and "the College appears to be discriminating against megavitamin therapy in that it does accept many treatments not validated by the double-blind method and recognized as producing harmful side effects – such drugs as cortisone, tranquilizers, antidepressant drugs, antihistamines."

POWER STRUCTURE ADDRESSED

When the "concerned citizens" went to work, they did a thorough job of contacting the power structure. Following public protest meetings in Edmonton and Calgary, contact was made with the

(Please turn the page)

Premier, Members of Legislative Assembly, Provincial Government, Minister of Health and Social Development, Solicitor-General Helen Hunley, and other Cabinet ministers.

A newsletter was issued, people contacted the media, and considerable political heat was generated. Nearly 6,000 signatures were affixed to petitions to government officials, and 100 testimonial letters from megavitamin users were submitted.

Dr. Reich put his license on the line by speaking to a public protest meeting. He attributed the government ruling to rescind the policy to pay for megavitamin therapy to "pressure from medical schools to stop using the therapy because it is not taught. Even the word 'vitamin' scares them," he said. "It makes them think patients will be able to look after themselves and their jobs will suffer. They take home their $40,000 and that's all they care about."

In a packed auditorium in Calgary people listened to eloquent testimonials from individuals who told of the role vitamins had played in their lives: a former drug addict, a woman with mental problems, were among those appealing for the reversal of the ruling. I. J. Kahan, general director of the Canadian Schizophrenia Foundation recommended the ruling be rescinded – he told of the work of Abram Hoffer, Saskatchewan psychiatrist – a familiar name to many *Bulletin* readers.

HEADWAY

By the end of August the public learned from Solicitor General Hunley that the government had asked the Edmonton and Calgary medical schools for a report on the subject of megavitamin therapy "as soon as possible." And Dr. L. H. LeRiche, registrar at the College of Physicians and Surgeons, announced that "physicians may continue to bill patients or the Commission for professional services whether a prescription is provided or not." And Ms. Hunley, the minister in charge of medicare, ruled that a patient's first visit to a doctor would be covered, but later visits related to an "experimental practice" would be denied payment.

Cheered by these developments, the citizens' group continued to press for outright abolition of the discriminatory ruling. They called for participation in the inquiry, suggested it be handled by a committee comprised of one representative of "orthodox medicine, one representative of orthomolecular medicine, and two disinterested lay people." They asked also that all phases of the inquiry be open to the public, that no sessions be held privately.

'ASININE' SAYS REICH

Dr. Reich spoke at a University of Lethbridge biology seminar in October, telling the group he was surprised that the ruling barring payment for megavitamin therapy had been made. He was forced out of British Columbia before going to Calgary, and while in Calgary his hospital privileges were lifted because of his support of megavitamin therapy. He said that in about 5,000 cases of asthma he has treated, 94% of children below the age of 15 have had "excellent to moderate resolution, and people above that age have shown 65% resolution." It is "asinine," he said, to list his practice as experimental because he "finished the experimentation more than 15 years ago."

That "people power" can change bureaucratic regulations was demonstrated finally in late February when the Alberta Health Care Insurance Commission notified doctors that payment for megavitamin therapy had been restored.

Solicitor-General Hunley announced in mid-March that the inquiry ordered earlier in the medical schools was proceeding, and that following completion of the first phase – investigation of the literature – public hearings, with testimony from doctors and patients, will be conducted.

So the story has a "happy ending." When responsible citizens persisted in reasonable demands for equity, they found a responsive government willing to change.

Dr. Nitler Accused by State Medical Board

Dr. Alan Nitler, medical doctor in Santa Cruz, Ca., who has been using nutritional therapy for a number of years and is widely known through his writing and books, has been charged with treating cancer with inappropriate (dietary and/or nutritional) substances, and a hearing set before the California Board of Medical Examiners in mid-Setember in San Francisco.

He is accused of treating for four years one patient who subsequently died following surgery; of treating another patient five years and failing to diagnose cancer; and of advising another patient that cancer was present "when in fact (it) was not."

The charges of "gross negligence" and "unprofessional conduct" in one case were investigated nearly two years before action was taken. Dr. Nitler said that in that case, the patient "never did follow my program. He was sent to me by a mutual friend who twisted his arm until he finally came to see me. I gave him injections to counteract extreme nausea following T.B. shots (he was twice hospitalized for a tubercular condition), and I examined him from time to time. The last time I saw him was after he had fallen from a bar stool (though he was not a drinker), and I was called. I took one look at him, told him he should come into the office Monday. His chart shows all the way along that he failed to do what I advised. He went to another doctor who ordered him into surgery and a tumor was excised from the stomach. He died a short time later."

Beth Bean
1531 Leimert Blvd.
Oakland, Ca 94602

July 2, 1975

Dr. John Yiamouyiannis
The National Health Foundation
212 W. Foothill Blvd.
Monrovia, Calif. 91016

Dear Dr. Yiamouyiannis,

I never write this sort of letter, but I am compelled to do so now.

I read with interest your research paper on fluoridation and Cancer Death Rate and called our local office of E.P.A. to see if they had seen the research. They sent me their refutations #1 and #2.

I have to let you know that I considered those refutations done in such a shabby manner that I have been <u>really</u> scared ever since. To have put our trust in a governmental agency that would toss off a response like that to a piece of serious research on a vital problem to our welfare is certainly an eye opener.

We in the general public who trust such people to protect us are indeed in a much worse position than if there were no such agency and we were doing our own thinking. It lulls us to sleep and makes us sitting ducks for such a blunder as fluoridation now appears to be. I am ashamed to admit I voted for it myself.

Those refutations were apparently made by someone who hadn't read the research at all.

I feel for you and for the public for we are the losers.

Sincerely,

Beth Bean

Can You Top This One?

NCI Executives Denigrated Study They Hadn't Read

When Beth Bean of Oakland said the refutations of the NHF study by Dr. John Yiamouyiannis on the relationship between fluoridation and cancer deaths "were apparently made by someone who hadn't read the research at all" (page 14), she was dead right, it appears.

Aroused by the April and July press releases from NCI denying validity of the study, Dr. Yiamouyiannis requested and was granted a conference with seven National Cancer Institute officials. The meeting lasted two hours, and he taped it.

Out of that session came the astonishing revelation that none of the top echelon in NCI had read the study, nor would any admit to knowing who in the agency had released the press reports criticizing it.

Attending the July 30 session with Dr. Yiamouyiannis were these NCI executives: Acting Director and Executive Officer C. P. Baldwin, Jr.; Deputy Director Dr. Guy Newell; Dr. James Peters, director of the Division of Cancer Cause and Prevention; Dr. Joseph Fraumemi, assistant director of the Epidemiology Branch, Division of Cancer Cause and Prevention; Dr. Robert N. Hoover, acting head of Environmental Studies of the Epidemiology Branch; Dr. Richard A. Tjalma, assistant director and head of Panel and Board Activities; and Paul Van Nevel, acting assistant director, Office of Cancer Communication.

NHF Legislative Advocate Clinton R. Miller is seeking Congressional assistance in examining the matter in more detail. Says Mr. Miller: "It is almost inconceivable that a denial of this magnitude could be made without the knowledge of these key officials."

Los Angeles Council United Against S.B. 211

Responding to and reflecting the views of a majority of the city's voters, Los Angeles City Council voted 13-0 to repeal an ordinance adopted in September 1974 to fluoridate the city's water supply.

A few days earlier the Council in an 8-3 vote went on record against S.B. 211, the bill authored by Senator Anthony Beilenson requiring mandatory fluoridation throughout California. The position against S.B. 211 had been recommended by the Council's State, County and Federal Affairs Committee.

On May 27 Los Angeles voters defeated the fluoridation proposal 56% to 34%. The Department of Water and Power estimated fluoridation would cost between $385,000 and $585,000 a year, depending on the type of chemical compound used.

With the Editor . . .

In The Public Interest . . .

While often critical of Food and Drug Administration decisions, may we be the first to acknowledge that on occasion the agency does perform in the public interest. Of such a nature was the decision to place under control the most-often-prescribed tranquilizer drugs, Valium, and Librium, ninth in sales.

As of late March, prescriptions for these drugs are valid for no longer than six months, and not more than five refills may be obtained within a six-month period.

An order in the Federal Register in late January ended a nine-year federal effort to control use of the two drugs. For seven years their sole maker, Hoffman-LaRoche, Inc., argued that curbs were not needed. The company now has agreed to the regulation.

In 1965 the government first recommended some kind of prescription curb to these drugs, blamed for hundreds of reports of suicides and hospital emergency-room admissions, usually for attempted suicide, with three out of four reports involving women from 20 to 39. A 12-month survey of 1,400 hospital emergency rooms by the Justice Department's Drug Enforcement Administration revealed that nearly 24,000 patients were admitted because of Valium overdoses. In 500 cases, Valium was linked to death. Nearly 34 million prescriptions were written last year for Valium.

Isn't it curious that drugs known to lead to deaths – and Valium is only one of many, including alcohol – are readily available with or without prescription, while nontoxic substances such as Vitamins B-15 and B-17 are banned? When we get a valid answer to the question, "*why?*" – it will be an important milestone in the struggle for health freedom. Is it naive to hope such an answer one day will come?

– DCM

That's Politics . . .

Rear Admiral Alvin I. Malstrom (USN Ret.), of Bethesda, Md., who has spent a number of years working with NHF's Clinton Miller on "The Hill" says he has been "reminded of late of what a new member of the Israeli Parliament, Major General Ariel Sharon observed: 'I've just entered the political arena, and it already looks more dangerous than the battlefield. There, at least, you're fighting the enemy. In politics, you have to fight all sides – including your own.'"

Consumer Groups Seek Rogers' Support on DES-Banning Bill

Having agreed to major changes in his food supplement bill in July, consumer groups are hopeful that Congressman Paul G. Rogers can be persuaded to view favorably a senate bill drastically restricting the use of DES. Thirteen years ago the Congressman from Florida persuaded colleagues to defeat proposed legislation to ban DES in animal feeds "until residues can be detected." (At that time neither the Department of Agriculture nor the FDA possessed the technology to do it).

The story was reviewed in the spring issue of the Federation of Homemakers' Newsletter, edited by Mrs. Ruth Desmond, president, who has been following this issue since 1962. She recapitulated the history of the struggle to ban DES in view of revived hopes it may yet occur.

Senators Kennedy and Schweiker have authored S. 963 to keep DES out of animal feed and require labeling restrictions on the "Morning After" birth control pill. Reported out favorably by the Senate Health Subcommittee and the full Labor and Public Welfare Committee, it is said to have strong support in the Senate. It then goes to the House Subcommittee on Health and Environment, chaired by Congressman Paul G. Rogers who in 1972 refused to call up similar bills for hearings, and as a consequence the legislation died. Congressman Delaney has introduced H.R. 324 to ban DES, and this bill is now in Rogers' Subcommittee on Health and Welfare.

In 1962 residues of DES were found in the vital organs and skins of chickens and capons. "At that time, recalls Mrs. Desmond, "neither FDA nor USDA possessed methods and instruments sensitive enough to detect residues in cattle. Nevertheless, concerned and re-

(Please turn the page)

NHF OPPOSES FURTHER DELAY

Senator Carl Curtis of Nebraska has introduced an amendment to S. 963 to delay action on DES for another full year. The National Health Federation, represented in Washington by Clinton R. Miller, opposed the amendment, agreeing with the Senate Committee on Labor and Public Welfare which reported S. 963 out with a do-pass recommendation, that it "very much regrets it must once again consider Senate-passed legislation in the 93rd Congress designed to remove DES from cattle feed."

sponsible individuals thought it prudent to ban the use of DES in all animal feed. If the request was to be refused, then the group asked that carcasses be identified so those wishing to avoid DES-fed meat products could have their choice. Representatives Delaney and Sullivan appeared before the House Commerce Committee to urge members to ban DES in feed. (But) Representatives Paul Rogers and Ancher Nelson (former Minnesota Congressman) persuaded the Congress to permit DES in feed so long as no residues could be detected.

"About a decade later, with improved techniques, DES was discovered in the liver of steers – sometimes even in their kidneys. This was not revealed for some months. A young attorney for the Natural Resources Defense Council discovered this fact and from then on there has been a struggle to ban the use of DES in feed.

"In 1972 Congressmen Reid, O'Hara and Delaney introduced separate bills to ban DES. The bills were sent to the House Subcommittee on Health and Safety chaired by Mr. Rogers. On the Senate side, Senator Proxmire introduced a bill to ban DES, and it passed the Senate. But the House Subcommittee on Health and Safety kept the bills bottled up. The oversight hearings on DES by Chairman Fountain finally forced FDA to ban DES. There was also a court action pending, initiated by the Natural Resources Defense Council, and which we joined. But a court action forced FDA to again permit the use of DES in feed – pending a hearing. So far no FDA hearing.

"But now there is a different climate. The Secretary of HEW and FDA Commissioner Schmidt give their blessings to Congressional legislation to ban this carcinogen from animal feed. Now your letters to your Congressmen can create an impetus to get action. With HEW and FDA both approving such Congressional action, and the public clamoring for it too – Chairman Rogers should be gracious in getting S. 963 enacted swiftly. Please ask your Representative to speak to Chairman Rogers personally on the need to pass S. 963 quickly. Point out that USDA is sending DES-certified-free beef to Canada – but U.S. citizens still take this unnecessary risk. Your letters count."

New York Mandatory Fluoridation Bill Dead

A mandatory fluoridation bill aimed at the state of New York was killed "by the skin of our teeth," reported Eleanor Krinsky of the Pure Water Association of Nassau County, New York. Although favorably voted out of the Senate Health Committee and passed by the Assembly, it was killed when the Senate Rules Committee failed to report it out before adjournment in late July. Among those working to defeat the legislation were Dr. John Yiamouyiannis, NHF Science director, and Clinton R. Miller, Washington legislative advocate, as well as many individual members in New York.

The Harvest: Sterility, Death

FDA Scientists Overruled by Top Brass on DES-Containing Pill

WASHINGTON – Food and Drug Administration scientists testified last week that the agency permitted the use of a known cancer-causing drug as a "morning after" birth control pill even though official approval for such use had not been given.

The drug—diethylstilbesterol, or DES—is known to cause cancer in teen-age daughters of women who have used it during pregnancy.

Doctors were forbidden to give the drug to pregnant women – it was given as a medication against miscarriage—in 1971. But it has come into widespread use, especially on university campuses, as a "morning after" pill.

The FDA scientists, Drs. Marvin Seife and Vincent Karusaitus, who have responsibility for approval of such drugs refused to give it to a drug company which had asked permission from FDA to market DES in 25 mg. tablets as a birth control pill.

But the two scientists were overruled, they told Sen. Edward Kennedy's health subcommittee. In fact, they testified FDA brass circulated a national bulletin saying the drug had FDA approval as a morning-after birth control pill even before a notice for comment on the drug was entered in the Federal Register.

The drug, the Federal Register said, was not to be approved until March of this year.

Seife recalled that when he informed his superiors he would not sign approval of the drug, the chief of FDA's Bureau of Drugs, Dr. J. Richard Crout, said he would do it if Seife did not.

"This was the first time," Seife told Kennedy, "that a drug has been published for a new use in the Federal Register for a new indication without any studies. Our group was unanimous in protesting this."

Last year Crout came under heavy fire from another congressional oversight committee for overruling an FDA advisory committee and unilaterally approving a heart drug for a new use even though there was considerable evidence that the drug – propranolol – increased cardiovascular accidents in some users.

NO EXPLANATION

During the Kennedy hearing, FDA officials, particularly Commissioner Alexander Schmidt could not explain why their 1973 bulletin approved use of DES as a birth control device two years before such use was to be made official by FDA.

And Schmidt refused to back off from FDA's intended official approval of the drug, saying FDA would ensure the drug would be used only in emergencies such as

(Please turn the page)

threat of pregnancy caused by rape and incest.

Kennedy, as well as Sen. Richard Schweiker seemed skeptical about and at times infuriated with Schmidt's refusal to budge. Both doubted that FDA, which had caused the widespread use of the drug without adequate controls and monitoring for two years because of the announcement in the drug bulltein, would do a better job now . . .

(Following the hearing, Senator Kennedy announced he would introduce a bill to delay the use of the drug as a birth control agent, and to ban its use in cattle feed).

SCHMIDT OPPOSED

Schmidt opposes such a ban. But earlier, Dr. Frank J. Rauscher, director of the National Cancer Program, had testified there was a definite danger of cancer in daughters born to women who had eaten meat containing DES during pregnancy.

Even though Rauscher's prepared statement favored the use of DES as a birth control pill in "emergency" circumstances, he favored a ban on its use if the government failed to control its use.

"The risk is unacceptable," Rauscher said.

He also noted that while there was no evidence of cancer in women who themselves used DES – only in their daughters – the scientific community "really doesn't know enough yet."

He said there would have to be new research.

Earlier, three women, two whose daughters had died because the women had taken DES during their pregnancy, and one who is recovering from cancer surgery because her mother had taken DES, told of their trial and agony to an audience which listened in absolute silence.

MOTHERS TELL

In his column, "Ringside Seat," I. Badhwar described some of the testimony:

". . . Two mothers spoke out. The first, frail and blonde, had been given the miracle pill in the mid-1950s to prevent a miscarriage. A daughter was born to her who developed vaginal cancer at age 14. There was surgery.

"A year later, the cancer spread to her lung, she had three tumors in her trachea and bronchial tubes. Four months later she suffered terrible head pains because the cancer had spread inside her head. Then her hips, arms and legs.

" 'It's a horrible, terrible thing to watch a child suffer,' the mother said. 'Her death was easier to accept than her suffering.'

"And she ended with a plea to ban DES which she said was in wide use on college campuses as a birth control pill.

"A second mother. She used the dread substance in 1950. The daughter she raised died at age 18 from vaginal cancer.

" 'I couldn't believe anything with such danger could be given out so indiscriminately,' she said. 'My friends would call me and say, 'My God, I've used DES too,' but the doctors would tell them don't worry there's less chance of cancer from that than being hit by an automobile. It's easy to bandy about statistics, but when one of those statistics becomes your own . . .' "

RENDERED STERILE

"A third woman had just been operated on for cancer. She is young, married. Her mother had taken DES. She said: 'The repercussions are strong in my life. The most tragic thing is I have been rendered sterile. A family life is important to me. Each time I now have a pain in my head, I am suspicious that the cancer will crop up again. And it's difficult for my mother. She feels very guilty.'

"Schmidt sat through all this, and my one thought when it came his turn to testify was that he would pound the table in anger and say:

" 'Senator, after listening to these women the government is going to take precipitous action. The poison *will* be banned.'

"Instead, we heard Schmidt defend FDA's desire to keep the drug, and we reminded ourselves that men of faith – like fanatics – are not moved by the tears of women."

–Federal Times
475 School St. S.W.
Washington, D.C.

RINGSIDE SEAT

Schmidt, the Faithful

BY INDERJIT BADHWAR

The trouble with Alexander M. Schmidt is that he is so damn cocksure. The Food and Drug Administration boss seems never to doubt himself or the premises of the orthodoxy that holds captive modern medical practice.

There are no uncertainties.

If there's even a scintilla of evidence that a drug may be effective—and to hell with its side effects—Alexander Schmidt will defend to the death its right to penetrate the marketplace.

No doubt, some of Schmidt's arrogance derives from his being once a medical school dean.

Deans of such standing don't go about admitting that much of medicine is still guesswork, that drug companies – which finance much medical research in schools as well as medical literature – are not really public spirited institutions, that their products often seek out diseases rather than the other way around.

You will rarely see someone like Schmidt meditating seriously on

(Please turn the page)

the long-term effects of the countless drugs now on the market, or canvassing Congress to rid the market of dangerous and ineffective drugs.

After all, Schmidt is not a therapeutic nihilist. You see, he is a man of faith.

And men of faith rarely learn from scientific evidence. No matter that the antibiotic chloramphenicol is widely misused by the dean's former students and no matter that it causes aplastic anemia. No matter that other antibiotics like lincomycin and cleocin have resulted in death from severe colitis. Where will this list end?

The scary part is that even the wonder drugs which were believed to have withstood the test of time —drugs such as tolbutamide (orinase), are now discovered to increase the rate of cardiovascular accidents in diabetics who use them. In other words, persons with mild diabetes, are better off controlling their conditions with diet and exercise rather than using drugs. The cure can kill you faster than the disease.

And yet the Schmidts of this world display no doubts or fears.

We never hear them echo the physician's primary tenet: "First of all, do no harm."

We hear no suggestion from them of long-term animal studies of drugs before they are approved. And who knows what the long-term effects of drugs already on the market will be — drugs widely in use for treating mild, uncomplicated hypertension, mild forms of osteoarthritis, angina pectoris, mild elevations of serum uric acid.

The faithful will repeat: They are beneficial. The scientists will say: We just do not know. When in doubt, do not treat.

It was refreshing, the other day, to see Dr. Frank J. Rauscher, head of the national cancer program, admit to Sen. Ted Kennedy's health subcommittee: "We just do not know."

The eminent scientist was saying it could not yet be determined whether DES — which FDA wants to approve as a "morning after" birth control pill — would be harmful to women who took it directly or imbibed it through eating meat. The drug is also used widely as a cattle fattener.

What he *did* know was that DES is a human carcinogen. It has been proved to produce cancer in teenage daughters of women who used it during pregnancy.

The little white miracle pill was widely prescribed by doctors until very recently in the hope that it would prevent miscarriages. It did no such thing.

And Rauscher came close to saying that the drug should be banned altogether — in humans and in cattle feed.

But Schmidt, the faithful, came to the defense of the poisonous substance. No ban. For him the many tragedies recounted at the hearings did not exist. Only the theorem that the danger had been proved only in daughters, not in the mothers themselves . . .

— Federal Times
Washington, D.C.

Kennedy, Javitts Insist No More Coverup

Full Probe of Charges of FDA Abuses Demanded By Senators

WASHINGTON — Senators Edward M. Kennedy and Jacob Javits have sought assurances from the Department of Health, Education and Welfare that its investigation of charges of "serious administrative abuses" in the Food and Drug Administration will be a sweeping one.

They wrote to Lionel M. Bernstein, a senior HEW official, after reports gained currency that the department would try stonewalling tactics against the probe into one of its most sensitive, yet widely criticized areas of operation.

Bernstein is the liaison man between the special advisory panel appointed by outgoing HEW Secretary Caspar Weinberger to investigate the role of FDA in the research and development of new drugs, and HEW.

Many HEW insiders have expressed fears that Bernstein is beginning to play too heavy a role in controlling the flow of information to and out of the advisory committee. Essential information, they feel, may not even reach the panel.

The panel was created in February after numerous FDA scientists broke a long silence and testified under oath before the Senate subcommittee on health that FDA had consistently harassed and punished scientists who had given opinions on drug approvals contrary to the interests of the drug industry.

At Kennedy's urging, a two-pronged inquiry began, the first phase of it conducted by FDA Commissioner Alexander Schmidt. His findings will be reviewed by the advisory panel which will also make recommendations about the entire drug approval procedure.

The panel came into being only after Kennedy had objected vehemently to Schmidt's conducting the inquiry. FDA should not be allowed to investigate FDA, he had insisted. The independent panel was a compromise worked out by former HEW Under Secretary Frank Carlucci.

The panel already has held a number of sessions, but Schmidt has not submitted his own findings to it. Some members have been critical of this delay by Schmidt, but he has argued that some of the accusing scientists were late in handing over material to him on which he was to base his own investigation.

The scientists have charged Schmidt with playing games over deadlines, trying to "cover up" what he promised would be an open inquiry, and interfering with their relationship with their lawyer who has been denied access to various documents the scientists

(Please turn the page)

wish to present in their behalf.

The Kennedy-Javits letter is aimed at ensuring that the advisory panel goes all the way in its investigation of FDA and that nothing is hidden from it.

The letter was written in May but did not surface until June 25 when during a panel meeting a panelist unearthed it from a pile of documents and insisted it be answered by HEW.

Bernstein agreed, albeit reluctantly, according to a source.

The letter insists that the panel review all accusations made against FDA's management including:

- Testimony questioning the adequacy of FDA policy concerning preclinical testing requirements particularly in the case of potentially carcinogenic drugs, and the follow-up of patients who have been administered investigational drugs later found to be carcinogenic in animals.
- The resistance of FDA management to expressed concerns about the possible carcinogenic threat to humans from the use of DES in foodbearing animals.
- FDA's actions in connection with the Dalcon Shield contraceptive.
- Charges made by employees of the Bureau of Veterinary Medicine (FDA) that important reports and memoranda have been suppressed and removed from files, that the issuance of a letter adversely affecting a drug company was delayed for over three years, that an employee who wrote a critical memo was transferred, that the evaluation of a carcinogenic drug has been hanging for seven years, and that a six-year study concerning the use of antibodies in food-bearing animals was inadequate.
- Critical testimony by FDA employees and others concerning the approval by FDA of DES as a "morning-after" contraceptive and the manner in which the application was handled.
- The accusation by a Bureau of Foods employee that she had been harassed and isolated by her superiors after she publicly disclosed the potential danger of cyclamates.

— Inderjit Badhwar
Federal Times (7/23/75)

New York to Host Regional NHF Convention

The Northeast Regional NHF Convention is scheduled for Nov. 22 and 23 at the Statler-Hilton Hotel, 7th Ave. and 33rd Street, New York.

"The theme for this year's convention program is 'Nutrition and Health,' says Carole Smith, convention coordinator, "and several outstanding speakers are scheduled: Max Huberman, Betty Lee Morales, Dr. Walter Hodson, Dr. William Ellis, Beatrice Trum Hunter, Paul Keene, Clinton R. Miller, Dr. Broda Barnes, Dr. Michael Schachter, and Dr. Harvey Ashmead.

"A panel emphasizing 'Nutrition and Health,' scheduled for early Sunday morning, promises to be one of the highlights. The approximately 50 exhibitors will provide a fascinating show of the latest health-related products and services. The public is cordially invited. Admission is $3 per day, $5 for the two days."

FDA Against New Provisions Vitamin-Mineral Measures

The Food and Drug Administration does not like the revised Proxmire-Schweiker and Rogers bills dealing with vitamin-mineral regulations. This became clear in letters to the chairmen of the Senate and House committees who will pass on the proposed legislation. HEW Secretary Caspar Weinberger said S1692 (the Proxmire-Schweiker bill superseded by S 2107), and HR 6807 (the Rogers bill) "would hinder the FDA in its consumer protection efforts" and "would seriously cripple this Department's ability to protect the public from misleading vitamin/mineral preparations."

According to *Food Chemical News*, Mr. Weinberger wrote Chairman Harley Staggers that in prohibiting FDA from setting potency restrictions, Congress would be preventing FDA "from taking . . . action to prevent bilking of consumers." Potency limits were proposed, he said, in response "to widespread fraudulent marketing practices."

The letter continued: "Although the proposed legislation would not restrict FDA's existing authority to impose limitations on the basis of safety considerations, it is well recognized by the agency that there are great gaps in knowledge of nutrient toxicity and imbalances. These gaps pose obvious difficulties in establishing precise safe levels for many of the nutrients, particularly the minerals, in spite of the fact all minerals are known to be toxic at some level of intake . . .

"The prospect of further proliferation of 'megadose' supplements in the marketplace raises the spectre of endemic nutrient toxicity problems in the population, some of which may take years to recognize and effectively control . . ."

WANTS NUTRIENT, 'DRUG'

HEW opposes the proposal in the new legislation preventing FDA from regulating a nutrient preparation as a drug unless therapeutic representations are made in "labeling." FDA is not presently limited to labeling in determining whether an article is intended for drug use. Noting that claims are made "in oral sales pitches" and in advertising, the letter said, "These false therapeutic representations present a potential health hazard, in that large numbers of people may be encouraged to treat themselves with these useless preparations for diseases that require

(Please turn the page)

prompt and specific medical attention." Mr. Weinberger urged that the phrase "in its labeling" be deleted from the drug provision of the bill.

AND COMBINATIONS

Noting that the proposed legislation would eliminate FDA limitations on combinations of nutrients, Mr. Weinberger continued: "Many consumers are not aware of the full complement of vitamins and/or minerals which should be present in a multinutrient product sold as general 'insurance' against nutritional deficiency, nor are they generally aware of potential harm from any prolonged imbalances of nutrients consumed . . . FDA's regulations would permit purchase of any individual vitamins or minerals, while standardizing combination products — a system which protects personal preference while still assuring that when a member of the general public buys a multivitamin product . . . he will get all the vitamins that should be present."

HEW said FDA believes that "an unlimited multiplicity of irrational vitamin-mineral combinations simply leads to consumer confusion, the omission of more expensive ingredients from multinutrient products, and (ironically) higher prices . . .

"It would be most unfortunate for the consumer if Congress should . . . vote for a return to misleading chaos in this area. The courts have agreed that the addition of worthless ingredients to dietary supplements . . . is a misleading practice. It would be most unfortunate for the public if Congress were now to pass a law permitting acts which the courts have uniformly found to be misleading to consumers."

'Snapper' In Amendment to New Vitamin Bill, Dilling Contends

After reviewing a proposed amendment by Senator Richard S. Schweiker to S. 988 (Heart and Lung bill) pertaining to the food supplement legislation under consideration in Congress, Attorney Kirkpatrick Dilling told the National Health Federation Executive Committee he finds "one snapper of major proportions."

"The one negative provision is contained in Section 2(A) of proposed Section 411 (a)(1)(C), which states: 'The labeling for any food to which this section applies may not list its ingredients which are not vitamins or minerals (i) except as a part of a list of all the ingredients of such food, and (ii) unless such ingredients are listed in accordance with an applicable regulation promulgated under section 403(j).'

"This section," contends Mr. Dilling, "wipes out advantages elsewhere granted in the amendment. Putting it another way, one could well have protein, unsaturated fatty acids, rutin, bioflavonoids, hesperidin, and other ingredients included with any product, and yet unless an 'applicable regulation' had been promulgated by FDA to permit listing thereof on the product label, the consumer would never know these ingredients were so included."

Mr. Dilling added that "Peculiarly enough, however restrictive this section might be, it would seemingly permit listing of vitamins and minerals now considered by FDA to be 'non-essential,' such as inositol, PABA, Vitamin B-15, and the like."

STATEMENT OF OWNERSHIP - MANAGEMENT - CIRCULATION

1. Title of publication: The National Health Federation Bulletin
2. Date of filing: August 22, 1975
3. Frequency of issue: Monthly except that the July and August issues are combined.
4. Location of known office of publication: 212 West Foothill Blvd., Monrovia, California 91016
5. Location of headquarters or general business offices of the publishers: 212 Foothill Blvd., Monrovia, California 91016
6. Names and addresses of publisher, editor and managing editor:
   Publisher: National Health Federation, 212 West Foothill Blvd., Monrovia, California.
   Editor: Don C. Matchan, 212 West Foothill Blvd., Monrovia, Calif.
7. Owner: National Health Federation (a non-profit corporation), 212 West Foothill Blvd., Monrovia, Calif. 91016
8. Known bondholders, mortgagees, and other security holders owning or holding 1 percent or more of total amount of bonds, mortgages or other securities: None
10. The purpose, function, and non-profit status of this organization and the exempt status for Federal income tax purposes have not changed during preceding 12 months
11. Extent and nature of circulation (Average number of copies each issue during preceding 12 months): A. Total number of copies printed: 26,927; B. Paid circulation sales through dealers and carriers, street vendors and counter sales: 2,025; Mail subscriptions: 20,839; C. Total paid circulation: 22,864; D. Free distribution by mail, carrier or other means: 1. Samples, Complimentary and other free copies: 327; 2. Copies distributed to news agents, but not sold: 0; E. Total distribution (Sum of C and D): 23,191; F. Office use, left over, unaccounted, spoiled after printing: 3,736; Total (Sum of E and F — should equal net press run shown in A): 26,927.

   Actual number of copies of single issue published nearest to filing date: A. Total number of copies printed: 26,000; B. Paid circulation—1. Sales through dealers and carriers, street vendors and counter sales: 1,803; 2. Mail subscriptions: 18,458; C. Total paid circulation: 20,261; D. Free distribution by mail or other means: 1. Samples, complimentary and other free copies: 252; 2. Copies distributed to new agents but not sold: 0; E. Total distribution (Sum of C and D): 20,513; F. Office use, left over, unaccounted, spoiled after printing: 5,487; Total (Sum of E and F): 26,000.

I certify that the statements made by me above are correct and complete.

Charles I. Crecelius, President

Fluoride Rejected

A measure requiring water companies serving 20,000 or more persons to fluoridate their product was defeated twice in two months by the Pennsylvania legislature.

Introduced two years ago by the House's only dentist, Dr. Jay Wells, Allegheny, the measure was brought to a vote this year. He said local water companies often refuse to fluoridate unless forced. The bill lost by eight votes the first time around, and on the second try was 15 votes short.

Leading the opposition was Joseph Zeller of Lehigh who told his colleagues, "We should let local communities decide their own fate. If I'm going to die I'm going to die my way."

Harassment of Nuclear 'Dissident' Creates Climate of Fear in Dallas

Editor:

The March *Bulletin* quotes Dr. Yiamouyiannis on Page 13 ". . . whereas the two nonfluoridated cities (Houston and Los Angeles) have cancer death rates 27% below the national average."

Houston's City Council will vote on fluoridation in about a year. Dr. Albert G. Randall, director of the Public Health Department in Houston, stated to us that the facts in Dr. Yiamouyiannis' article are not true and that Los Angeles does have fluoridation. Furthermore, he says he is going to vote *for fluoridation* for Houston!

Because of the Pomeroy File case in Dallas, (which was on "60 Minutes" March 2) where Mr. Pomeroy was investigated by both state and federal agents and a file presented to his employers characterizing him as a dissident because he got up at a public meeting and objected to the proposed construction of a nuclear energy facility near Dallas, we are afraid to protest. We are afraid to put our names to anything for fear of reprisal and a continual harassment just as Mr. Pomeroy is undergoing.

That is the reason, and we resent it, that we cannot participate in forming a mini-convention as President Crecelius suggests.

(Ed. note: And we call this America! . . . It is *Bulletin* policy to publish only signed letters, (name withheld if desired). This letter, postmarked Houston, was not signed, but it tells a story that should be broadcast throughout the "land of the free and home of the brave.")

GLAD FOR ACTION

Editor:

I was reading the *NHF Bulletin* for the first time when I came across a statement on Page 13 regarding exporting sugar to the Russians. I believe this loss of objectivity is very unbecoming.

However, otherwise your publication is delightful to read, and reassuring that *someone* is doing something about such matters as chemical food additives, food processing, etc.

I think the article on the dangers of homogenized milk needs further study. There is clinical evidence that more harm is done from the heating of milk in pasteurization.

JEAN C. SEXSMITH
1171 Eyremount Drive
West Vancouver, B.C.
Canada

INSPIRED

Editor:

The comma between the month and year on the front of *The Bulletin* as well as inside the cover and on the bottom of each and every page . . . grammatically is not an error . . . however the modern trend is to omit it . . . and since it serves no purpose whatsoever . . . I would love to see it long gone . . .

VIOLET PHELPS
5211 Sky Parkway
Sacramento, Ca. 95823

P.S. Each time I receive *The Bulletin* I sit immediately down and read it from cover to cover – and further, I am trying to get 12 (yes twelve) new members this month – inspired by "Each One Get One" in the July-August issue. You'll be hearing more from me.

WARNING ON 3X

Editor:

As science director of the National Health Federation, I should like to make your readers aware of what I believe to be a hazardous substance being sold at some health food stores. The substance is labeled "CALC. FLUOR. 3X." It contains 1,000 parts per million calcium fluoride. The bottle I obtained was put out by the Standard Homeopathic Co., Los Angeles.

Directions suggest taking "4 tablets four times a day" which is equal to or more than that consumed in artificially fluoridated areas. For those who believe calcium fluoride is safe because it is natural, let me assure them they can kill themselves quite easily with calcium fluoride.

In addition, 3X is hardly a homeopathic dose. I suggest that health food stores immediately remove all such stock from their shelves and that the Standard Homeopathic Co. be requested to *cease selling* this product. Yours for better health.

J. YIAMOUYIANNIS, Ph.D.
Science Director
National Health Federation

Laetrile Means Jail for Arizona Doctor's Wife

The wife and secretary of Dr. Seymour Weisman, Phoenix, Ariz., were arrested Aug. 6 while crossing the Mexican border to return to the U.S. with 400 vials and 3,000 tablets of Laetrile (B-17). They were jailed pending a hearing the following day.

Dr. Weisman told a reporter for the *Arizona Republic* that Mrs. Weisman felt "it was a mission of mercy to help my cancer patients" when she went to Tijuana to get the Laetrile. He said he was not certain, but he believed she may have been arrested following a tip from an informer.

The Phoenix physician has been using Laetrile as a nutrition adjunct for some time, says that while it is not approved by the Food and Drug Administration or insurance companies, it "relieves pain in about 90% of the cancer victims, and generally produces a sense of wellbeing."

Dr. Weisman said that on May 28 eight agents representing the FDA, the Board of Medical Examiners, and the Department of Public Safety raided his office, confiscating $4,000 worth of Laetrile and 32 patient records.

THE WELCOME MAT'S OUT TO THESE NEW LIFE AND PERPETUAL MEMBERS

PERPETUAL

MR. and MRS. BENJAMIN SMITH
Troutdale, Ore.

LIFE

MR. and MRS. F. E. SLATER
Pittsburgh, Pa.

NORMA STEINBRUGGE
Huntington Beach, Calif.

C. D. CLARK
Salem, Ore.

ROGER B. PAYNE, N. D.
Edmonds, Wash.

MRS. WILLIAM D. BAUER
Seattle, Wash.

MILDRED BURRINGTON
Seattle, Wash.

CHARLES H. MOCK
Seattle, Wash.

FAE M. and JACOB SIEGLER
Olympia, Wash.

IRWIN and VIOLA ELLIS
Tacoma, Wash.

WINONA J. SCHAAR
Mt. Prospect, Ill.

A. W. HORNER, JR., D. C.
Union City, Tenn.

MR. and MRS. JAMES Q. SMITH
Blodgett, Ore.

MAGGIE CROW
High Point, N. C.

SHIRLEY BURCZYK
Chicago, Ill.

MRS. EVALYN E. POCAN
Portland, Ore.

FLORENCE LAKOFF
Washington, D.C.

ANDREW J. STUBLER
Severn, Md.

DR. IDA P. ROLF
San Francisco, Calif.

CHUCK McNEAL
Berkeley, Calif.

RAMONA STOTTS
Berkeley, Calif.

CHAD CHESTERFIELD
Los Angeles, Calif.

KIRK and ELIZABETH ASHCROFT
Apalachin, N. Y.

MRS. OLIVER MACOMBER
Porterville, Calif.

DOBRILA HANSEN
Freeport, Fla.

E. R. MITCHELL
Novato, Calif.

ROY L. UNDERWOOD
Kansas City, Mo.

ROLAND C. HOHNBAUM, D.C.
Richmond, Calif.

DAEMON C. STRICKLER, D.C. and FAMILY
Palmyra, Pa.

DR. F. V. DESIMONE
Pittsburg, Calif.

MRS. T. R. STAUDERMANN
East Orange, N. J.

SPECIAL OFFER! (Members Only)

The National Health Federation is pleased to announce an exciting BONUS RENEWAL PLAN: For a limited time, membership renewals, and new members, will be eligible to receive, in addition to the Bulletin, a one-year subscription to one of the three magazines listed below. Your membership will cover the cost of a full year's subscription. Packed with valuable information on natural ways of maintaining health, these publications feature knowledgeable writers on a wide range of subjects centered on environment—internal as well as external. Simply mark which you prefer and return the coupon (other side) with the $8 renewal or new membership. Allow 2 months for processing. (We regret that this offer cannot be retroactive. Check of $8.00 must accompany order. But you're welcome to advance your membership another year by sending in a renewal and check—even if you renewed very recently).

☐ **BESTWAYS—50 pages. Reg. $4.40 per year.**

☐ **HERALD OF HEALTH—24 pages. Reg. $5.00 per year.**

☐ **LET'S LIVE—More than 100 pages. Reg. $7.50 per year.**

Ask Your Neighbors, Friends to Join the NHF Ranks!

The offer described here is being made, according to NHF President Charles I. Crecelius, "with two thoughts in mind: First, to benefit, you, our members. We also hope that with the extra inducement, each of you will be inspired to approach neighbors and friends, asking them to join the Federation. It's the bargain of a lifetime!

"As a member, we know of your concern for the success of our Health Freedom Program, and the strong desire to involve others so more victories can be won sooner. We believe that with this attractive combination of vital health information, you will find a good response among those you contact."

The National Health Federation
212 West Foothill Blvd.
P.O. Box 688
Monrovia, California 91016

Dear NHF:

I know a bargain when I see it! Sure I want to take advantage of your special offer of a one-year subscription to the magazine indicated. Enclosed is check of $8.00. Please send it to:

Name

Street address or p.o. box

City **State** **Zip**

Memorial Service for Dr. A. M. Livingston, 72

Memorial services were held May 27 in Pacific Beach Chapel of the Church of Jesus Christ of Latter-Day Saints for Afton M. Livingston, M.D., husband of Dr. Virginia Livingston, frequent speaker at NHF conventions. He had been in failing health for several years. He was 72.

Born in Utah, he had lived in California since 1948. In 1970 he and Mrs. Livingston established the Livingston Clinic for Allergy and Immunology, its new building dedicated just a few days before his death. The Livingstons continued to do research and study the clinical evidence of progenitor cryptocides, the bacteria they believe responsible for development of cancer. Dr. Virginia Livingston has pursued that research for many years, starting as a young medic in the east.

THIS IS THE NATIONAL HEALTH FEDERATION

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 industry, 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 harassment 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?

ELECTED FEDERATION OFFICERS

Charles I. Crecelius — President and Executive Head of the Federation. Address: P.O Box 688, Monrovia, California 91016.

Betty Lee Morales — Secretary

Dorothy B. Hart — Vice-President

Kurt W. Donsbach — Chairman of the Board of Governors and Executive Assistant to the President. Address: P.O. Box 688, Monrovia, California 91016

V. Earl Irons — Vice Chairman of the Board of Governors

PAID FEDERATION STAFF AND THEIR FIELDS OF ACTIVITY

Clinton R. Miller — Vice President in charge of the Washington Office, which includes Legislation and Regulations.

Address: 4620 Lee Highway
Arlington, Virginia 22207
Phone: (703) 525-3014

John Yiamouyiannis, Ph.D. — Science Director
Address: P.O. Box 688, Monrovia, California 91016
Phone: (213) 358-1155

Convention Bureau — Plans and co-ordinates all convention activities.
Address: P.O. Box 688, Monrovia, California 91016
Phone: (213) 358-1155

Don C. Matchan — Editor of **NHF Bulletin.**

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

NATIONAL HEALTH FEDERATION
P.O. Box 688
212 West Foothill Boulevard
MONROVIA, CALIFORNIA 91016
Telephone (213) 358-1155
Entered as Second-class Matter
$8.00 Membership (includes **Bulletin** subscription)
PRICE FOR ADDITIONAL COPIES OF THIS ISSUE
50¢ each—4 for $1.00—25 for $5.00—40 for $7.50—100 for $17.00
(Plus Delivery Charges)

YOUR CONTRIBUTIONS TO N.H.F. GET THE JOB DONE

PLACE 10c STAMP HERE

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.

UPCOMING NHF CONVENTIONS

Northeast Regional—Nov. 22-23
Statler-Hilton—New York

21st Annual—Jan. 9-10-11
Pasadena Center—Pasadena
(300 East Green St.)

HELP SAVE OUR HEALTH FREEDOMS