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**After Hearings,
Congressman
Fountain Is
Convinced
Fluoridation/
Cancer Link
'Open Question'**

Yiamouyiannis Charges NCI 'Coverup'

●
**Drop Opposition to Laetrile,
NHF Urges Key Congressmen
'Master Strategy' to Suppress Its Use
Israeli Doctor's Intriguing Research
With Amygdalin-Related Medication**

●
MORE ON SCHOOL NUTRITION SUCCESSES

●
**Top Speakers Slated for NHF's
23rd Annual Convention
Workshops, Demonstrations, Too!**



DR. JENSEN



DR. CHRISTOPHER



PAAVO AIROLA

THE NATIONAL HEALTH FEDERATION BULLETIN

Protection of Health Freedoms

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CONTENTS

Focus on Holistic Health at Upcoming Convention	1
NHF Science Director Pinpoints NCI 'Errors, Omissions'	2
After Hearing the Evidence, Fountain Declares Fluoridation-Cancer Link 'Open Question'	5
How Shreveport Antifluoridationists Turned It Around	7
Michigan Governor Insists on Hard Look at Fluoridation	8
'Some Kind of a Health Nut'	9
Staff Changes at Federation Headquarters	10
Memorial Library Has Fulltime Librarian — Stephanie Shane Background on NHF's New Convention Manager Goldman	11
The Drive to Change Some Washington Thinking on Laetrile	12
14	14
Dr. Rubin's Work With New Cancer-Control Substance	16
19	19
How the Feds Hope to Keep You from Getting Laetrile	19
Homeopaths' Position on Use by Lay Practitioners	20
Honorof-McBean Vaccination Book Reviewed	21
22	22
If You Don't Want Your Child Vaccinated —	22
Petition Drive for Presidential Pardon of Dr. Richardson	24
Young Folks Will Eat Right if They Get Half a Chance	25
27	27
Changing Sweet Tooth to 'Savory' Tooth	27
29	29
Tax Relief on Allergy-Connected Health Foods	29
To NHF's New Life Members — a Warm Welcome!	30

The Bulletin serves its readers as a forum for the presentation 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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Convention Manager Goldman Promises 'Biggest, Best Yet'

Holistic Approach Core of NHF's 23rd Annual

"In-depth health education" aimed at "assisting attenders to become totally rejuvenated" will be offered during the 23rd Annual Health, Nutrition, and Beauty Convention of the National Health Federation, reports Allen Goldman, new NHF convention manager.

The event is scheduled for January 27-28-29 in the Pasadena Convention Center, 300 East Green St., Pasadena, Calif.

"This year's theme," said Mr. Goldman, "will be geared toward aiding attenders to look and feel your absolute best at all times. Many speakers, nutritionists, and entertainers are slated to appear."

"With emphasis on the holistic approach to health-care — featuring preventive medicine, medical doctors, chiropractors, fitness specialists, and educators from the natural health industry — we promise an exciting three days to those who make the trip to Pasadena this year. We will welcome the "regulars" who make our annual conventions each year, along with those to whom the NHF convention will be a new experience."

Among those scheduled on the program are Dr. Harold W. Manner, chairman of the biology department, Loyola University, Chicago, who is heading a research project funded by the NHF Memorial Library. His work with Laetrile (amygdalin) has been widely publicized since his announcement in September at the Midwest NHF convention that tests on mice showed nearly 100% remis-

sion of mammary breast tumors. Others to be presented on the three-day program will be comedian Dick Gregory, Dr. John Christopher, Dr. Richard Passwater, Paavo Airola, NHF officers Dr. Kurt W. Donsbach, Betty Lee Morales, and V. Earl Irons, and Dr. Bernard Jensen.

"The program will be a combination of lectures, with demonstrations and workshops in meditation, massage, cooking for health, and exercise clinics," says Mr. Goldman. "An impressive number of exhibitors is signing up for space, and we can assure the public plenty of informational materials, samples, along with products and services."

"We are going all-out to make this the 'biggest and best yet,' and we know it will be a rewarding weekend for everyone."

YOU CAN STILL RENEW MEMBERSHIP FOR \$8

As announced in the October Bulletin, because of spiraling costs, NHF membership dues will advance to \$10 a year as of January 1.

Renewal on or before Dec. 31 will be honored at the \$8 rate. (Of course, NHF will not turn down \$10 if you want to make the check for that amount!)

To insure continuity of your membership, and to keep The Bulletin coming without interruption (it is included in the membership fee), why not sit down now and send that check in!

Yiamouyiannis Charges NCI Cancer/Fluoride 'Coverup'

In a subdued but penetrating review of what he terms a "coverup" by the National Cancer Institute of the fluoridation-cancer link, NHF Science Director John A. Yiamouyiannis, Ph. D., revealed to a Congressional subcommittee "major errors and significant omissions" in the NCI analysis of the National Health Federation study linking fluoridation to cancer.

The hearing last Sept. 21 was called by Congressman L.H. Fountain, chairman of the House Intergovernment Relations and Human Resources Subcommittee, to "examine the differences of opinion" as to the validity of the Yiamouyiannis-Burk studies. "We must be absolutely certain," he said, "that adding fluorides to community drinking water is not contributing in any way to the development of cancer in people."

Dr. Yiamouyiannis and Dr. Dean Burk, former head of the cytology section of the National Cancer Institute, testified on their studies which have revealed 10,000 fluoridation-linked cancer deaths annually.

Presenting the case for the National Cancer Institute was Dr. Robert N. Hoover of the Dental Section in NCI who prepared the original report denying a fluoridation-cancer relationship.

Copies of Dr. Yiamouyiannis' 11-page statement to the committee are available from NHF, Monrovia, for \$1. The statement also includes a list of 13 references.

NCI ADMISSION

"These results have been confirmed by the National Cancer Institute. In an interdepartmental National Cancer Institute memo from Dr. Marvin Schneiderman to Phoebe Dunn dated Feb. 27, 1976, NCI investigators admitted confirming Yiamouyiannis findings showing a link between fluoridation and cancer: 'As you can see, the NCI analysis gives a similar picture to the curves in the NHF report.'

"The remainder of the memo tried to explain with erroneous and incomplete data that this increase could be attributed totally to changes in the race and age composition of the fluoridated and control groups of cities. This same information appears in a letter from Donald S. Fredrickson to Congressman James J. Delaney dated Feb. 6, 1976. Congressman Delaney, through Congressman Flood, asked the NCI to reveal the step-by-step procedure it had used in formulating its results. NCI refused to answer, National Institutes of Health's Fredrickson stating only that 'Every number on which our analysis was based is available from the routine publications of the Bureau of the Census and the National Center for Health Statistics.'

"While we were aware of the availability of the raw data, we did not know whether the NCI group was using weighted or unweighted averages, whether they were using an age-sex or an age-sex-race breakdown, or the size of their age groupings. NCI refused to reveal to us the step-by-step procedures it used to calculate values until the publication of its work a year and a half later under the names of Oldham and Newell in the July 1977 issue of *Applied Statistics*. We then were finally able to

compare the discrepancy of the NCI finding of a net 2% decrease in cancer death rate in fluoridated cities with our findings of a 4%-5% increase in cancer death rate as reported in the July 1977 issue of *Fluoride*."

'THREE BASIC ERRORS'

"Three basic errors in the NCI analysis explain the difference between its results and ours:

1. The number of cancer deaths reported by NCI in nonfluoridated cities in 1970 is seriously in error.

2. The NCI study disregards most of the data available on cancer deaths from 1950 to 1969, and uses data from the year 1970 when fluoridation of the control group already had begun.

3. The NCI study suffers from its dependence on one or both of the following false assumptions: (a) that the national cancer mortality figures reflect the cancer death rate distribution according to age, race, and sex occurring in the central cities; and (b) that the age, race, and sex distribution of cancer death rates remains constant for the entire 20 years of the study.

"We have shown that both these assumptions are false (see Yiamouyiannis-Burk Table 6a and Oldham-Newell Table 3), and that when these conditions are not met, the standardized mortality ratio (SMR) cannot be relied upon to give meaningful results . . ."

When the errors in the NCI analysis are corrected, said Dr. Yiamouyiannis, the NCI calculations also indicate a fluoridation-cancer link — "a net increase of 3% (in fluoridated cities), in better agreement with the more accurate direct method (of computation), which yields a 5%-6% increase in age-adjusted cancer death rates in fluoridated cities as compared with

(Please turn the page)

that of the nonfluoridated cities (Yiamouyiannis-Burk Table 11, 1950-70 extrapolation)."

'DISGRACED' SCIENTISTS

Dr. Yiamouyiannis castigated NCI officials for providing its erroneous data to scientists in England, bringing "disgrace not only upon themselves, but also upon Drs. Doll and Kinlen and Drs. Oldham and Newell, who felt that since the data came from the National Cancer Institute, they must be right."

"The behavior of NCI officials has been strange," he asserted. "While refusing Congressional requests for detailed data, the NCI has passed this data on to scientists in England. May I remind this committee that the NCI is funded with monies derived from American taxpayers. You would think that American taxpayers, with the help of Congress, should be able to receive the same data. We weren't. If we had, we might have saved the NCI the international embarrassment its officials have brought upon themselves by sending erroneous data overseas and having it published under the names of other scientists."

"As best we can determine, upon publication of the Dec. 16, 1975, Yiamouyiannis-Burk report, the National Cancer Institute hastily prepared a rebuttal, sent it to Drs. P.M. Sheppard, Richard Doll, and/or L.J. Kinlen who submitted it to *New Scientist*, who published the erroneous data in its Feb. 5, 1976, issue, one day earlier than Dr. Fredrickson's Feb. 6, 1976, letter to Representative James J. Delaney, which reported the same erroneous results . . .

"Drs. Doll and Kinlen proceeded to publish another article in *Lancet* (June 18, 1977) using the same erroneous data. How much of this data

was provided by the National Cancer Institute and how much was actually prepared by Doll and Kinlen is difficult to determine.

"Drs. P.D. Oldham and D.J. Newell published the erroneous NCI data under their own names in July 1977, stating in part: . . . The data on the age-sex-race structure of the fluoridated and unfluoridated towns in 1950 and 1970 were extracted from the routine publications of the U.S. Bureau of the Census and accumulated by the National Cancer Institute. We have no reason to doubt their ability to add and tabulate these numbers . . . (NCI's) SMR's coincide exactly with the results which have emerged from our independent calculations.' Copying the same erroneous NCI data hardly qualifies the Oldham-Newell article as an 'independent' study, but rather suggests misplaced confidence in the NCI."

"One would expect that for the plus \$800 million we are spending annually on the National Cancer Institute, we could at least expect an epidemiology branch that can add. NCI's errors have brought disgrace not only upon the agency, but also upon Drs. Doll and Kinlen and Drs. Oldham and Newell, who felt that since the data came from the National Cancer Institute, they must be right. I urge members of this committee, and all Congressmen, not to make the same mistake."

'ERRONEOUS STATEMENTS'

"The National Cancer Institute has made a number of inaccurate and erroneous statements in an attempt to sweep the fluoridation-cancer controversy under the carpet."

"On March 5, 1975, NCI released an evaluation of our preliminary study stating: "Much of the excess in the

FLUORIDATION/CANCER LINK 'OPEN QUESTION' SAYS FOUNTAIN AFTER HEARING EVIDENCE

Upon conclusion of a second hearing October 12, Congressman L. H. Fountain observed that "the evidence presented here makes it clear that the relationship between fluoridation and cancer is now an open question."

Much of the three-hour session in Washington was spent by the staff and Congressmen Fountain and Clarence Brown (Ohio) quizzing NCI personnel about points raised by Dr. Yiamouyiannis in his testimony of Sept. 21. NHF Executive Vice-President Clinton R. Miller described the staff performance as "magnificent."

Asked by Congressman Fountain if he had conferred with NCI personnel officials during his research, and how he was treated, Dr. Yiamouyiannis replied he had met with Drs. Robert Hoover and Guy Newell, and that he would have to describe the NCI attitude as "arrogant." Ohio Congressman Clarence Brown commented that

cities with high rates that are cited is due to *lung cancer*.' This is false . . . (and the) claim has since been abandoned by NCI."

"On March 5, 1975, and again in April 1975, NCI personnel claimed that in eight cities (unidentified), the cancer death rate went down after fluoridation."

"On August 19, 1975, with the help of Congressman Delaney's office, we were able to get a list of the cities studied. We found that one of the cities, Seattle, was not even fluoridated during the period studied, and that in the remaining seven cities the cancer death rate went up, not down, after fluoridation — again, an example of NCI's looseness, lack of coopera-

tion, and inaccuracy . . .

"In August of 1975, NCI agreed to do an 'impartial study' on the fluoridation-cancer link. The main investigator of that study was Dr. R.N. Hoover, who authored the March and April 1975 NCI releases that absolutely denied any connection between fluoridation and cancer."

"By September 11, 1975, Jack Anderson had already 'learned its tentative conclusion: no link.' . . .

"In October 1975 Dr. Hoover told the Royal College of Physicians the conclusions of this NCI study: no link . . .

"On Oct. 22, 1975, Dr. James Peeters, director of the Division of Cancer

Dr. Yiamouyiannis said after it was over, that "it went well." He was pleased with the staff handling of points of issue between NCI and the Yiamouyiannis-Burk studies. And he was assured by Congressman Fountain that henceforth he will have access to any material in NCI files which he needs for further research.

"I believe," said Dr. Yiamouyiannis, "that the groundwork now has been laid for eventual ending of fluoridation. It will not be easy, but if we can get the message to enough congresspersons, it may happen sooner than we think."

Dr. Yiamouyiannis appeared on ABC's "Good Morning America" show with NCI's Dr. Marvin Schneiderman Oct. 12.

(Please turn the page)

Cause and Prevention, NCI, sent a telegram to a profluoridation dentist in Seattle which again reported: no link.

"On Nov. 19, 1975, the NCI made its fluoridation-cancer study available to Congress, no surprises — no link.

"Despite the fact these errors and other inaccuracies of this report were soon revealed in the Yiamouyiannis-Burk Dec. 16, 1975, *Congressional Record* report, the NCI still proceeded to publish its report in its *Journal* in October 1976. One of a number of demonstrably unfounded conclusions drawn in the NCI Report refers to 'reduced mortality from cancers of the brain and nervous system in systems with high levels of natural fluoride.' The data used to support this proposal is, in fact, based on a total difference of only one brain or nerve cancer death over the course of two years. What kind of statistical aberration would even suggest a role in brain and nerve cancer prevention by fluoridation? Yet this NCI statement was picked up and broadcast to the American people by UPI, AP, and national television.

"More important than the shame and international embarrassment the NCI has caused due to their errors and omissions, is the possible damage the agency is doing to Americans, and will be doing to persons overseas unless the nonsense is stopped."

10,000 DEATHS A YEAR

"According to our most recent results, we can expect a minimum of about 10,000 fluoridation-linked cancer deaths annually. No reputable study has been able to disprove these results. Congress has been aware of this possibility for more than two years, and had it not been for what we

Aroused Public Forces Fluoridation Referendum

Shreveport Citizens Halt Unilateral Council Action

When it appeared that the Shreveport, La., city council was about to order fluoridation of the city's water supply, citizens opposing such a move were galvanized into action, and within three weeks had produced the signatures of 10,306 voters who demanded either that the council adopt an ordinance banning its use, or submit the issue to a referendum.

The petition asks that if the council does not enact an ordinance, it call an election to consider the question: "Addition of fluoride or fluorine-containing substances to the Shreveport water system is prohibited."

The issue had been quiescent in Shreveport since the 1950s when an consideration concerning this threat to public health."

IN SUMMARY

"In summary:

- On December 16, 1975, we reported our time-trend studies confirming fluoridation-linked cancer deaths in the *Congressional Record*.
- NCI challenged this study with a knee-jerk response, which has since been shown to be erroneous.
- The charge was made that we had not considered age, race, and sex.
- To clear up these legitimate questions, we conducted a detailed study taking age, race, and sex into account. These findings further substantiate the fluoridation-cancer relationship.
- We believe the time for sparring is over, and urge that immediate action be taken to protect our citizens."

attempt to fluoridate was rejected. In recent months, however, pressure from dentists, Jaycees, and Chamber of Commerce demanding council action to fluoridate had become so strong that it was believed a vote would have been 4-1 to fluoridate.

Leading the opposition was the Shreveport Pure Water Association under the leadership of Mrs. M. E. Chapman, president, who sponsored two trips to the city by NHF Science Director John A. Yiamouyiannis, Ph.D., who made radio and television appearances, helped organize the petition drive, and presented expert testimony at a hearing called by the council in mid-August.

During the signature-gathering period, opponents were able to acquaint the public with new information on the hazards and folly of fluoridation — to the extent that whereas two earlier public-opinion polls had shown the public as favoring fluoridation (in Feb. 1977 results were 87% for fluoridation, 13% against it), a poll published July 26 showed 68% against fluoridation, 32% for it.

Some of the comments: "Our water bills will be higher, and if everything they say about fluoridation is true, our medical bills will be higher too." . . . "It is not safe, it is not effective, and the dosage cannot be controlled." . . . "I do not want to water my garden with fluoridated water — it causes a harmful compound to form in the vegetables." . . . "Mr. Guin (ardent fluoridationist) is my water commissioner, not my doctor."

believe to be a coverup by the National Cancer Institute, 20,000 to 30,000 U.S. citizens may not have had to die needlessly from "Having studied fluoridation for more than nine years, fluoridation-linked cancers during that period.

"Having studied fluoridation for more than nine years, let me assure you that the errors and omissions of the NCI are not exceptional, but rather are typical of the attempts of the U.S. Public Health Service to 'prove' that fluoridation is safe and effective . . ."

Addressing himself to the question of benefits and risks, Dr. Yiamouyiannis pointed out that:

"While in animals, fluoridated water (1 ppm) has been shown to cause chromosomal damage and increased tumor-growth rate, it has not been shown to reduce tooth decay.

"There is more epidemiological evidence to show that fluoridation increases cancer death rate than there is to show that fluoridation reduces tooth decay.

"NCI's Rauscher admitted that while the U.S. Public Health Service, of which NCI is a part, has endorsed fluoridation for more than 25 years, prior to our studies the NCI never had conducted any study concerning the carcinogenicity of fluoride. The significant fact is that fluoridation has come into widespread use, and no one at NCI seems to have even conducted and published animal studies to determine whether fluoride compounds used in fluoridating municipal water supplies are or are not carcinogens. Similarly, many other potential risks of fluoridation have not as yet been fully examined.

"In view of the evidence presented, I urge you to give serious thought and

Michigan Governor Insists on Fluoridation Review

After stonewalling for a year requests for a review of the benefits/risks of fluoridation, the Michigan Department of Public Health has agreed to conduct a review, as a result of insistence from the office of Governor William Milliken that it be done.

According to Neil Munro of the *Oakland Press*, the "stonewalling" was "in response to a barrage of inquiries" from Darlene Sherrell, research associate for *The Bottom Line*, Suite 1208, Michigan National Tower, Lansing.

Ms. Munro, said the *Oakland Press* editorial, "claims the research data relied upon by the health department to prove the safety of the fluoridation program is not a fair representation of the actual basic research available." In July she told Health Department Director Dr. Maurice Reizen that she had "demonstrated that your 'experts' are using seriously-flawed industry-funded abstracts and reviews of the scientific literature which present a distorted view of the original work."

The editorial continued, in part: "... One of the symptoms of excessive fluoride is mottling, discoloration, of teeth. And an ominous report, made back in 1962 in the *American Dental Association Journal* indicated that

Missouri Health Dept. Picks Up Tab

An offer by the Missouri Division of Health to pay for a fluoride feeder and analysis equipment in towns with at least 500 service connections and a desire to fluoridate water, has prompted 16 Missouri communities to fluoridate, according to the Department of Natural Resources.

The communities include Albany, Bethany, Cainsville, Caldwell County Public Water Service District No. 1, Gallatin, Grant City, Hamilton, Harrison County Public Water Service District No. 1, Maryville, Milan, Oregon, Princeton, Ridgeway, Rock Port, Tarkio, and Trenton.

'Some Kind of a Health Nut?'

We recently received the following communication from a reader: "My fellow commuter noticed that I was reading a copy of your publication. The subject caught his eye. 'Nutrition, eh? That's what those health nuts are into these days. What's the latest — munching on poppy seeds?' He laughed heartily, enjoying his own joke.

"You read *The Wall Street Journal* every day," I said. "Does that make you a financial-nut?"

"Oh, that's different," my companion replied. "I have valuable investments to protect. I can't miss watching the news for even a day!"

Here we have an example of the selective thinking that dominates most of the population. There is nothing odd about reading dozens of newspaper articles, books, newsletters about finance. After all, investments must be protected. Can a healthy body be considered an investment?

Hardly anyone would be surprised to see this executive, under his arm a batch of magazines that deal with golf (to preserve his investment in an expensive set of clubs), with tennis (to make the investment in rackets, etc., pay off), with hunting (to justify the cost of all those expensive firearms and traps).

An investment in health seems not to be the kind of expenditure that fits into the typical "macho" image.

People who take care of their bodies, watch their diet, are con-

Titled "Are You Some Kind of a Health Nut?", this appeared as an editorial in Nutrition Health Review (Box 221, Haverford, Pa.)

cerned about food, air, and water are just some kind of "health-nuts."

There seems to be a consistent effort to discredit the entire health-food movement. We often hear of the "multibillion-dollar" vitamin industry that foists useless products upon an unsuspecting public. Actually, the total volume of all sales — retail and wholesale — does not approach a fraction of that sum. There are no giants in the health-food business. Nor are Wall Street financiers especially interested.

The multibillion-dollar drug industry, however *does* exist, and little is said about its profits, or the havoc that proliferation of drugs wreaks upon us. Doctors and druggists now are bearing the brunt and blame for the high cost of pharmaceuticals and their dubious value.

Why should the health-food business pose a threat to such powerful organizations? Vitamin tablets sell for only pennies a tablet. Should that be a source of annoyance to the drug manufacturers?

How would huge food processors fare if many people suddenly demanded from supermarkets' products now available in natural-food stores? Is there as much profit in an ordinary potato as can be derived from the slickly-packaged, processed versions?

Eventually, the health-nuts may prove to be the wisest and the most durable of all.

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

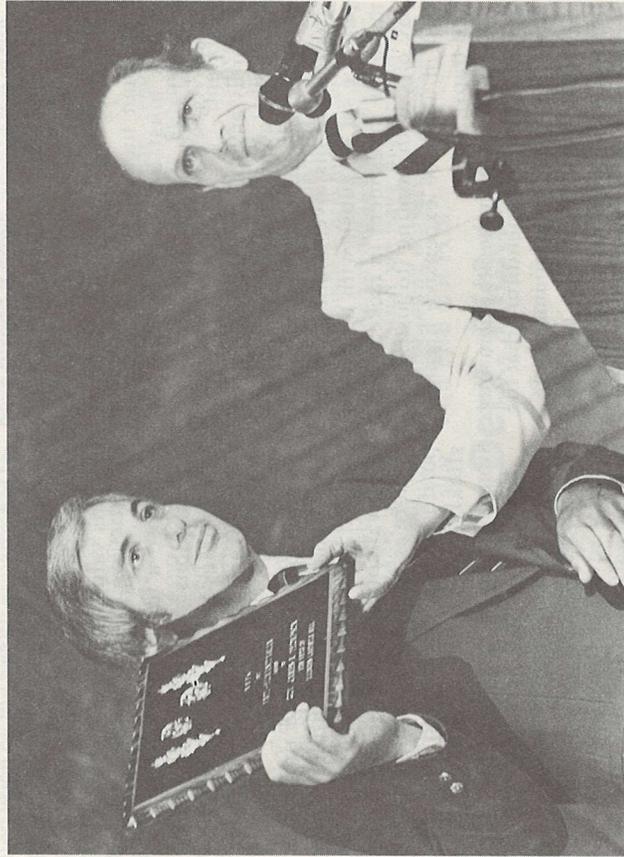
Staff Changes at NHF Headquarters

Two NHF staffers whose names have become familiar to members no longer appear on NHF correspondence. They are Carole J. Smith, coordinator of the convention bureau and chapters, and Helena Young, assistant to the president, in charge of wills and bequests.

Ms. Smith became Mrs. Paul J. Virgin at a July ceremony, and Mrs. Young was married October 8 to Joseph P. Biava of Arcadia, Calif. Mrs. Virgin works with her husband, an Alameda Dairy executive, and Mrs. Young says she plans to devote full-time to homemaking.

The convention department now is in charge of Allen Goldman, and chapter affairs are being coordinated by staff secretary Jane Course. Mrs. Young's position has been filled by Claire M. Diemer.

Other recent staff additions are Secretaries Carol Biassoti and Markel Holmes. Julie Weiser has become Dr. Yiamouyiannis' secretary in his office. After a year's absence, Mrs. Dorothy B. Hart, NHF vice-president, has returned as a volunteer, four days a week. Working parttime in the production department is Ann Altman.



The National Health Federation's first "Antihumanitarian Award" was presented by NHF Executive Vice-President Clinton R. Miller (right) to Governor James Thompson for his veto of a bill legalizing Laetrile in Illinois. Representative Donald Totten (left), sponsor of the bill, and present at the NHF convention, promised with a smile to deliver it to the governor.

Close-up of NHF Librarian Stephanie Shane

Contributions of Materials Tax Deductible, She Says

20-year-old Stephanie Ann Shane who describes herself as a "bibliomaniac" has been named librarian of the National Health Federation Memorial Library, and is busy cataloging books and bringing order out of chaos.

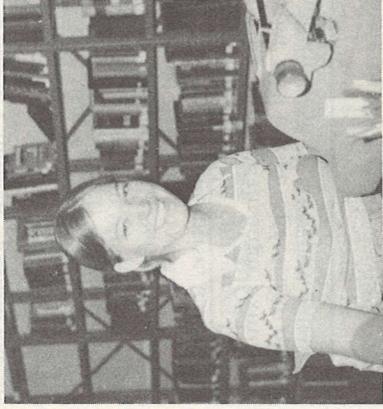
Until now the Federation has lacked the funds to take on the task of organizing the library, and her presence is greeted with appreciation by the library board, headed by Paul J. Virgin.

Since she can recall, Miss Shane has been in love with books — "one of my baby pictures shows me enthusiastically looking at a book," she says. "My first experience with literature was from the Golden Press. Chicken Little was my inception to Tolstoy's *War and Peace*, which took me two years to finish."

She says Thoreau was her "passion, Fitzgerald a dream. Any type of animal stories was eaten up. All through elementary and junior high school I haunted libraries and volunteered my services to stamp due dates, put books on shelves, or take them off, and to bother those poor ladies behind their desks."

A summer with "a darling technical assistant who had worked in the high school library for years" resulted in her decision in 10th grade to make a career of library work. Her first library classwork was at Citrus Community College, after she was graduated as valedictorian from Glendora High School.

"Drama, speech, creative writing,



journalism were interesting, but did not satisfy me, so I started collecting first editions. Every swap-meet saw me coming."

She visited thrift shops, and accumulated a huge personal library — taking with her some 900 books when she left home at 17. She spent many hours restoring them — good experience, she says — but learned from a seasoned collector later that her collection was virtually "worthless."

Stephanie has completed sufficient credits — including all of Citrus College's library courses — for an Associate Arts degree but intends to wait until next June when she can graduate with transferable credits. She is now taking a rare book class from a teacher she met while jogging.

"Working for the National Health Federation," she says, "is the climax of the many years I've spent educating myself about books. The job has helped me see exactly how far I've

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Goldman Views Convention As Way of Promoting Free Choice

Allen T. Goldman, recently named NHF convention manager, sees the position as an opportunity to "promote health," and views the regional conventions as "an ideal mechanism to encourage freedom of choice."

"Since NHF has no vested interests in commercial enterprise, it is free to act on behalf of the consumer by providing choices through exhibitors from the entire spectrum of the holistic-health self-improvement in-

come in the literary world. It is not new to me, but is a culmination, and the challenge is exciting, difficult at times."

She says her "great ambition" is to write.

In connection with her work in the Memorial Library, she seeks donations of "appropriate books, records, legal briefs, and any health-related items."

"NHF is a nonprofit organization, keeps operating costs to a bare minimum, and the administration and staff recognize that the library resources are necessary if the organization is to fulfill its purposes," she says. "Thus it is essential to build as fine a collection of print and nonprint materials as possible."

"The value of donated materials may be deducted from income tax, the same as cash contributions. Any person who wishes to arrange for a tax-deductible contribution is invited to communicate with me at the National Health Federation Memorial Library."



dustry," he said.

"We are able to bring together specialists on exercise, nutrition, fluoridation, organic gardening, and legislation. It is my intention to concentrate on achieving greater public attendance and exhibitor participation of top experts in the field."

The 26-year-old convention manager was born in New York City and raised in its metropolitan area. His father, a NASA physicist and electrical engineer, was stationed on Long Island. After graduating from high school in 1969, he completed three years of college work at Northeastern University, Boston. His specialties were financial management and the psychological sciences.

In 1972, he became involved in a cooperative work-study program, and for six months worked with Hospital Audiences, Inc., New York. He was responsible for coordinating tickets to plays, concerts and sporting events, and distributed complimentary tickets to such social service organiza-

tions as community health centers, hospitals, prisons, and drug rehabilitation centers.

The next three years were spent with two businesses he established in Boston. One was Queensbury Natural Foods Bakery, a wholesale manufacturing facility producing whole-grain sugar-free products for a market principally in the Boston-Cambridge area. The other enterprise was the manufacture and distribution of stereo loud-speakers developed by his partner and him at Massachusetts Institute of Technology.

After selling his interest in the businesses, he embarked on an independent research program at Harvard University School of Public Health under auspices of Professor James Austin. He did intensive research on national and international policy-planning programs, and was involved in an in-depth revamping of the Massachusetts Board of Education school lunch program.

In conjunction with his studies, he became public relations director of the Hippocrates Health Institute in Boston, lectured on natural foods and fasting, and taught classes in yoga and psychocalisthenics. The institute attracted people "from all over the world," he says, "people who wanted to learn the health program and sprouts/raw food/vegetarian dietary regimen. They also learned how to produce foods organically indoors to obtain maximum nutritional benefit from grains, beans and seeds."

In 1973 and 1974 he took time out to lead bicycle caravans in Canada of 14-16-year-olds. Late in 1975 he returned to New York to become director and consultant of nutrition programs at the European Health Spa, personally supervising and guiding hundreds of persons into holistic

health programs.

In December 1976, he went to work as general manager of Diet Expo, "one of the largest health spectacles ever." Held in April 1977, attendance registered 40,000. During that period he met "thousands involved in the health industry." He was sent to California to explore potential locations for similar shows, and subsequently became the nutritionist and promoter of the Couture Colon Therapy Chiropractic Clinic.

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 Health 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."

Powerful Chairmen Unconvinced of Laetrile's Safety, Efficacy

As of late September, the chairmen of the Senate Committees responsible for dealing with the Laetrile issue were unequivocally of the opinion shared by the Food and Drug Administration and the National Cancer Institute that Laetrile is a worthless substance and perhaps dangerous in the treatment of cancer.

It is apparent that these officials have formed their opinions without considering test results by Dr. Dean Burk, longtime NCI cytologist, Dr. K. Sugiura of Memorial Sloan-Kettering Cancer Center, and the new information on toxicity and efficacy — the Harold W. Manner tests at Loyola University, Chicago.

The key officials — if Laetrile is to get fair and objective consideration of officialdom — are Senator Harrison A. Williams of New Jersey, chairman of the Senate Committee on Human Resources, and Senator Edward M. Kennedy, chairman of the Senate Subcommittee on Health and Research.

On June 23, NHF Executive Vice-President Clinton R. Miller wrote Senator Kennedy requesting that he schedule testimony at the July Laetrile hearing from Dr. Manner, Dr. Sugiura, Dr. Burk, Attorney Kirkpatrick W. Dilling, and from himself.

Responding to that letter more than three months later, Senator Kennedy said in part that he:

Is "personally skeptical about the validity of Laetrile. Results of tests so far have shown that Laetrile has no significant anticancer value. I am also concerned with some of the unethical practices surrounding the sale and distribution of Laetrile. A definitive

evaluation needs to be made, and I have asked the National Institutes of Health to do it.

"There is no disease the American people fear more than cancer. The very word terrifies many. It conjures up images of pain, suffering, and terminal illness. Families fear it when it strikes a loved one because, in some cases, there is so little one can do. There is a feeling of helplessness and hopelessness. I know how very vulnerable people are in these circumstances — how willing they are to grasp at any straw — to try any approach to effect a cure.

"This is a time when people need the best information they can get; when they need to be able to understand realistic alternatives. It is not a time when people are themselves capable of sifting fact from fancy. The role of the Food and Drug Administration is to guarantee that available drug therapies are the best and most effective that science can devise. Its role is to protect both the patient and family from remedies that are neither safe nor effective. The elimination of useless treatments is, of course, a proper federal function. It is a humanitarian role. It reduces the burden on cancer patients and their families, and allows them to exercise their freedom of choice on the basis of informed judgments."

In similar vein, Senator Williams enunciated his position in a letter to Mr. Miller Sept. 15, saying in part:

That he know(s) of "no evidence that Laetrile has undergone premarket testing to prove safety and efficacy, as required by law, before being made available to the public."

Kennedy Being Urged to Hear 3 Scientists

In an effort to reach Senator Kennedy through his colleagues, urging that he invite Dr. Manner, Dr. Burk and Dr. Sugiura to testify on the toxicity/efficacy of Laetrile, NHF Executive Vice-President Clinton R. Miller has prepared a form letter (A-50, \$2/100), available at NHF, Monrovia.

"The whole Laetrile controversy hinges on whether or not Laetrile can or cannot be proven safe and effective in mice," says the letter in part. "The NCI, FDA, AMA, ACS, S-K have said it has not ever shown even a shred of evidence of efficacy, and the National Health Federation has simply asked that great scientists who hold that it has been shown safe and effective be given a chance to testify to the truth of the matter before Senator Kennedy.

"Both Senator Harrison Williams . . . and Senator Kennedy have been misinformed by the NCI, FDA, AMA, ACS, and S-K cancer establishment and are now relaying this misinformation back to those who send an NHF form letter to Senator Kennedy urging him not to trust Laetrile tests or statements by NCI.

"Senators Kennedy and Williams seem to have serious cases of confidence in the NCI. That is why I ask you to be sure that Senator Kennedy is informed that the rest of the Senate is anxious to have the testimony of Dean Burk, Dr. Manner, and Dr. Sugiura included in the record . . ."

That at the July hearing, agreement was reached that "controlled clinical studies must be done on 'the drug' to determine its safety and effectiveness."

That the surgeon general has labeled Laetrile a "hazardous drug . . ."

In conclusion, Senator Williams said: "I know the tragedy this dread disease inflicts on its victims, and the concern that many cancer patients have over the continued availability of this drug and its beneficial effect on their disease. I will take whatever action is necessary to assure that any and all therapies effective in preventing, curing, or retarding this horrible disease will be available to the public. I also will do all I can to assure the continued limited availability of this drug. However, until such therapies have been shown to be helpful, I believe it is my responsibility to warn you of the dangers you may be exposing yourself to. If I can provide any

additional information or be of other assistance, please let me know."

(This letter is believed to be similar to those being sent by Senator Williams in response to the "many" persons who have told him they believe Laetrile should be available.)

LAETRILE BEING CLEARED AT BORDER

Patients with a six-month supply of Laetrile and possessing a doctor's affidavit that the individual is suffering from terminal cancer are being cleared through Customs, and will be unless the ruling of Judge Luther Bohanon is overturned. District Judge Gordon Thompson, Jr., told Mildred Richey the policy resulted from the ruling of Judge Bohanon permitting Glen Rutherford and others to bring in their own supplies of the product.

Will New Substance Surpass Laetrile in Cancer Therapy?

Using intravenously-administered dosages of 70 grams of amygdalin, and a new amygdalin-related compound he has just developed, Dr. David Rubin of the Israeli Medical Research Foundation in Jerusalem has achieved significant results in some 60 patients.

He became interested in amygdalin (Laetrile) after visiting the clinics in Tijuana on a mission financed by the Israeli Aircraft Industry, a government-owned company in Israel.

News of his work received its first public airing in the form of an interview conducted by Jeffrey Kirsch, Director of the Science Office of KPBS, Public Broadcasting, San Diego, broadcast last July 17.

So impressed with Dr. Rubin's initial findings was Dr. Kirsch that, with AAAS Media Intern Dr. Hugh Gardner, and Mark McCarty, a third-year student at the University of California at San Diego's School of Medicine (who knows Dr. Rubin personally and has extensively researched amygdalin/cancer therapy), he prepared a memo which was circulated to the Senate Subcommittee on Health and Scientific Research, the National Cancer Institute, Memorial Sloan-Kettering Institute, U.S. Food and Drug Administration, *Science Magazine*, and *Science News*.

Dr. Rubin's comments were summarized in the memo and mailed to these organizations because Dr. Kirsch believes "this may be a very promising lead for the medical and scientific community." He urged that

"it be investigated thoroughly."

His endeavor was rewarded with deprecatory statements about Dr. Rubin's "Israeli affiliations," and the "possible motivation for his extraordinarily complicated biochemical hypothesis" from FDA Commissioner Dr. Donald Kennedy, and the observation from Dr. Stuart L. Nightingale of FDA's Bureau of Drugs that KPBS Public Broadcasting may have "misled the public by statements not supported by fact."

Dr. Kirsch documented his answers to the FDA moguls, proving that Dr. Rubin indeed is a bonafide researcher, although not doing the work at Hadassah Hospital — where he never has claimed to be doing it. The important message is that Dr. Rubin, on the basis of a handful of cases, may have hit upon a medication which could surpass amygdalin as an anticancer agent.

As of last July, most of the patients receiving 70 grams of amygdalin via the drip method were "still alive." And a patient with advanced breast cancer treated with mandelonitrile-beta-D-glucuronic acid responded immediately — it could be said "miraculously."

While more testing of course must go forward, the first four cases of treatment with the new substance showed "strong objective remissions" with two grams a day for three weeks.

Dr. Rubin, after placing patients on 30-70 grams per day (24-hour i.v. drip), noted "marked objective findings . . . including disappearance of widespread skin metastases, clearing

of jaundice, and radiological evidence of tumor shrinkage."

HYPOTHESIS

After analyzing biopsy specimens from these patients, he noted the efficacy of amygdalin therapy "tended to correlate positively with the beta-glucuronidase activity of the tumors. For this reason he hypothesized that a small fraction of administered amygdalin may be converted in the liver to the beta-glucuronidic analog of amygdalin — specifically, mandelonitrile-beta-D-glucuronic acid — and that this metabolite may be the major active agent in successful amygdalin therapy. This supposition has not been proven experimentally, but Dr. Rubin has taken steps to synthesize this analog and prove its therapeutic potential.

"He noted that the livers of goats contain extremely high activities of glucuronyl transferase, the enzyme which conjugates glucuronic acid to a wide variety of substrates. He then fed the goats bitter almond leaves, extremely rich in prunasin, an analog of amygdalin with one fewer glucose group.

"Mandelonitrile released from prunasin by the action of beta-glucosidase in the GI tract and liver of the goats was conjugated with glucuronic acid in their livers, and the resulting compound was excreted in the goat's urine, from which Dr. Rubin isolated it . . .

"This compound at present has been used in only a few terminal patients — but strong objective remissions have been obtained by using doses of 2 grams/day. Most or all of these tumors were determined beforehand to possess high beta-glucuronidase activity. No toxic side

effects were observed. These results are very preliminary and have not been published, but they are certainly encouraging."

THE RATIONALE

"The biochemical rationale for the action of Rubin's new compound goes as follows: It is well known that tumors frequently contain high concentrations of beta-glucuronidase, and tumors which possess elevated activities of this enzyme could be expected to cleave the mandelonitrile-beta-D-glucuronate to release mandelonitrile within the tumor in an insoluble state.

"Rubin feels that mandelonitrile may have cancerostatic activity itself, but this remains unproven. At any rate, mandelonitrile then splits spontaneously to yield benzaldehyde and cyanide; many tumors, due to poor perfusion, are deficient in both oxygen and glucose, and one would expect such tumors to be especially sensitive to the anoxic effects of cyanide (in fact, several studies have shown that cyanide can selectively produce tumor-growth inhibition *in vivo* in doses that are host-tolerable) . . . One *in vitro* study suggests that benzaldehyde and cyanide may have a synergistic cytotoxic effect. While the normal liver contains reasonably high concentrations of beta-glucuronidase also, it is well perfused, highly oxygenated, and capable of rapidly detoxifying both cyanide and benzaldehyde."

FOR CONSIDERATION

"These recent findings by Dr. Rubin suggest that the following factors should be seriously considered in any future double-blind trials with amygdalin:

1. "That the high doses of amygdalin."
(Please turn the page)

lin (around 70 g/day) found effective by Rubin should be used, rather than smaller doses. . . .

2. "That patients chosen for such a trial should have types of tumors typically high in B-glucuronidase . . . Rubin says that even large doses of amygdalin almost certainly will not work with leukemia and certain melanomas, due to low beta-glucuronidase levels.

3. "That when possible, biopsy tissues should be analyzed for beta-glucuronidase activity to test Rubin's assertion that tumors with high activities of this enzyme are most sensitive to amygdalin therapy.

4. "That it may be worthwhile to make a concurrent attempt to pharmacologically induce higher liver glucuronyl transferase activity in these patients (as with phenobarbital). Rubin himself plans to do this in his ongoing amygdalin research.

"At present, Dr. Rubin's success with mandelonitrile-beta-D-glucuronic acid should still be considered preliminary and tentative, but when adequate quantities of this compound are available, animal and clinical trials with this agent should be initiated too. If Rubin's understanding of amygdalin and mandelonitrile action is correct, then there may be great hope in its use for combating certain cancers, especially those associated with high beta-glucuronidase levels. We feel this may be a very promising lead for the medical and scientific community, and urge that it be investigated thoroughly."

FDA RESPONSE

In responding to that memo, Stuart L. Nightingale, M.D., assistant to the director, Bureau of Drugs, said in part: ". . . While Laetrile proponents have often cited work being done in

Israel by Dr. Rubin, our attempts to track down his research have led us to believe either that he is not doing what he claims, or that his work is being carried out surreptitiously. Neither of these conclusions is very savory . . . I am enclosing the material we have received from the government of Israel and Hadassah Medical Organization (making it) clear that Laetrile is not officially under investigation in Israel, and that Dr. Rubin is himself now being investigated by Israeli authorities . . . We believe there is no current documented evidence of the safety or efficacy for Laetrile, and that the public must be warned of the very real hazards in its use. . . ."

FDA Commissioner Donald Kennedy wrote Dr. Kirsch at KPBS Public Broadcasting in part: ". . . The most ingenious aspect of Rubin's latest hypothesis is that it marries, through a liver enzyme, the identities of the old compound and the new. The described experiments, in which beta-glucuronidase activity is actually measured in biopsy specimens and in which prunasin was fed to goats and the derivative compounds extracted from urine, are extremely difficult ones. Furthermore, the results contradict all expectations. Because each would have required isotopically-labeled precursor compounds, no biochemist would accept such results without a detailed account of the labeling used. You cannot possibly expect the cancer research community to evaluate these findings unless you are prepared to cite published descriptions of the experiments.

"Because Dr. Rubin's advertised Israeli affiliations are denied by Israeli officials and one report being circulated by him is described as 'fraudulent' by the Chief of the Department of Oncology at Hadassah

CALIFORNIA HEALTH OFFICIAL REVEALS MASTER STRATEGY TO DEFEAT LAETRILE LEGALIZATION

In response to a prediction by NHF President Charles I. Crecelius that Laetrile will be legalized throughout the United States, Michael Bogumill, Supervisor of Drugs and Devices, California Department of Health, said:

"It will never be legalized. Other states can legalize Laetrile, but all the apricots are grown in California, and as long as California does not legalize it, it doesn't mean a thing."

The comment, revealing establishment strategy, was made during a Health Fair in late September at California State University, Los Angeles.

"This explains," says Mr. Crecelius, "why, after legislation to legalize Laetrile had overwhelmingly passed the state senate, the big guns, including FDA Commissioner Dr. Donald Kennedy, were brought to California for the Assembly Health Committee hearing at which the bill was killed.

"The thinking behind this strategy is that as long as apricot kernels, or Laetrile, must cross state lines in moving from California to states where it has been legalized, the federal government has legal authority to intervene and press charges of various kinds, particularly those associated with the traffic in illegal drugs.

"We at National Health Federation have plans to meet this challenge, but it will take the combined effort of everyone, particularly Californians, who believe Laetrile should be available to those who want it. We would also remind you that the projects now being planned cannot be fully carried out without your generous financial support.

"Our dedication remains: Laetrile shall be legalized in every state in the nation, and without FDA harassment."

University Hospital, I think you have a special obligation to reassure recipients of your memo of the authenticity of the described experiments. Would you please send us citations to the published work? Failing that, would you supply enough methodological detail to allow us to evaluate the only experimental support Rubin offers for a very far-fetched hypothesis?"

In his reply to Drs. Kennedy and Nightingale, Dr. Kirsch said in part: ". . . At no time did Dr. Rubin ever represent himself to us as being affiliated with Hadassah Hospital, either in the full interview or the broadcasted excerpt. Off-camera, he stated explicitly that he was *not* doing

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Readers Write

Professionals Oppose Lay Homeopathy

Editor:

In a recent issue of your excellent *NHF Bulletin*, a brief report was given re the Dana Ullman decision in California, lay practitioners, etc.

The enclosed statement puts forth the policy of the National Center for Homeopathy, and will serve to answer the questions many of your readers have put to us since the article appeared. We would be most grateful if the enclosed statement, along with this letter, could be published in the *Bulletin* as soon as possible.

RALPH PACKMAN

Executive Director

National Center for

Homeopathy

6231 Leesburg Pike —

Suite 506

Falls Church, Va. 22044

STATEMENT OF POLICY

Homeopathy is a postgraduate specialty of medicine practiced as a medical therapy by fully licensed physicians with the degree of M.D. or D.O.

The National Center for Homeopathy does not advocate and has

McNaughton says he never has made this claim, nor is he aware of anyone else who has made the claim. Perhaps you could tell us exactly, who *did* make this allegation. Someone apparently did, for Rubin issued a statement to the American press last fall specifically stating it was incorrect to associate his amygdalin work with Hadassah Medical Center.

"As for the legality of Laetrile work in Israel, we are confident that Israeli authorities will straighten this out themselves. Mr. McNaughton tells us

never advocated the lay practice of homeopathy.

The National Center for Homeopathy and the American Foundation for Homeopathy have fostered lay education in homeopathy only to the extent consistent with the concept that patients should be involved in their own health care. Education in the use of homeopathic medicines is limited to first aid situations.

The *National Health Federation Bulletin* and other media reporting on the Ullman agreement in California reports the use of homeopathy by lay practitioners to treat patients in a holistic sense. We wish to make clear that the National Center for Homeopathy does not, in any way, support the practice of homeopathy without a medical education and license.

The American Institute of Homeopathy, the professional organization of physicians using homeotherapeutics, also is strongly opposed to the lay practice of homeopathy and homeotherapeutics.

that official investigations into Rubin's work have clarified various misunderstandings and that Rubin is now proceeding with his research as before, with the full knowledge of the appropriate Israeli officials.

"Dr. Rubin's work is sponsored by the Israeli Medical Research Foundation, a nonprofit organization supported by the Israeli Aircraft Industry and private philanthropy (*not* connected with the Committee for Freedom of Choice or funded by McNaughton) . . ."

Book Review

Vaccination Castigated in New Honorof-McBean Volume

In the fire-and-brimstone style for which the two ladies are well known to their readers, Consumer Activist Ida Honorof and antivaccination crusader Eleanor McBean make the case against compulsory inoculation programs in their recently-published *Vaccination - the Silent Killer* (\$2.95 plus postage, Honor Publications, Box 5449, Sherman Oaks, Calif. 91403).

The book was born after the Los Angeles Board of Supervisors, about to authorize a countywide mass immunization program against polio, refused to allow them time to read their prepared statements against such a move, granting them only a few minutes before unanimously endorsing the program.

It is the position of each author that vaccination is wrong, that the dangers to vaccinated persons in terms of subsequent violent reactions, including death, are too great to justify immunization. Rather, they suggest that a massive drive to educate the public in the ways of "natural health" — avoiding such no-nos as refined, processed foods and white sugar products — is the most effective preventive against disease.

The first half of the 120-page paperback is by Ms. McBean, perhaps best known for her *The Poisoned Needle*, also author of *Swine Flu Exposure and Answers for the Worried Smoker*, and of a forthcoming *Vaccination Condemned*.

Her philosophy probably was accurately expressed in the foreword by Lewis E. Cook, Jr.: ". . . Left alone,

without any medical interference, the world's population would be far healthier than it is today. The mild cleansing cycles of acute symptoms such as flu, polio, cold, measles, etc., would proceed normally, and fatal chronic diseases such as cancer and heart disease would diminish to insignificance . . ."

Says Ms. McBean: ". . . Doctors . . . do not save anyone with vaccines. Shooting poison into the body in no way protects us from disease and builds health . . . If a person has a clean, healthy body (not over-fed), he will have no need for a cleansing (called disease by doctors), therefore he will not 'catch' any disease from others, because disease is no more catching than a dirty neck."

Treatment of patients in the 1918 flu epidemic, she says, "only intensified the over-poisoned condition of the people, so the treatments killed more than the vaccines did, as bad as they were." Drugless treatment, she adds, enabled patients to recover "completely, in record time, with simple cleansing and healing methods . . ."

Ms. McBean calls for abolition of "army shots," says they are illegal. And she suggests that people "hold out for a written guarantee from those giving the shots . . . that the doctor guarantees to pay \$1,000,000 (or your price) in case the vaccination causes . . . physical or mental damage, and that the doctor guarantee the vaccine will be effective."

In support of her contention that (Please turn the page)

Does Your State Exempt Vaccinations?

Michigan law — like that in California and Utah — provides that children entering school for the first time are exempted from the mandatory vaccination regulation if they present to school authorities "a statement signed by a parent or guardian to the effect the child has not been immunized and tuberculin-tested because of religious convictions or other objection to immunization."

The law in Michigan was changed in 1973 to provide for this exemption. The exemption form states:

"To _____
"In accordance with the provision of Paragraph B of Section 376, Senate Bill 91, I hereby declare that as the parent (or guardian) of _____, a minor enrolled in your school, I withhold my consent, and request that said minor be exempt from any such vaccination or immunization on the grounds it is contrary to my beliefs."

(The same procedure can be used wherein any immunization is concerned, including poliomyelitis . . .)

After the space for signature and address, the form concludes with this paragraph: "This form prepared by The National Health Federation, P.O. Box 688, Monrovia, Calif. 91016."

Craig J. Dykgraaf, D.C., says that persons in Michigan desiring a copy of the exemption form may obtain it by contacting him at 1715 4 Mile Rd., N.E., Grand Rapids, Mich.

NHF Executive Vice-President Clinton R. Miller warns that the public is "frequently misinformed about a state's immunization laws." As an example, he cited a notice in a Provo, Utah, newspaper, *The Herald*, quoting a state health official as saying Utah law requires that children entering school present certificates of immunization.

"Utah law does no such thing," Mr. Miller wrote the newspaper. "It provides that those who do not want their children vaccinated have the same right to have their children go to school unvaccinated as those who do."

He pointed out that paragraph (c) in Section 53-22a-2 of the Utah health code states: ". . . Any pupil entering school for the first time shall be required to present to the school . . . A written statement signed by at least one parent or guardian that the immunizations violate the religious or personal beliefs of the parent or legal guardian of the pupil."

immunization does more harm than maceutical interests, offers extensive good, she cites statistics from Japan, quotes, among them one from the Australia, Norway, Germany, and the *International Medical Journal* (July Netherlands indicating that deaths 1969) advising that "the medical profession must reevaluate the principles increased following compulsory vaccination, purposes, and hazards of immunization."

Ida Honorof, prize-winning investigative reporter and critic of official coddling of chemical and pharmaceutical industry. And Dr. Robert W. Simpson of Rutgers University: ". . . immuniza-

tion programs against flu, measles, mumps and polio may actually be seeding humans with RNA to form proviruses which will then become latent cells throughout the body . . . which . . . could cause a variety of diseases . . ."

And the June 1977 testimony of Dr. Irwin D. J. Bross, director of biostatistics, Roswell Park Memorial Institute, Buffalo, N. Y., also a recipient of a National Cancer Institute grant: ". . . The general public and its elected representatives have been getting consistently bad advice from the so-called experts on the scientific, medical, and other technical issues so important to the public health and welfare . . . Congress can get plenty of advice from experts, even from virologists, that the 'cancer vaccine' program of the NCI was a fiasco . . . a number of people, myself included, pointed out before the program started that the public was being sold a bill of goods, that there was virtually no prospect of a 'cancer vaccine.' No one was listening then. But now, five years and more than five hundred million dollars later, the only thing this program has accomplished is to show conclusively that it had no chance of success . . ."

With characteristic candor, Ms. Honorof observes: "Perhaps we can all be a little more optimistic to know there are a few honest scientists around who refuse to do the bidding of the medical and petrochemical industrial complex. . . ."

She demands the reinstatement of Virologist Dr. J. Anthony Morris, fired from the Food and Drug Administration after he opposed the swine flu vaccination program.

She recalls that in 1949 the incidence of polio in North Carolina dropped 90% from the previous year after a massive educational campaign

against consumption of candy, ice cream and soft drinks during the heat of summer — a campaign motivated by Dr. B. Sandler, V.A. Hospital physician.

Also included are highlights of her experiences trying to halt the swine flu vaccination program, and later a polio vaccination drive. She told the Los Angeles Board of Supervisors she was "a fool . . . and I regret to this day I allowed my children to be shot full of toxic vaccines . . ."

The role of the news media in immunization drives also is described.

For those who oppose vaccination, there's plenty of ammunition in *Vaccination — the Silent Killer*. For those who believe it has its place, there's "food for thought." Special prices are available in quantity lots if you want to "spread the word."

— D. C. M.

WELCOME, P.M., TO S-K MEMORIAL!

"Call for Philip Mor-r-i-ss!

If you hear this once-familiar cry, and see a midget in bellhop's suit walking through the Hospital (Sloan-Kettering Memorial), don't be too surprised. For a director of the billion-dollar Philip Morris cigarette and liquor company has joined Memorial's Board of Managers — the Executive Committee, no less.

He is John S. Reed, whose main job is to head Citibank's consumer product division.

Pretty soon we may hear a research report from SKI telling us that cigerettes *cure* cancer (and Laetrile causes it!)

— SECOND OPINION
Box 548, Bronx, N.Y.
(June 1977)

Vegetarians on Run From Florida

If all goes according to plan, two Florida health enthusiasts on Dec. 17 will end their 3,000-mile cross-country run from the east Florida coast to the California coast at Ocean Park.

Successful insurance salesmen, the two are on a three-month leave to prove that healthy bodies can run 40 miles (average) a day, fueled only by raw foods.

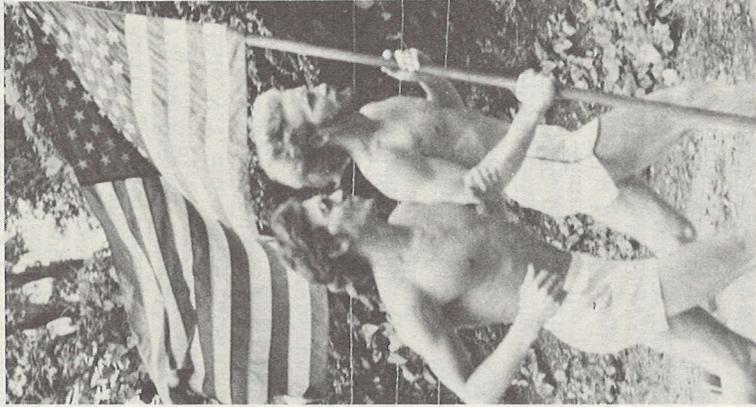
28-year-old John Peele is a recent convert to vegetarianism, his running mate and business associate, Brian Hassell, 27, has been a vegetarian several years. Their diet on the run is primarily wheat grass juice, chia and flax seeds, comfrey, bee pollen, raw honey, and chlorophyll.

Purpose of the long jog is to "promote good health and good will," and to establish a fund to be used for nutritional research of disease prevention. Founders of the nonprofit Run for America Foundation, Inc., P. O. Box 3471, Orlando, Fla., they have set their goal at \$2 million. But they're aware that's a lot of money, and they hoped initially to at least finance their cross-country run through donations and advertising.

Petition Drive to Pardon Dr. Richardson

A national campaign to obtain a Presidential pardon for Dr. John Richardson, Albany, Calif., physician convicted by a federal jury of conspiracy to smuggle Laetrile, has been launched by Victory Over Cancer Action League (VOCAL), of Westlake Village, Calif., according to VOCAL Executive Director Barry C. Fain.

"It is noteworthy," said Mr. Fain, "that Federal Judge William B. Enright, who tried the case, said he believed the court record proved Dr. Richardson's motive was not personal



Brian E. Hassell and John N. Peele, founders of Run for America Foundation, on 3,000-mile jog from Florida to California.

Dallas Experience Shows Kids Will Eat Right If Given the Chance

A bill coming up in the Senate should be of interest to every parent of school-age children — or anyone interested in good nutrition for young people. The bill, S1420, contains an amendment that would give the secretary of agriculture the power to regulate the contents of school food-vending machines — a step Sen. Clifford Case has been urging for the last four years.

As every parent knows, vending machines have proliferated in the last few years and now can be found in school corridors, locker rooms, gyms and even some study halls. Until about four years ago, the secretary of agriculture had the authority to regulate the use of school vending machines. Then Congress removed this power, giving it to the states and local school districts.

There's nothing wrong in having food-vending machines in schools, particularly if the school does not offer breakfasts or midmorning snacks. Children get hungry, and if the machines contain things like milk, fruit juice, apples or other fruits or sandwiches, they can appease a child's hunger. This in turn can make the difference between learning at peak ability, and inattention during late-morning class periods. This was Congress' original intention when it gain, but the desire to help mankind."

Each preprinted petition accommodates one signature, and a free petition may be obtained by sending a self-addressed, stamped envelope to VOCAL, Box 4228, Westlake Village, Calif. 91359.

gave local authorities greater flexibility in providing food sources for schoolchildren.

In many cases, however, that is not what happened. Instead, the junk food industry — with its wealth of funds and powerful lobbyists — moved in, and candies, packaged cakes, cookies and soft drinks became the type of food offered. When local efforts were made to substitute good foods, resistance came from some state legislatures, school boards, principals, and even members of the PTA.

Why? Because the vending machines represent money, not only for the suppliers but also for hard-pressed schools which need the funds to pay for such extras as band uniforms and sports. These extras also mean a lot to students, and people argue that there can't be any harm in making money for these supplies by selling snacks that the youngsters can always buy at the corner newsstand or drugstore.

But we think — and we've heard from a number of parents who feel the same — that there are a number of things wrong with allowing junk food vending machines in schools. For one, the school's job is to educate, and the teaching of good nutrition, particularly by example, is part of education. Also, poor nutrition can have a direct economic impact in increased dental bills for the child who yields to the continuous temptation of vending

(Please turn the page)

This article was part of a syndicated column by Nutritionists Dr. Jean Mayer and Dr. Johanna Dwyer.

Outfoxed by Ladies, He Makes It Unanimous

COLORADO BOARD TAKES SMALL STEP TO ELIMINATE CANDY AND COKE

Although it's far from the "whole loaf," a small start toward elimination of candy and coke has been made in La Junta, Colo., High School by approval of a plea by Dentist David Lacy, who was dealt an initial setback.

As described by the La Junta *Tribune-Democrat*, the motion will shut down coke and candy machines at the high school for a half-hour prior to lunch time, and a half hour after lunch time.

"Dentist Lacy won the order," said the newspaper, "but it was not a quick and easy victory. For a while it appeared the board would take no action. Board member Jon Kolomitz said only one side (Dr. Lacy's) had been heard. He wanted to postpone decision until the high school administration could be sounded out.

"Explained Mr. Kolomitz, when he refused to second a motion by fellow board member Lela Schauer: "Too

machine candy and other sweets.

Good nutrition is an important part of good health, especially during the growing years. But if youngsters can easily obtain tasty, high-calorie, low-nutrient snacks whenever they feel hungry, they may well ignore the nutritious but less tempting fare offered by the school lunchroom.

Surveys by the school board in Dallas, Texas, which banned school vending machines in 1975, bear this out. In the year after the machines were removed, the same number of pupils bought 3,721,438 lunches, a gain of 365,000 over the previous year

when they had access to the vending machines. Even more important was the gain in the number of children from economically-deprived families who took advantage of free lunches. In 1975-76, these children consumed 621,682 more free lunches than in the previous year.

The federal government has committed \$3 billion a year to programs designed to improve child nutrition. Surely it would be inconsistent for us to allow these programs to be undermined by permitting the open use of vending machines for junk foods that compete with school meal programs.

"But the motion didn't stay buried. Board President Joy Mitchell, unimpressed with Mr. Kolomitz' reasoning, relinquished the chair which automatically put Mr. Kolomitz in it. Then Ms. Mitchell herself made a motion, a duplicate of Ms. Schauer's, who quickly seconded it.

"Recognizing that the male animal was outfoxed and outgunned, on roll-call vote Mr. Kolomitz went along with the two female board members, so the ban was imposed on a 3-0 vote. They were the only board members still present.

"Dr. Lacy won his case by arguing the importance of good nutrition, as represented by the school lunch program — a program sabotaged by candy

HE HELPS PATIENTS CHANGE FROM SWEET TOOTH TO 'SAVORY' TOOTH

Helping patients reorient their taste-preferences so that sugared products become "disagreeable" rather than desirable is the goal of Lawrence Power, M.D., of Ann Arbor, Mich. He regrets that the "National Sweet Tooth" threatens the Delaney Amendment — the only law prohibiting use of cancer-causing agents in food and drink.

"Many physicians," he wrote in his syndicated column, "believe saccharin has a place in the management of diabetes and obesity. While I respect their judgment, I don't happen to agree with it, although some of the congressional testimony that got into the papers would lead one to believe that diabetes or obesity were diseases

of saccharin deficiency. The supporting testimony was very strong.

"Without saccharin, I would not have been able to lose the weight I did," said one lady. 'Soft drinks are part of the American way of life,' said the father of a diabetic daughter. 'They mean love to a diabetic child,' said a pediatrician with diabetic patients. 'Without saccharin, many vital medicines would not be taken,' said a pharmacist. 'Decay-fighting toothpastes need saccharin for acceptability,' said a dentist.

"It seems that 80% of us think the government's position on saccharin is wrong. The official government position with which surveys have shown

(Please turn the page)

FUNDING SOUGHT FOR SCHOOL NUTRITION PROGRAM

An application for federal funding of a project to establish nutritional school lunch programs in central Ohio rural area schools has been filed by NHF Science Director John A. Yiamouyiannis, Ph.D.

Purpose of the program, according

and pop machines. Also, stressed the dentist, was the importance of setting a good example to the young. As he pointed out, when the district accepted federal school lunch money, the district agreed not to permit competing food services to operate a half-hour prior and a half-hour later.

"Teacher Willard Herrick wasn't too sure the candy-pop shutdown would have the desired results. "Won't the students just switch the time when they buy?"

to Dr. Yiamouyiannis, is "to educate students, faculty, and staff concerning good nutrition during school hours or after school hours; to train students in the preparation of nutritious foods, and to motivate students to actually participate in food preparation at their schools.

"To educate area residents in nutrition, including taking field trips to supermarkets to demonstrate how to buy food; to work for the replacement of junk food-vending machines; to make students aware of the adverse effects of various food additives, the disadvantages of over-processed foods, as well as the health hazards of drugs and cigarette-smoking. Clinics to stop smoking will be established in cooperating schools, and a record kept of the names of those who stop smoking as a result of this program."

Tax Court Rules Added Cost Health Foods for Allergies Is Deductible

The Tax Court has set a standard for deducting the extra cost of special foods as medical costs. The test is to show a medical need for taking the special food and the extra cost of the health food over ordinary food. Only the extra cost is deductible.

Dr. and Mrs. Randolph suffer from chemical allergies requiring them to limit their diets to organic foods untouched by pesticides and herbicides. Several doctors have documented their ailment and treatment. To assure their foods are uncontaminated, they shop at various health food stores that sell specially-grown, transported, packaged, and marketed foods.

The special handling of foods found in health food stores results in a retail cost higher than similar nonorganically grown and prepared foods. A comparison of retail prices by the Department of Labor, Bureau of Statistics, with sales receipts obtained from the health food store where they buy 80% of their food indicates that organically-grown food is approximately twice as expensive as similar, chemically-treated food.

During 1971, they purchased organic food costing \$6,156.91 from health food stores. On their 1971 return, they deducted as a medical expense \$3,086 as the extra cost. The Treasury disallowed the deduction as a non-deductible personal cost of food.

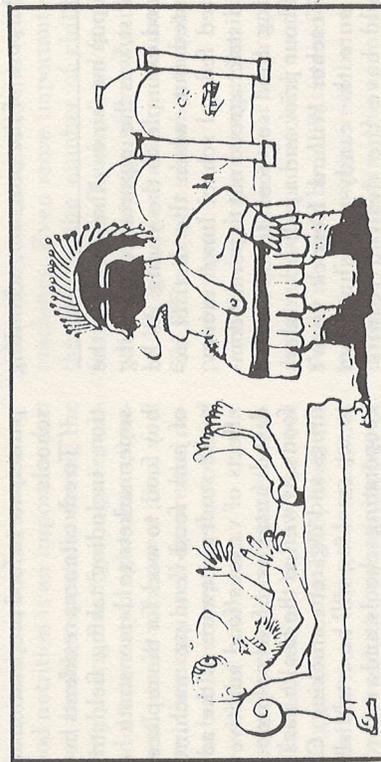
The Tax Court disagrees. By carefully controlling their environment and restricting diets to uncontaminated organic foods, the Randolphs have substantially reduced their allergic reactions, and in Mrs. Randolph's case, have dramatically

takes about a year to achieve this change in most individuals, but if sugar substitutes continue to be used, it is almost impossible. A basic taste-preference reorientation is necessary for long-term success.

"So long as the Delaney Amendment protected us from unpronounceable chemicals to which we had not become accustomed, there was general agreement it was a sensible precaution. Agitation for any change in the law would have gotten nowhere. Once the Great National Sweet Tooth was threatened, however, things became different. So once again it seems that as human beings, we can be distinguished from our cousin creatures less by our ability to reason, than to rationalize."

POISON SPRAY BILL

Senate Bill 938 would prohibit the Department of Agriculture from using 2,4,5-T or any other chemical containing dioxin in aerial spraying of national forests. The measure, referred to the Committee on Agriculture, Nutrition, and Forestry, was introduced by Senator Dale Bumpers of Arkansas. Senator Alan Cranston of California is a cosponsor.



"And which do you prefer, Socrates: Coke, Pepsi, or hemlock?"

so many of us disagree, is that saccharin should not be added to our food. What an uproar! Change the law! So what if it causes cancer in rats, and possibly humans! We love our flavor additives. Let us decide on the trade-offs, not the agency established to protect us.

"Over the past three decades, the national diet has become sweeter and sweeter. This change has taken place as a result of the addition of large amounts of sugar to convenience foods, as well as our huge consumption of sugar in soft drinks. We now eat and drink our weight in sugar every year. We have developed a Great National Sweet Tooth.

"Saccharin and other sugar substitutes help preserve the sweet tooth in individuals with a weight problem or with diabetes — people who should cut down on sugar. The diabetic or obese patient is better off without that hankering for the sweet things that are available on every side. I try and replace the sweet tooth in such patients with a savory tooth.

"I want patients to develop a preference for nonsweet food and drink, so the thought of fudge or sugared coffee, for example, is disagreeable. It

improved their health. Unrebutted testimony presented at trial by three independent unrelated physicians indicated this is the only method of effectively treating chemical allergies. Since they suffered from chemical allergies that could be mitigated only by restricting the diet to chemically uncontaminated foods, the additional expenses incurred in adhering to diet are deductible medical expenses.

The Court distinguishes the Randolphs' case from prior cases involving diabetics who were not allowed to deduct the cost of special diets. In those cases, the diabetics deducted the entire cost of special, artificially-sweetened foods. They did not argue that the foods were more expensive than their nondietetic counterparts, nor did they argue that any additional cost incurred in purchasing these foods was a deductible medical expense. Rather, they argued that the foods were medically required supplements to an ordinary diet, and therefore completely deductible.

The court disagreed. The foods were not supplements to an ordinary diet, and therefore not deductible medical expenses. However, the Randolphs did not argue that the amount spent for organic food was for dietary supplements, and thus deductible in its entirety. Rather, they deducted only the added cost attributed to special handling required to grow, package, and market food in a chemically free environment. Had there been no added charge for handling, they would not be allowed a medical expense deduction. By deducting

(Please turn to page 31)

THE WELCOME MAT'S OUT TO THESE NEW NHF LIFE MEMBERS!

LIFE

- Myrtle F. Duke
Jupiter, Fla.
- Teri Stewart
Los Angeles, Calif.
- Richard John Bolstad
Downey, Calif.
- Cynthia Luna
Cypress, Calif.
- Elizabeth Herr
Long Beach, Calif.
- Edith M. Hunter
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- Melba Madden
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Chula Vista, Calif.
- Vivian Knudsen
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- Mrs. Polly Blades
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Columbus, Ohio
- Ernest F. Shearer, D.O.
Columbus, Ohio
- Mr. and Mrs. Henry Reiman
San Diego, Calif.

Christmas Is Coming

And we suggest that one way to avoid harrowing shopping experiences — giving more “things” which may become white elephants some day — is to sit down and write a check for

NHF Gift Memberships

A gift that lasts the whole year through, a gift that enlarges the influence of The National Health Federation in places where such a counterforce is sorely needed in today's high-pressure special-interest environment.

Each membership, new or renewal, includes a subscription to the *NHF BULLETIN*. We notify recipients of gift memberships.

UNTIL JANUARY 1, 1978, NHF MEMBERSHIP IS \$8 PER PERSON/FAMILY

After December 31, 1977, because of rising costs, membership will be \$10 per year.

(PLEASE SEE OTHER SIDE OF PAGE FOR ORDER FORMS)

Upton Heads National Cancer Institute

President Carter has appointed Dr. Arthur C. Upton of Shoreham, Long Island, internationally-recognized specialist on the role of radiation and cancer inducing chemicals, as head of the National Cancer Institute.

At 54, Dr. Upton was professor of pathology at the School of Medicine, State University of New York, Stony Brook. He succeeds Frank J. Rauscher who resigned to become vice-president for research of the American Cancer Society at twice his (Continued from page 29)

only the added cost attributable to special handling, the Randolphs recognized that no medical care deduction was allowed for what was established as the equivalent food prices for similar chemically treated food.

—*Monthly Tax Service*
J. K. Lasser Tax Inst.
Larchmont, N. Y.
(Publ. Simon & Schuster)
(Randolph, 67 T. C.
No. 35. Dec. 16, '76)

is chairman of the Scientific Committee of the World Health Organization's International Agency for Research on Cancer, and is a member and officer of several other scientific organizations focusing on cancer research. He is married and the father of three.

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GOOD NEWS FOR KIDS WITH CROOKED TEETH

By shortening correction time by as much as 50%, a wire developed by Dr. George F. Andreason, professor of orthodontics at the University of Iowa, promises to make obsolete the stainless steel arch wire used in straightening youngsters' teeth.

Called Nitinol and still in the development stage, produced by Unitek Corp. of Monrovia, Calif., the wire provides an arch that stays in the mouth throughout the treatment, with at most, only one change. It has a "built-in memory," can be formed with pliers into the desired curve, heated to 1,472 degrees, and cooled to

NEW EVIDENCE

A five-year study covering 574 and 158 women suffering from bladder cancer concludes that cigarette smoking causes half of all bladder cancers in men, and a third of such cancers in women. Smoke inhalation seems to be the essential factor, say Drs. Ernst L. Wynder and Robert Goldsmith.

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?

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Betty Lee Morales — Secretary

Dorothy B. Hart — Vice-President

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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.

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