National Health Federation BULLETIN

JULY/AUGUST 1977 • 50¢

THE LATE

DR. MILLER'S FERVENT WISH: QUALITY WATER!

His Solution: Purify by Recycling Waste Water

DANA ULLMAN

A REAL BREAKTHROUGH:

California District Attorney Agrees With Astute Lawyer That His Young Client Can Use Holistic Approach to Healing Without Violating Medical Practice Act

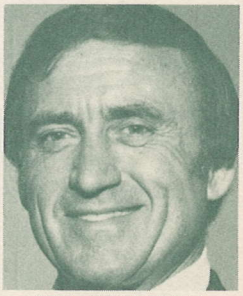
DR. SPETZ

EXPANDING:

It's Here to Stay, Says M.D of Ortho-Molecular Medicine

A FIRST:

Two Nevada Senators Visit Laetrile Clinics, Plant, in Tijuana; 'Impressed'



SEN. SCHOFIELD

'Cot Kernel Crisis Over!
Danger in Measles Program
Judge Bohanon on Freedom
More on Symms-Chisholm Bill

Dedicated to the Protection of Health Freedoms

THE
NATIONAL HEALTH FEDERATION
BULLETIN

Protection of Health Freedoms — *Published Monthly*

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CONTENTS

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Achiever, Innovator, Dr. John Miller Dies After Birthday

The unexpected death of John J. Miller, Ph.D., pioneer in many areas of practical nutrition, two days after observing his 90th birthday March 29 at his home, Route 1, Box 145, West Chicago, Ill., brought messages of condolence from throughout the country. Suffering from a heart condition, he had been in a precarious state of health for several years. He died in his sleep, after a full day of "satisfying activity," according to his son.

NHF Board Chairman Kurt W. Donsbach said: "Dr. Miller played a truly unique role in the continuing search for biological and physiological knowledge. We are among the many who mourn his passing, and are grateful for the significant contribution he made in the advancement of the health sciences."

The precocious and tireless scientist received congratulatory letters, notes and cards from countless admirers and friends in celebration of his birthday anniversary.

Mrs. Russell J. Hale, executive secretary of the Illinois Pure Water Committee, Inc., 606 Washington Ave., Alton, Ill., commented that "... Dr. Miller... realized the most important food for mankind is water, and was most concerned about what is happening to our water supplies. This inspired him to write a book, *Purer Water Or Perish*, soon to go to press.

"As chief advisor to the Illinois Pure Water Committee, Inc., a nonprofit educational organization formed in 1967, Dr. Miller helped promote a positive program for cleaning up waterways, preserving water, and making pure water available. His most important wish was that 100,000 persons in Illinois become members ($5.00) of our Committee, vitally concerned with obtaining pure water for

(Please turn the page)

DR. MILLER'S CONCERNS ABOUT WATER

According to NHF Science Director John A. Yiamouyiannis, Ph.D., the concerns of the late Dr. John Miller, founder of Miller Pharmacal, during his final days embraced the quality of the nation's drinking water. Dr. Yiamouyiannis, who was present at Dr. Miller's birthday party celebration, listed those concerns as follows:

1. The public is ignorant of water quality.
2. You can't beat the FDA in court.
3. You can't defeat fluoridation in court.
4. The only way to assure pure water is through the recycling of waste waters.
5. Present water treatment plants do not adequately "treat" water; there is danger in adding chlorine since this produces chlorinated hydrocarbons which subsequently are dumped into rivers and streams.
6. It was Dr. Miller's final dream to establish a Water Resources Conservation group that would upgrade water quality.
7. Nitrate pollution of ground waters is being covered up by the Illinois Environmental Protection Agency.

'The Same HEW Medical Technocrats' in Charge

Perils of Measles Vaccine Program Outlined by Morris

With public confidence in mass immunization severely shaken by the swine flu vaccination fiasco which resulted in deaths, paralysis, and personal injury — and with a mass measles vaccination program now proposed, the only way to restore public confidence in the government role in such programs is to rid the Department of Health, Education and Welfare of the medical advisors' hierarchy responsible for vaccination policy.

This is the considered opinion of Dr. J. Anthony Morris of Greenbelt, Md., respected microbiologist fired from his FDA post for his insistence in quality standards and ethical conduct, and for criticizing the swine flu vaccination program, results of which, many believe, fully vindicate that critcism.

Dr. Morris, in response to a request by NHF Executive Vice-President Clinton R. Miller for his views on HEW's determination to proceed with a mass vaccination program against measles, made the following statement:

"Secretary of DHEW Joseph A. Califano, Jr., on March 2 during a 'Meet the Press' program said, 'The greatest damage the swine flu program has done, aside from the human tragedy of the individuals paralyzed and killed, has been the impact on immunization programs . . . And a large part of that is attributable to the people's fear about immunization all. . . "

Dr. Miller authored more than 400,000 abstracts of medical, biochemical, and nutritional literature — he once was editor-in-chief of *Chemical Abstracts*, published by the American Chemical Society. He is credited with developing the theory and process of chelated minerals, and originated chelation processes in the fields of seeds, fertilizers, and pharmaceuticals, with the basic patent work starting in 1945. He originated an unexcelled system of hair analysis interpretation, and wrote treatises on such subjects as gastric ulcers, anemia, arthritis, osteoporosis, metabolism of fats, pregnancy, minerals in nutrition, enzymes, chelation and complexing, porphyria, mental diseases, multiple sclerosis, and hypertension.

Active in organization of the International Academy of Preventive Medicine, he was tendered honorary membership in 1972. In 1968 he was cited for distinguished service in chemistry by Phi Lambda Upsilon, national honorary chemical society, of which he was a past president. Through the years Dr. Miller addressed more than 15,000 physicians at hospital staff meetings, county medical sessions, state conventions, and special invitational affairs.

He founded the Miller Pharmacal Company, Inc., of West Chicago, and was president emeritus and director of special research of the Miller Pharmacal Division, Medical Modalities Associates, Inc., of West Chicago.

programs.'

"This situation that Mr. Califano so aptly associates with the swine flu program came about by way of inexcusably bad medical advice given Mr. Califano's predecessor, Dr. (David) Mathews (and in turn to President Ford) by inept, incompetent and self-serving medical advisors, who remain intact (except for the former assistant secretary for health in DHEW and the former director of the Communicable Disease Center whose resignations were asked for and accepted by Mr. Califano) as medical advisors and medical technocrats to the new Administration.

"As such, they now are about to embark upon another ill-advised mass immunization program — this time against measles. The new measles program is fraught with the same, if not greater, dangers than were those associated with the swine-flu program. In fact, the stage was set for these dangers by the same medical technocrats who inflicted the swine flu program upon an unsuspecting public.

"Why are there now millions of children susceptible to measles and about to enter, or already have entered school? For two reasons: Several years ago the same medical technocrats who in 1976 advised Secretary Mathews and President Ford to embark upon a swine flu program and who now in 1977 are advising Secretary Califano and President Carter to embark upon a measles-immunization program, recommended that some children should be immunized against measles by use of dead measles vaccine; that other children should be immunized with live measles vaccine during the first year of life, and that still other children should be immunized by simultaneous administration of live measles vaccine and immune globulin.

"Each of these recommended procedures is wrong. For each fails to induce in the vaccinated children long-lasting immunity to measles — these children — millions of them — now are susceptible to measles.

"I suggest that before any serious thought is given to embarking upon a mandatory measles immunization program, those medical technocrats whose advice led us into this measles impasse should be removed from positions of authority. After this first essential step is accomplished, then the suggested idea of mass immunization against measles should be assessed.

"On 'Meet the Press,' Mr. Califano said 'We have got to restore confidence (in immunization programs'). I doubt if this confidence is restorable — and justifiably so — as long as the self-serving team of medical advisors on vaccine policy that gave to us two major medical tragedies — swine flu and the current measles impasse — remain as advisors to the government on vaccine policy."

MUM, BUT DOCTORS DIDN'T LIKE IT

The New York County Medical Society, calling the federal swine flu program "a gag," said that while most of its members opposed the campaign, they had not publicly criticized it because of concern over adverse publicity.

"Most doctors rolled their eyes but held their tongue when mass-immunization plans were announced last year," said the society's newsletter mailed to members in late March.

— *New York Times* Excerpt (3/27/77)

Ida Honorof, Eleanor McBean Seek Debate

Public Entitled to 'Unadulterated Facts' About Measles Vaccinations

If Shirley Fannin, M.D., chief of the Acute Communicable Disease section of Los Angeles County Health Services, had "the courage of her convictions" she would agree to debate Eleanor McBean, author of *The Poison Needle*, and Consumer Activist Ida Honorof, publisher of *Report to the Consumer*, Box 5449, Sherman Oaks, Calif.

This is what Ms. Honorof told Dr. Fannin in a letter dated May 2, and what she told Health Services Director Liston A. Witherill, M.D., (May 3) when she said that if Dr. Fannin is "chicken, how about you, John Affeldt, Martin Finn, together or one-at-a-time," debating, "so people can get all the unadulterated facts surrounding the immunization program, especially the current measles caper. Health Services no longer can hide behind gobbledygook."

Dr. Fannin, who says she sees "no purpose to be served" by debating, spearheaded a drive, heavily supported with publicity, to bring about the immunization of an estimated 50,000 school children in April/May, after some 2,700 measles cases had been reported. It was estimated that 20%-25% of the children among the 1.4 million school children in the county had not been vaccinated. Health Services demanded evidence of vaccination or a statement from parents that their child or children should not be vaccinated because of belief (part of California law), or for medical reasons.

In her letter to Dr. Fannin, Ms. Honorof said in part: " . . . You have deliberately failed to advise parents of the hazards caused by the measles vaccine, such as encephalitis, personality changes, loss of language function, decreased school performance, rage outbursts, epileptic seizures, some ultimately ending in coma and death. You have failed to inform and advise parents that their child need not be immunized if against their personal belief, or is medically contraindicated. (Ed. note: The "Pupil Immunization and Consent" form required by the school for transmission to the Department of Health Services carries a section to be signed by a parent that "immunizations are against my belief." But many public pronouncements failed to note existence of this provision in the law).

"During the swine-flu-fiasco," continued the letter to Dr. Fannin, "on dozens of occasions . . . you stated that the swine-flu vaccine was both safe and effective — you tricked people into taking the vaccine, despite the fact there was not, and never had been any proof that swine flu existed among human beings, or could be transmitted from human to human, whereas dedicated doctors and laypersons, including I, had warned of the hazards of this deadly vaccine. The exact number of deaths, paralysis, and other vaccination-related illnesses has been willfully suppressed.

"Eleanor McBean and Ida Honorof believe *it is high time the public learn the true unadulterated facts*, and if you have the courage of your convictions, then meet us in public debate — any time, any place, at your convenience."

Swine Flu Claims April 29 Were Nearing $130 Million

Claims may be filed against the Department of Health, Education, and Welfare on behalf of persons who died, and by those who became excessively ill, or were paralyzed as a result of submitting to a swine flu inoculation, Consumer Advocate Ida Honorof reminds the public. (According to *Parade* (May 1), the Justice Department "will hire another 25 attorneys to handle swine-flu lawsuits, expected to number about 10,000. . .")

Claims may be filed with the U. S. Public Health Service (USPHS) Claims Office, Parklawn Building, 5600 Fishers Lane, Rockville, Md. 20852.

In her May issue of *Report to the Consumer* (Box 5449, Sherman Oaks, Ca. 91403), Ms. Honorof brought readers up to date — in pithy language — on latest developments on the swine flu front.

In a letter to *The Bulletin* she described how she obtained from HEW the number of suits on file as of April 29 and what they amount to in dollars — nearly $131 million — and she was certain that figure would rise substantially as time passes.

"I received a tip that 328 claims totaling $84 million had been filed," she said. "I knew it had to be more — especially since people were finding out they *could* file claims for death and injuries.

"I phoned PHS-HEW at Rockville, Md., and spoke to Arthur Simon's secretary who informed me that 'we're not allowed to give that information to the public.' I told her I wasn't just the ordinary John Q. — that I am a reporter/commentator on KCSN Radio, and would like to know the number of claims — the amount of money people were filing claims for, and the claims for Guillain-Barre disease (paralysis), and the amount involved.

"As of April 29, HEW had received 423 duly-filed claims totaling $130,750,432.07. 389 claims aggregating $119 million were for personal injury, among whom were 100 who had suffered paralysis from Guillain-Barre disease. These persons filed claims for $100,808,791.54. Thirty death claims were filed by persons seeking damages of $11,825,344.29.

"Not everyone is aware that they can file a claim for paralysis, death, or illness. . . Claims for damages might teach HEW that it cannot continue to poison our bodies without paying the penalty."

In a letter to Dr. Witherill, Ms. Honorof said she had appeared before the Los Angeles Board of Supervisors asking for information about the two children who had died from measles-pneumonia. "I specifically wanted to know what kind of medication they had received prior to being admitted to the hospital, and during their stays at Harbor General Hospital, and Los Angeles County/USC Hospital.

"A letter of April 29, written by Dr. Martin Finn but signed by you, advises there would be a 'breach of patient-physician confidentiality' if I were given *just the exact medication* before and after admittance to the hospital. How can that possibly be breach of patient-physician confidentiality? I am again requesting that information, and I can see no reason whatsoever why it should be withheld."

Re Soft Drings — New FDA Chief Emphatic:

Industry Won't Be Permitted To Get Around Saccharin Ban

Food and Drug Commissioner Donald Kennedy has warned the diet soft-drink industry not to sell unsweetened soda with instructions for consumers to add their own saccharin. At a press conference he said "We're defining it as a drug, and you (the industry) better not start redefining it."

The remark was in response to a question about how he would react to the marketing of diet soft drinks with packets of the soon-to-be banned artificial sweetener on the side.

"We've made it very clear," Dr. Kennedy replied, "that any change in marketing strategy will be taken into account at new/drug application time."

The ban will eliminate about 90% of saccharin use, FDA estimates. The FDA commissioner said it is unlikely that adding saccharin to a saccharin-free soda would make it taste the same as the drinks now being made. "It's not easy to make a soft drink taste good simply by adding saccharin," he said. "We've tried it, and it doesn't work. We've also had some industry indications of that."

Asked if he personally has used saccharin, he replied: "I think I have on occasion purchased a diet soft drink by mistake and started to drink it." He said he does not like the aftertaste. When asked if he would tell his family not to use the sugar substitute because of the evidence it causes cancer, Dr. Kennedy said his wife and daughters do not use the product, but if they did "I would urge them to stop."

'Change Delaney Clause,' Says Ex-FDAer

The Food and Drug Administration's former General Counsel Peter B. Hutt has said the agency acted properly in proposing to ban saccharin, and that it is up to Congress to modify the Delaney Anticancer clause if the artificial sweetener is to be retained.

In response to questioning at the first International Congresson Toxicology at Toronto, Canada, (Mar. 20-Apr. 2), Mr. Hutt suggested that an "extremely narrow" change in the Delaney clause could be devised by Congress to allow FDA to weigh the benefit of essential substances. He said exemptions could be limited to essential vitamins and minerals, a sweetener or two, and an important preservative or two. Exemption from the Delaney clause should not be applied to new emulsifiers, thickeners, and similar-type food additives, he said.

—Food Chemical News (4/11/77)

(Ed. note: Upon leaving FDA, Mr. Hutt returned to the influential New York law firm of Covington and Burling where he represents food and drug clients regulated by FDA. The firm was described by Congressman Benjamin S. Rosenthal as representing "many of the biggest food, drink, and drug producers." — Feb. 1977 *NHF Bulletin*).

NHF, NNFA Testimony Decisive

'Cot Conflict Solved With Warning Label

Apricot kernels, properly labeled, again may be bought and sold in California, Dr. C. F. Bryson, chief of the Food and Drug Section of the California Department of Health, has announced. The decision resulted from a conference between state officials and proponents of the right of the public to eat 'cot kernels — a conference which followed hours of testimony at a hearing in Sacramento April 29 called by officials who were considering banning sale of the kernels unless heavily processed.

At the conference were state officials Ward Bennett and Dr. Bryson, and David Ajay representing the National Nutritional Food Association, A. G. Nunez of Earthco, Westlake Village, Calif., National Health Federation Board Member Betty Lee Morales, and NHF Executive Vice-President Clinton R. Miller. Suggestions for labeling apricot kernels were worked out and later submitted to Dr. Jerome Lackner, director of the California Department of Health. His approval of the agreement clinched the decision that 'cot kernels may be sold legally in California when packaged with an approved label stating what the product is, weight of package, price, and by whom distributed, along with a warning containing essentially the wording agreed upon at the conference: "Apricot kernels may be toxic. Very low quantities may cause reactions," or "Apricot kernels may be toxic. Individual tolerance varies."

Ron Weiner, executive secretary of National Nutritional Foods Association, said "Any California health food store having any type of problem with apricot kernels from a California State Food and Drug representative is asked to immediately contact NNFA headquarters at 7727 So. Painter Ave., Whittier, Calif., who will relay the information to the Save Our Apricot Kernels Committee for submission to Mr. Bryson's office."

The decision to permit sale of 'cot kernels is a result of effective testimony presented at a four-hour hearing in Sacramento, toward the conclusion of which state officials and representatives of NHF and NNFA worked out the tentative agreement on labeling.

Following the session with Dr. Bryson and Mr. Bennet, Betty Lee Morales, Mr. Ajay, Mr. Nunez and Mr. Miller noted in a memorandum to Dr. Lackner: "We hope you recognize that our committee which convened in Sacramento for the hearing on the proposed regulation on apricot kernels represents consumers, retailers, and distributors in California who are vitally concerned with retaining the right to use, buy, and sell these kernels. We hope you will make the decision to exempt the kernels from the proposed labeling that would ban them."

It had been the department's contention that apricot kernels "frequently contain sufficient cyanide . . .

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to be considered adulterated. It is not possible to visually differentiate between kernels dangerous to human health and those which may be consumed safely. Therefore apricot kernels are considered adulterated and cannot be sold or distributed into food channels in California unless the seller or distributor has laboratory evidence that a representative sample of the specific lot to be sold or distributed does not contain cyanide compounds in excess of that quantity which would liberate 25 parts per million hydrocyanic acid by complete hydrolysis. Kernels claiming to be suitable for human consumption shall be identified on the label by the seller or distributor in such a way that any package found in commerce can be specifically related to the appropriate laboratory report . . ."

Exempted from the regulation would be firms processing kernels into macaroon paste or marzipan, those labels to state, "Not suitable for food use without further processing."

The processing would destroy the elements in the kernel, believed by thousands of Californians to be useful in providing an essential vitamin requirement. For that reason the National Health Federation protested vigorously through form letters to Governor Brown.

At the outset of the hearing, NHF Executive Vice-President Miller confronted the examiner with a conflict-of-interest charge, and asked whether the department intended to limit testimony. He challenged prohibition of cross-examination; demanded equal access to the transcript and challenged the right of the hearing examiner to allow a private company to copyright the proceedings of a public hearing and then require participants to pay 10¢ a sheet "when the National Health Federation can reproduce them for 1¢." When he asked the examiner if he had "a conflict of interest," and received a negative reply, he asked if the officer would disqualify himself if it were discovered there had been conflict of interest. The officer said he would.

"I then told him he should disqualify himself because, I respectfully submit you do have a serious conflict of interest which is opposed to every standard which governs the American constitutional check-and-balance form of government. There is no way, Sir, that you can preside at this hearing and not be compromised by your interest in upholding regulations which *your* department has written. This interest is clearly in conflict with those interests of consumers opposed to your department's proposed regulations.

For the purposes of this hearing, you, Sir, are the delegated official of the California Department of Health. There is no way you can fairly hold hearings on your own regulations. I respectfully demand that you disqualify yourself." There being no objection from the department's attorney, the demand was noted in the record.

Mr. Miller paid tribute to the NHF "allies who were active in the apricot war." He described the efforts of the Sacramento NHF chapter as "magnificent. On very short notice they arranged for a meeting hall and a rally the night before the hearing to focus on the right of consumers to purchase natural whole apricot kernels. At this rally, 'war' was formally declared. The officers and members of the Sacramento chapter are a good example of what we should have in the capital of every state. Rev. Russell A. Meyers is president; Dr. Edgar L. Magney, vice-president; Mrs. Violet Phelps, secretary; and John Schlemmer, treasurer.

"The National Nutritional Foods Association as represented by David Ajay was, as in the 14-year vitamin battle, in the forefront of the apricot battle. Mr. Ajay gave excellent testimony, eating a handful of apricot kernels before the hearing examiner to show some, at least, can consume large quantities without acute toxic symptoms.

"Thirty of our people were signed up to testify. But by 3 p.m. only 15 had finished, and the examiner said he had eight other issues to hear that day. We asked for a 10-minute recess after the spokesman for the Department of Health had indicated that all they wanted was a warning label on the unprocessed raw kernels. We indicated we would be glad to sit down and draft a warning label that day and save the time of everyone from attending other hearings in Los Angeles and San Francisco, promised us by the examiner (who is a very nice person), in response to the 500 form letters demanding additional hearings.

"G. Edward Griffin, head of Victory Over Cancer Action League (VOCAL), Westlake Village, Calif., gave blockbuster testimony. He established that orthodox treatments do not work. He really has the facts, and quoted from chapter three of his new book, *Laetrile Case Histories*, due out the end of May.

"John T. Clark presented 'short but sweet' testimony on Hunza residents, the fact cancer is virtually nonexistent there, and that the people use large quantities of apricot kernels.

"Betty Lee Morales gave one of the most moving and impassioned talks I have ever heard. I glanced over the audience when she was through. There were few dry eyes.

"There were 10 other presentations, including Edward Verner of San Francisco, and A. G. Nunez, president of Earthco, who told how the California Food and Drug Section of the Department of Health had embargoed hundreds of pounds of ground apricot kernels and now they are spoiled. It too was very moving testimony. Dr. C. F. Bryson appeared not to have been aware of the incident."

'We Were Impressed,' Says Schofield

Nevada Senators First Solons To Visit Laetrile Clinics

Two Nevada State Senators made history last spring when they decided to get a first-hand view of the Laetrile clinics in Tijuana, Mexico, while the legislation to legalize its manufacture and use in Nevada was under consideration.

Making the trip were Senator Jack Schofield, chairman of the Committee on Education, Health, Welfare and State Institutions, and Senator Bill Hernstadt. During an earlier committee hearing, Senator Schofield expressed an interest in visiting the clinics and NHF Board Member Betty Lee Morales quickly extended an invitation, urging them to go.

NHF Executive Vice-President Clinton R. Miller and Mrs. Miller met the senators in San Diego and drove them across the border where they

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were met by Laetrile Protagonist Andrew R. L. McNaughton who gave them "the grand tour" of Clinica Cydel, a new modern hospital owned by the Del Rio brothers and equipped with a full range of instruments including X-ray and cobalt, and Dr. Ernesto Contreras' Central Medico Del Mar, also fully equipped and staffed.

According to Mr. Miller, Mr. McNaughton emphasized to the Nevada visitors that "it is Laetrile *plus* diet and a fighting mental spirit that brings cancer under control." And speaking for himself and Mrs. Miller, he says "Bonnie and I became more convinced than ever that Laetrile plus 'holistic' therapy works."

After that inspection tour in Mexico, the Health Committee and the Senate approved the bill. Senator Schofield's impressions of the inspection tour were summed up in the following letter to Dr. Mario A. Soto of Clinica Cydel, Gustavo Del Rio, Marco Del Rio, and the Millers:

"Our activities have been so hectic since we returned from our visit with you that I have not had opportunity to write and thank you for your hospitality and informative tour through the clinic. I want you to know that Senator Hernstadt and I were impressed with your system, and the apparent results of the 'holistic' approach for therapeutic use of Laetrile.

"We were able to evaluate much more objectively Assembly Bill 121 which would legalize the manufacture and use of Laetrile in Nevada as prescribed and administered by a licensed physician. The guided tour through the Laetrile factory was equally as interesting and informative.

"Of most importance to me was the testimony of the 10 patients questioned, the sophistication of the clinic's equipment, and the cleanliness and sanitation of the rooms, especially the doctors' offices, restrooms, and laboratories. I am sincerely grateful for your hospitality and courtesy on this surprise visit."

Dr. Helen Calvin, leader of successful Indiana campaign to legalize Laetrile, at microphone reviewing list of persons who volunteered to testify at Senate and House hearings. At left is Senator Robert Garton, Senate sponsor of Laetrile (later replaced by President Pro Tem Robert Fair for a Senator less friendly to the measure), and at right is Representative Dan L. Burton, the bill's author and staunch lobbyist among colleagues for its passage. UPI Reporter Hortense Myers (back to camera) looks on.

Bohanon Has Some Curt Comments in Laetrile Order

Judge Refuses to Lift FDA Restraining Order

Judge Luther Bohanon again has come down hard on the Food and Drug Administration for its position in banning the use of Laetrile. In an order issued April 8, following a hearing March 18 in U.S. District Court in Kansas City, the judge ordered:

- That the status of "class action is certified as encompassing all 'terminally-ill cancer patients,' " the term referring to "anyone who in affidavit form is declared by a practicing physician (M.D.) to be terminally ill.
- "The affidavit shall include the following:

1. that there is histologic evidence of a rapidly-progressive maligancy in the patient possessive of a high and predictable mortality rate; and

2. (a) that further orthodox treatment would not reasonably be expected to benefit the patient; or

(b) that Laetrile will be administered only in conjunction with established and recognized forms of cancer treatment; or

(c) that the patient has made a knowing and intelligent election to take Laetrile after being fully apprised of the full range of recognized treatments available, and of the fact Laetrile is considered by most cancer experts to be of no value in combating the disease."

The court enjoined the defendants — the United States of America, HEW Secretary Joseph A. Califano, FDA Commissioner Donald Kennedy, and Customs Service Commissioner Vernon D. Acree — "from impeding or preventing the importation and interstate transportation of Laetrile by any members of the plaintiff class or their designated agents."

The final order in the decree was that "such Laetrile be imported and utilized solely for the personal use and benefit" of the plaintiffs.

THREE BASIC ISSUES

In a memorandum opinion on which the above order was based, Judge Bohanon dealt with the three basic issues he said emerged from the March 18 hearing which took place in response to the plaintiffs' request that the court enter orders certifying the plaintiff class as including "all victims of cancer and their spouses who are responsible for the cost of treatment," and declaring as members of that plaintiff class, "all persons certified by a physician as having cancer."

The government opposed class certification, asserting that "the class plaintiffs purport to represent is too ill-defined and ephemeral in makeup to render its members capable of definite identification," and arguing that at most, certification should encompass only terminal cancer patients.

After quoting pertinent cases, citing Rule 23 of the Federal Rules of Civil Procedure, and stating that he had "reviewed the facts and circumstances of this case," the court said he "is persuaded it is appropriate to administer this matter as a class action."

Responding to the government assertion that "early diagnosis and prompt treatment are critical in the

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management of cancer, and that needless and untimely deaths will occur if Laetrile is used in preference to established methods of treatment," Judge Bohanon said "such arguments have little applicability to that fraction of cancer patients whose lives orthodox medical science professes no capacity to preserve. To speak of Laetrile as being 'unsafe' for these people is bizarre. Additionally, it is connotative of a paternalism incompatible with this nation's philosophy as to the proper relationship between the government and the citizenry . . .

"The issues in this case are such that defendants' position is in no way prejudiced by class action treatment. Instead, defendants are saved the time and expense of defending a multitude of suits. At the same time, such treatment affords immeasurable benefits to the plaintiff class. Requiring litigation of protracted and expensive individual law suits would effectively serve to deny many terminal cancer patients opportunity to have their claims adjudicated. Their disease has often left them with limited funds, and made time an even more precious commodity. It appears to the court that ignoring the advantages of class action disposition of this case would evidence an indifference to judicial economy and the general spirit of the class-action concept . . .

"Defendants urge that many cancer patients have no interest in the use of Laetrile. The issue before this court is not the wisdom of using Laetrile, but rather the right of cancer patients to do so if they choose . . . The rights of patients unimpressed by Laetrile's alleged therapeutic qualities are in no way prejudiced by this decision. Such persons must be as free to disregard Laetrile as are their fellows to invoke it . . . "

A 'NEW DRUG'?

Issue No. 2 was whether Laetrile is a "new drug." Before getting into that issue, Judge Bohanon commented: "This court makes no determination on the limited evidence before it as to Laetrile's ability to combat the ravages of cancer. Defendants have introduced evidence tending to establish the general opposition of medical authority in this country to the use of Laetrile. Contrarily, the court is aware of instances of patients and physicians in various parts of the country emphasizing personal experiences with Laetrile's ability to counter aspects of the disease's manifestations and discomforts . . . Such issue is not before the court, and the court is cognizant that it possesses 'neither the facilities nor the expertise' to independently determine the drug's therapeutic value.

"It is unlawful to introduce any 'new drug' into interstate commerce previous to the FDA's approval of a 'new drug application' (NDA) establishing such drug as 'safe' and 'effective' for its intended use. The FDA has banned the importation and interstate shipment of Laetrile on grounds an NDA on its behalf has neither been filed nor approved.

"In support of its position that plaintiffs are entitled to no substantive relief, defendants urge . . . that the initial determination of the safety and efficacy of a 'new drug' is the responsibility of the FDA, that FDA has no duty to approve a 'new drug' in the absence of an NDA, and that the administrative procedures applicable to new drugs . . . must be exhausted before a court has jurisdiction. These arguments are relevant only if the premise is accepted that Laetrile is in fact a 'new drug.'

FINAL QUOTES FROM BOHANON OPINION

"This case raises questions of fundamental political and philosophical consequence. Freedom of choice necessarily includes freedom to make a wrong choice, and there is much force to the argument that matters of the type under discussion here should be left ultimately to the discretion of the persons whose lives are directly involved.

"The point can be couched in simple terms: Many intelligent and mentally-competent citizens in this nation have made a deliberate decision that they would like to employ an unproven and largely unrespected treatment in an effort to comfort, if not save, lives that orthodoxy tells them have already been lost. They do so with an acute awareness of professional medicine's assessment of their choice. Their decision should be respected."

FAIR PLAY REQUIRED

"It is clearly established that FDA has power to determine whether a particular drug requires an approved NDA in order to be sold to the public . . . Its determination that a product is a 'new drug' is, of course, reviewable . . . FDA does not have unbridled discretion to do what it pleases. Its procedures must satisfy the rudiments of fair play . . .

"In an opinion in this same case, the Circuit Court held that FDA could not escape the obligation of producing an administrative record to support its determination that Laetrile is a new drug, noting that 'it is not a new drug merely because they (FDA) say it is.' The court further observed that based on the record, it appeared doubtful that FDA had in fact developed such an administrative record, and added that 'to support its determination, FDA would have to present *substantial evidence* to support the proposition that Laetrile is not generally recognized among qualified experts as 'safe and effective,' and that Laetrile is not grandfathered by either of the exemptions discussed above.' (emphasis supplied).

"As to the 'grandfather clauses,' the Circuit Court specifically found that if Laetrile were either marketed as a cancer drug between 1938 and 1962 and recognized as safe, or if used as a cancer drug between 1906 and 1938 under the same conditions as presently used, it is exempt from being classified as a 'new drug' . . .

"Defendants recognize that '. . . the test generally is whether Laetrile was 'marketed before 1962 for the same uses for which it is presently being sold and was generally recognized as safe for those uses.'

'EFFECTIVE AND SAFE'

"Nonetheless, FDA contends that if Laetrile were marketed prior to 1962, it still must be shown to have been 'effective' as well as 'safe' . . .

"'(In the case of Durovic vs. Richardson) the court held that 'any delay in the institution of effective therapy (e.g., radiation, surgery, effective chemotherapy) caused by the use of an ineffective drug allows the disease to progress beyond control. Delay means almost instant death.' Significantly, in the present case plaintiff class is comprised of persons already determined to be terminally ill. Adopting FDA's rationale would

mean that an individual suffering from a life-threatening disease for which there exists no known effective treatment would not lawfully be entitled to any treatment at all since no drug could be deemed 'generally recognized as effective' in such a situation.

"Congress undoubtedly possesses authority to proscribe drugs it considers dangerous to the public welfare . . . The record in this case does not necessarily disclose any such Congressional intent as to Laetrile. The FDA is not empowered to enforce its convictions concerning Laetrile on the basis of its congressional mandate to monitor the introduction of 'new drugs' into our society, if in fact Laetrile has been used for decades in the treatment of cancer, and without ill effect . . . The legality of FDA's ban on Laetrile is under attack on the theory that FDA arbitrarily and without sufficient basis in fact characterized Laetrile as a 'new drug.' So far, FDA has presented little, if any, evidence to combat that allegation."

INJUNCTIVE RELIEF

Responding to the government's contention that the court was in error when it granted "injunctive relief" to the plaintiff (by permitting him to bring Laetrile into the U.S. from Mexico), Judge Bohanon said " . . . Generally, if the questions presented in a suit for injunction are grave and difficult, and the injury to the moving party will be irreparable if the relief is denied, while the inconvenience and loss to the opposing party will be inconsiderable if the relief is obtained, the injunction should be granted. The plaintiff in this case is in danger of suffering irreparable injury if relief is postponed or denied. Any legal right they might possess to use Laetrile may be of academic value if secured only at some undetermined future time. For the terminally ill, the phrase 'justice delayed is justice denied' contains special significance.

"Defendants' potential loss from the granting of injunctive relief is slight at most. Certainly defendants are charged with an important responsibility in safe-guarding the public from dangerous drugs, and they are to be commended for pursuing the task diligently . . ."

THE 1953 REPORT

"The record in this case discloses many indications that Laetrile may well be established to have been marketed for the last 20 years or more as a cancer treatment, to have been generally regarded by most experts as 'safe,' even if not 'effective,' and thus to be exempt from 'new drug' classification by virtue of the 'grandfather clause' provision. Defendants' brief contains references to the report of the Cancer Commission of the California Medical Association published in 1953, which report on its face establishes the longevity of Laetrile's recognized use. While concluding that Laetrile was ineffectual as a 'cure' for cancer, the report generally regarded it as safe and perhaps even palliative to some degree. Interestingly, the 1976 edition of the FDA Code Regulations . . . as well as multiple earlier editions, places amygdalin (Laetrile, Vitamin B-17) on the 'Generally Recognized as Safe List.' "

Concluding his memorandum opinion, Judge Bohanon said: "Defendants adamantly urge that the use of Laetrile is expensive, ineffectual, and unjustifiable. Such contentions are serious and cannot be lightly regarded.

"Of some significance, however, is the fact that Laetrile's high cost is undoubtedly a direct consequence of its illegality in the United States. Ironically, this requires traveling all the way to Mexico to enjoy its use lawfully . . . "

The memorandum opinion ended with the judge's comments, appearing in a bold-faced box earlier in this story, that "freedom of choice includes freedom to make a wrong choice . . . "

If Approved By Assembly, Brown O.K. Expected

California Senate Votes 4-1 for Laetrile Bill

Despite the opposition of the California Medical Association, the State Senate in May passed S.B. 245 — a bill legalizing Laetrile — by a decisive 28-7 vote. Negative notes were cast by Senators Robert G. Beverly and Alan Sieroty of Los Angeles, John Briggs of Fullerton, George Deukmejian of Long Beach, Robert B. Presley of Riverside, Albert S. Rodda of Sacramento, and Bob Wilson of San Diego.

Introduced by Senator William Campbell at the request of the National Health Federation, the measure was sent to the Assembly for action. It would legalize the manufacture and use of Laetrile in the state, under licensed medical doctors.

Opposing it were the California Medical Association and the 1,000-member Sacramento Medical Society whose president, Dr. Stanley J. Smiley, said it would pave the way for the return of

(Please turn the page)

Illinois House Committee Okays B-17

By a vote of 16-4, the Human Resources Committee of the Illinois House of Representatives April 26 approved a bill permitting physicians to prescribe Laetrile to cancer patients.

While supporters of the bill spoke, wrote AP Newsman Bob Springer, "the chief lobbyist for the Illinois State Medical Society paced nervously up and down the aisle, chain-smoking cigarettes and giving signals like a sports coach to opponents waiting to testify.

" 'I think we've lost this bill,' said Jeff Holden (the lobbyist). "He said the state medical society opposes allowing Laetrile on the open market. He also had appeared earlier in the day to oppose a bill allowing pharmacists to substitute different brands for the same generic drug prescribed by a doctor, a measure its supporters said would save money for consumers . . . "

Among witnesses appearing on behalf of the Laetrile bill was Mrs. Woodrow Chenault of Monticello, Ill., who told the committee she has used Laetrile since October 1975, and it has eliminated the pain from an inoperable brain tumor, she has regained 10 pounds of lost weight, and "feels normal again." The malignancy has "infiltrated into the tissue" rather than forming a lump, she told a reporter.

"quackery and high-priced, worthless nostrums which the government outlawed long ago. Surely Californians don't want fast-buck charlatans back again."

But obviously the state's senators did not agree with that evaluation. During the debate, Senator Nate Holden, member of the Health and Welfare Committee, told colleagues who might be wavering that they "should consider how you would feel, if stricken with cancer and told you were going to die, and not be able to get Laetrile from a medical doctor if you wanted it."

Medicine is not the issue, said another supporter, Senator Arlen Gregorio. "The issue is political philosophy — what the government should or should not be doing to people. Laetrile is considerably less harmful than tobacco, alcohol, and junk food, things people are making a lot of money on selling in this society."

The bill was expected to face a fight in the Assembly where a similar one was killed last year in the Health Committee. The American Cancer Society, said the *Los Angeles Times*, was considering spending $25,000 to hire a lobbying unit to oppose it. ACS's Dr. Raymond L. Weisberg of San Francisco said he is "convinced that cancer mortality statistics will start moving upward within two or three years unless this bill is stopped by the Assembly or the Governor. If the use of Laetrile becomes widespread, we might eventually have a cancer epidemic on our hands." He said the Society would "fight the notoriously worthless drug" to "the bitter end."

Should the bill get Assembly approval, it is believed Governor Jerry Brown will sign it. He told reporters a week before the Senate vote that he has "an open mind" on the measure, and he feels "very strongly that people have a right to participate in decisions affecting their own lives, and their own minds, and their own bodies." He was critical of the "restrictive" medical profession, and proposed an "upward mobility program" for nurses and medics to become physicians by taking night classes at community colleges.

NCI SAYS IT WILL TEST LAETRILE

Faced with an aroused public opinion as expressed by the passage in eight states of legislation legalizing the use of Laetrile, the National Cancer Institute has indicated it plans to conduct controlled clinical tests of the nontoxic substance.

NCI's research director Vincent DeVita told the Morristown, N.J., *Daily Record* that while he thinks Laetrile is "a fraud," he is willing to and believes "we have reason to conduct such a test." He said he has told the Food and Drug Administration his office will seek approval for the tests. In addition to Alaska, Indiana, and Florida, Nevada, Arizona, Washington, Oklahoma and Texas have legalized use of Laetrile.

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

With Passage of Campbell Bill, Chelation Harassment Would End

After deleting the essence of Senate Bills 245 and 246 from S.B. 247 to insure its approval by the California Senate Health Committee (which then approved it 8-0), Senator William Campbell has amended them, one of which (No. 246) would permit use of chelation therapy. It has passed the Senate Health and Welfare Committee 6-0.

As amended, S.B. 246 provides that a licensed physician and surgeon "may prescribe, dispense, or administer a new drug in dosage amounts for purposes different from the dosages or purposes specified in the manufacturer's advertisement or labeling as approved under state or federal law. It would permit a physician and surgeon "to render an opinion concerning the safety or effectiveness of such a new drug," and require a doctor who administers it "to obtain the written informed consent to such usage from the patient." Although chelation therapy is not now illegal in California, the practice is opposed by the California Medical Association. The amended S.B. 246 would write into law the right of a physician/surgeon to administer chelation therapy, and state regulatory bodies. Its passage would prevent the State Board of Medical Quality Assurance from enforcing a proposal to ban its use.

S.B. 246 also would prohibit any state regulation limiting the right of a healing-art practitioner, "within the authorized scope of practice, and with the informed consent of the patient," to prescribe diet, foods, food for special dietary use, components of foods, herbs, prayer, or harmless devices." It also would prohibit any regulation "depriving or impinging upon the right of any person to use diet, foods, food for special dietary use, components of foods, herbs, prayer, or harmless devices . . . as a remedy, amelioration, or palliative for any disease, pathology, or condition."

S.B. 245 as amended would make it lawful to treat cancer with "Laetrile or any vitamin, mineral, enzyme, or food for special dietary use deemed adjunctive or necessary to Laetrile therapy when prescribed by a licensed physician and surgeon after the physician obtains from the patient a prescribed form relating to specified information and consent." The bill would make manufacture, sale, prescription, and use of Laetrile lawful in the state for such purposes, and would require the Board of Medical Quality Assurance to develop and promulgate by March 1, 1978, standardized informed-consent forms for Laetrile patients.

NEW ENGLAND NFFA CONVENTION SLATED

The 21st annual convention and "Natural Living Festival" of the New England Natural Food and Farming Associates will be held Aug. 26-27-28 at Regis College, Weston, Mass., according to Jim Mascia, 53 Highland Ave., Wallingford, Conn., president.

The festival again will feature speakers, workshops, demonstrations, and exhibits on preventive medicine, nutritional therapy, natural healing, organic farming, natural foods, and alternative energy. Exhibit space may be reserved through Frank Knotts, 41 Alden St., Ashland, Mass. (617-881-2446).

Editorial

The Delaney Amendment and You . . .

On our cover in the June issue we noted, re the saccharin issue, that "The stakes for 'us' are even higher than for industry." The "bottom line" on that one is: "It's our lives. For the industry, dollars."

That, friends, is what this nasty controversy is all about. Money versus human life.

On this one, industry sees a chance to get rid of the barrier for unrestrained profit-taking — the Delaney Amendment — and it will pull all the stops to do it. Witness the series of full-page ads in metropolitan newspapers around the country — hundreds of thousands of dollars spent to persuade uninformed individuals to bombard Congress with letters to "modify the Delaney Amendment." Modification would give FDA discretionary authority in deciding what products to withdraw from the marketplace — even if found to be "slightly carcinogenic" — and what products to let industry funnel into human bodies belonging to persons who don't know or don't care whether or not there's "a little bit of poison" in their food or drink.

Some of us — a lot of us when it comes right down to it — *do* care. And that's why the National Health Federation is joining with other caring organizations — though admittedly too few and too limited in membership — to try to stop the Madison-Avenue blitz to destroy the only protection Americans have against cancer-inducing chemicals in their food and drink — the Delaney clause in the Food and Drug Act.

The industry has spent unknown amounts on newspaper ads, it also has provided "kits" for editors around the country, and those kits contain quotes from newspapers — big ones — urging Congress to water down the Delaney Amendment, to "gut it," as Attorney Jim Turner says, all in the name of keeping saccharin in soft drinks. But of course saccharin isn't the only chemical that would "benefit" from a relaxation of restrictions. Every other potentially cancer-causing chemical would become eligible for consideration if FDA is given risk-benefit authority over foods, as it has with drugs.

It will be a sad day in America if this movement isn't stopped dead in its tracks. It will be a dreadful day in American history if this protection — scant though it is — is taken away from the people and placed in the hands of bureaucrats whose cozy relations with the chemical industry are so well documented.

To beat the chemical trust we'll have to confront the corporations in the courts, as well as fight at the Congressional level. It will cost thousands. NHF doesn't have those thousands, nor do we have the allies, in this fight, that we had in the vitamin-mineral battle. There is no vested interest particularly interested in helping finance a legal fight against destruction of the Delaney Amendment.

So, if the money is to be collected to reimburse expert scientific witnesses, and pay lawyer fees and court costs, it will have to come from ordinary people — you and me. A figure of $30,000 has been mentioned — and it could

cost more. If every N.H.F. member sent in $2 we'd have it in a month's time. But not everyone will, unfortunately. So for those who have an altruistic motive — or a selfish one, for families yet unborn — there's an obligation to increase the amount to make up for the indifferent ones.

We don't "urge" or "implore" — we simply lay out the facts hard and cold. If we don't do it, no one else will. If *you* don't respond, no one else will. And we can watch helplessly while the wheels of injustice grind slowly through Congressional hearings, while the letters condemning the Delaney Amendment pour in from uninformed or care-less persons intent only on having their sweetener. And the point is — *they can have it if labeled a drug*, and the Amendment need not be touched.

As Mr. Turner so lucidly pointed out (June *Bulletin*), the issue should not be related to the Delaney Amendment. FDA possesses the authority right now to ban saccharin if it wishes — but it hung its hat on the Delaney Amendment to try to keep some of the heat out of its kitchen.

Let's face it — millions of Americans aren't about to forego the appetite pattern of years even if they're vaguely aware they may be sealing their own death warrants sometime in the unforeseeable future. Millions smoke cigarettes despite overwhelming clinical evidence they may die earlier if they don't knock off that habit. Habit is not easy to overcome or change — not unless the individual places value on the physical body, treats it as he would a loved pet or person — with kindness and respect. Inhaling nicotine and tar, ingesting the chemical saccharin, or the cocaine in coke, or the nitrite in doctored meat is not kind to the body, does not treat it as "the temple of the Lord."

Educating people is a long, slow, thankless job. In this particular fight, there isn't time — nor should we take that risk — even if there were a small chance for success in turning around enough diet-drink consumers to reverse the message in those letters damning the Delaney Amendment.

We must act *now*. Industry is breathing down the necks of Congressmen, swayed by the passionate appeals of saccharin-using constituents, and already there are bills in the hopper to strip the Delaney Amendment of its protective authority — the only protection we citizens have against avaricious corporations whose management refuses to cooperate if the choice is one of people or dollars. We don't live in a society in which ethics is high on the value-system.

Industry has scented victory — it sees its chance to defang that long-despised Delaney Amendment, and it will pursue the issue, press its current tactical advantage, and move heaven and earth to keep up the momentum of the anti-Delaney-Amendment letters rolling into Washington.

Maybe we're tilting at windmills to think we can stop 'em. But we've tilted at windmills before — and won — with the help of the Lord.

We can do it again — in an issue as important as any which will come along in our lifetimes (except perhaps the DNA/RNA issue which has excited few, really). We can win if we can finance the scientific expertise and legal knowledge essential in halting the drive to open the floodgates to cancer-inducing chemicals. If there's even a trace of a carcinogen in a chemical, it can bring on the disease in a few years, or 20 or 30, to a significant portion of the population. There's no such thing as "a little bit of cancer."

— D.C.M.

Naturopath Licensing, Nutrition Course for Medics, Among California Proposals

Among the 3,049 bills to be introduced into the California Legislature as of April 28 are the following:

A.B. 1775 authored by Assemblyman Art Torres of Los Angeles, if adopted, would ban junk foods from schools.

S.B. 674, introduced by Senator Ralph C. Dills of Gardena, provides for the licensing of persons practicing naturopathic medicine by establishing a Board of Naturopathic Medical Examiners, and a program of certification.

S.B. 675, also a Dills bill, permits licensing of a physician/surgeon without a written examination if the applicant were a graduate of a medical school and licensed by the allopathic or homeopathic licensing board in another state, a member of a specialty medical society, and passes an oral interview conducted by the California Division of Licensing, Board of Medical Quality Assurance.

A.B. 1172, offered by Assemblyman William E. Dannemeyer, requires that physicians being admitted to practice in California take a course in nutrition and pass an examination before obtaining a license.

S.B. 200, introduced by Senator John V. Briggs with Senator Arlen Gregorio as coauthor, amends A.B. 2291 which bans smoking in 50% of the areas in publicly-owned buildings by providing that smoking be banned in all buildings where the public is permitted and invited, except where posted "smoking area." It includes offices and restaurants, except the lobby. That bill has passed the Health and Welfare Committee by a 7-0 vote and was referred to the Finance Committee.

NEW JOURNAL WILL SERVE NATUROPATHY

The *Journal of Natural Medicine*, published for the National Association of Naturopathic Physicians, made its debut with a 42-page issue in March. It will be issued six times a year, at $10.

Louise F. Davis is managing editor. Contributing editors are Kurt W. Donsbach, D.C., N.D., nutrition; and Cyrus E. Maxfield, N.D., medical. According to Mrs. Davis, it is the hope of the staff that "this issue and those to follow will help fulfill the need for such a professional publication — a need voiced many times by physicians we contacted in every part of the country.

"It is the job of the editorial staff to encourage the ever-increasing awareness and appreciation of naturopathy, homeopathy, chiropractic, osteopathy and ancillary practices. It took months of careful planning, consultation, hopes, dreams and financing to make this publication possible, and we hope another milestone in the progress of a N.A.N.P. has been achieved. . . . We hope the *Journal of Natural Medicine* will serve to advance the goals and help define the methods of natural healing . . . "

In Precedent-Setting Agreement

Lay Homeopath Wins Right To Practice His Specialty

Shortly before the case came to trial, agreement was reached in Municipal Court, Oakland, Calif., between Health Practitioner Dana Ullman and the California Department of Health permitting him to use herbs and homeopathic remedies in the treatment of disease. The court action is the first to recognize a nonmedical practitioner and approve a procedure for practice.

The agreement allows Mr. Ullman to continue practicing homeopathy without fear of prosecution, on condition he distributes to patients statements outlining the differences between standard medical practice and homeopathy, and recommend that clients also consult a medical doctor.

It was hailed by Attorney Jerry A. Green, 273 Page St., San Francisco, who worked it out with authorities, as "the first legal case to confirm the existence of an approach other than the medical approach to health care, and sets a precedent in health-care services available to the public. For the past 70 years, all health care approaches outside the medical profession have been illegal."

Mr. Ullman, a lay practitioner of homeopathy, 2133 Derby St., Berkeley, said he was "heartened" by the decision (which) "sets the legal groundwork for holistic practitioners and their clients to make agreements with each other as long as they respect present laws prohibiting diagnosis or treatment of a disease without a medical license."

Under the agreement with the state, he may practice homeopathy by making legal agreements with clients he sees within the next six months. If he does this, the case will be dismissed. But for several months prior to the time for trial, he was in fact providing clients with a packet of information describing his role, recommending the client see a physician for diagnosis and treatment of any disease or ailment, and stating the client's responsibility in the healing process, and the right of choice to select his or her own health care. This could include such holistic approaches as acupuncture, nutrition, naturopathy, body/self-awareness, herbs, massage, yoga, and hypnotism.

Homeopathy as practiced by Mr. Ullman is the use of miniscule doses of substances to catalyze the body's natural healing processes in a way somewhat analagous to immunization. In the past two years he has taught homeopathy to some 2,000 persons, including 20 doctors and 150 nurses, he says.

Signing the precedent-setting agreement for the state was Alameda County District Attorney Martin Brown who told the press: "It's a very vague area. If your mother tells you to take some chicken soup for your cold, is she diagnosing and prescribing?"

He said the Ullman case will not automatically protect all alternative health-care practitioners from prosecution, but that each will be considered on an individual basis. "We believed that Mr. Ullman was represent-

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ing himself honestly and was operating on an ethical basis," he said.

The case is the third criminal prosecution of an alternative health-care practitioner in California to attract public attention since the late 1960s. A Los Angeles woman who treated another woman with a yogurt douche at a feminist health center was acquitted on charges of practicing medicine without a license in 1972. Three Santa Cruz nonmedical midwives, arrested in 1974, were released when the case was dismissed last year.

The groundwork for the three prosecutions was laid by state Department of Consumer Affairs undercover investigators who posed as patients. In Mr. Ullman's case, an agent visited him three times in February 1976 complaining of flu and cold symptoms. Mr. Ullman prescribed a miniscule dose of nux movica — "poison nute," — an herbal remedy available from a specialized homeopathic pharmacy. The agent's reports were turned over to the Alameda County district attorney's office. The agreement was reached after nine months. This settlement is considered "unlikely" to resolve all the legal questions surrounding the burgeoning use of alternative health care, and District Attorney Brown said he hopes the problem will be resolved by new legislation to regulate alternative health-care practitioners.

After Mr. Ullman's arrest, the Holistic Health Organizing committee of Berkeley was formed "to educate the public on holistic approaches" and to raise money for his legal fees and bail which he says amount to more than $5,000. HHOC sponsored a two-day retreat where 275 persons attended 35 workshops in a variety of health approaches; helped coordinate a conference on "The Fundamental Laws of Natural Healing" at Stanford University Medical School; circulated two newsletters to some 6,000 persons, and played an active role in helping form the Committee for Integrated Health, a mental health advisory group to President Carter. Information about HHOC may be obtained by writing P.O. Box 688, Berkeley, 94701.

Hygienists to Meet Aug. 7-13 at Tufts

The 29th Annual Natural Living Health Seminar sponsored by the American Natural Hygiene Society, Inc., is set for Aug. 7-13 at Tufts University, Medford, Mass., six miles northwest of Boston. Morning classes (two) will cover the physiology of fasting, toxemia, exercise and food requirements for staying well, obesity, emotional and mental factors in health.

Afternoon workshops will be held in organic gardening, natural childbirth, raising healthy children, vegetarian food preparation, harmful effects of too much protein, sprouting, and "scientific confirmation of beneficial changes in blood pressure, digestion, and circulation resulting from natural hygiene living." There will be evening lectures on prevention of and recovery from disease conditions, dangers of immunization, dental care. Reservations may be made by writing or calling the society, 1920 Irving Park Rd., Chicago (phone 312-929-7420).

Linda Clark Reviews New Book On Handwriting and Health

Helping Your Health Through Handwriting
(A Book by Phyllis Harrison and Don C. Matchan)

A Pyramid Publication in paperback, 1977. (Available NHF, Monrovia, $1.75 plus 75¢ postage/handling. Please allow 4-6 weeks for delivery).

Most people, when you mention handwriting, freeze. They feel guilty because they were admonished by their school teachers to follow certain rules for "perfect penmanship." These rules are now outdated, thank goodness, otherwise everyone would be writing like everyone else. Legibility is one thing, conformity, another. Since handwriting is a form of communication, if someone can't read your writing, your message cannot get through. Otherwise, your handwriting expresses *you*, and it should not be forced into conformity any more than trying to force everyone to wear the same type and size of shoe. Chaos can result in both cases.

This book, *Helping Your Health Through Handwriting*, which includes documented findings from many experts, quotes a teacher with 30 years' handwriting experience, who states that forcing children to conform to the "outdated" rules of penmanship can cause emotional problems in children which can last a lifetime. Why? Because the handwriting should reflect the personality pattern of the writer. Handwriting also has been called *brainwriting*, since it expresses the writer's emotions. In fact according to this book, experts in graphology (the science of handwriting) find it is often a better clue to emotional problems than are psychological tests.

This book shows you how to analyze your own handwriting as well as that of your children, to spot such problems.

Americans may be surprised at what handwriting can reveal, yet the science of handwriting is not new. In Europe, for many years, the hiring of people to fit a specific job, based on information provided by handwriting, has been used with tremendous success. Phyllis Harrison, a graphology expert as well as coauthor of this book and former personnel consultant, has used this method for several years. She prefers to see the application for the job written in the applicant's own handwriting (instead of typewritten), before interviewing the person. Usually the choice of candidate for the job is made sight-unseen, based on the handwriting, prior to, but later verified by the personal interview. Both employers and employees have expressed complete satisfaction with these choices. The types of jobs have ranged from janitors to secretaries to executives, often chosen from 75 or more applicants. In all cases, the round peg has been found to fit the round hole, jobwise.

Even more surprising, handwriting has been found to be a mirror of the body. To date there has been less emphasis on this phase of handwriting analysis, but when you think of it, it does make sense. Since many ailments are of psychosomatic origin (based on emotions), both emotions and tensions can show up in the handwriting, helping to spot present

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or future health problems.

Some people may not want to know their health problems, possibly since they don't know what to do about them. But this book is unique in helping you do something positive about the conditions. Whereas most books on graphology analyze traits or problems — mental, emotional and sometimes physical — they stop at that point, leaving you dangling. You believe you are stuck with your handwriting as well as with the problem. Not so! Not only does *Helping Your Health Through Handwriting* help you identify your problem, it helps you correct it.

There are a series of exercises which, if practiced consistently for a while, can free the writing as well as the body of tension. Phyllis Harrison tells how changing her own handwriting removed unwanted faults in her personality, and eliminated physical ailments. Anyone who knows her certainly will testify that it was worth the effort.

She is an inspiration! She recently shared a case history of someone else's health improvement with me: A wife brought her husband's handwriting sample and reported he was suffering from leg trouble. Ms. Harrison immediately found the cause, told the wife what changes her husband should make in his handwriting, and suggested he do the change as an exercise 30 times every night before bedtime. A week later the wife returned with a complaint from her husband that his legs were aching painfully and weren't they on the wrong track? Ms. Harrison said no. The message apparently was getting through from brain to subconscious, and the muscles, long unused, as well as perhaps the nerves, were being activated. She advised keeping it up. (Ms. Harrison says she is not a doctor, merely a handwriting specialist). Sure enough, one month later the man was well!

In the book, the trouble spots as well as the corrective exercises are clearly presented so anyone can do it. If you are not exactly sure which specific exercise is for you (though many will find the correct one without difficulty), merely open up your letters, instead of squeezing them together as you write, let your handwriting be freed and rhythmic, and see if many problems — perhaps from release of tension and uptight circulation alone— don't improve. Isn't it worth a try?

This book is a combination of many years' experience in graphology by Phyllis Harrison who teaches and lectures on the subject in two colleges, and the incomparable writing by Don C. Matchan, editor of the National Health Federation *Bulletin*. This book is within easy reach of anyone who wishes to help himself or herself through handwriting, since it is available at your nearest book or health store.

—LINDA CLARK

VEGETARIAN CONGRESS SET FOR JULY 25-31

Arcata, Calif., has been chosen as the location of the North American Vegetarian Congress to be held July 25-31. Details and free vegetarian recipes are available from the sponsors, North American Vegetarian Society, 501 Old Harding Highway, Malaga, N.J. 08328.

Back issues of *The Bulletin* assorted in bundles of 20 (NHF assortment 1969-1975) are available at $2 from the National Health Federation, Box 688, Monrovia, Ca. 91016.

Letter Asks Chairman Rogers for Hearings

The Push Is On to Get House Action on Symms-Chisholm Bill

With 86 cosponsors listed by late spring, the National Health Federation is pulling out the stops to win passage of H.R. 54 — the Symms-Chisholm medical freedom-of-choice bill.

Prepared by Executive Vice-President Clinton R. Miller, a form-letter is being made available ($2 per 100, Box 688, Monrovia, Ca. 91016) for mailing to congressmen urging their support as cosponsors, and for immediate hearings.

The letter follows: "I respectfully urge you to cosponsor and work diligently for hearings and enactment of the Symms-Chisholm medical freedom-of-choice bill — H.R. 54. Please see other side for a list of the 86 Representatives who already have cosponsored.

"When enacted, H.R. 54 will repeal sections of the 1962 Drug Amendment which unfairly shifted the burden of proof of drug efficacy to drug manufacturers from the government where it had properly been for 200 years. Naturally, I want and expect the drugs I buy to be effective. The problem is, the Food and Drug Administration has unduly delayed or banned dozens of extremely effective drugs from the market under the pretext they are ineffective, or that it is necesssary to take four to six years to clear them.

"*The Reader's Digest* (Oct. 1973) carried a revealing article by Walter S. Ross entitled "The Medicines We Need — But Can't Have." He reports that a "33-year-old American woman who had suffered crippling allergic asthma attacks for 15 years found nearly total relief recently through a British prescription medicine called 'cromolyn sodium.' It had been available in Britain since 1969, but had to be smuggled to this woman by her doctor and friends until 'late June 1973 when the U.S. Food and Drug Administration finally approved cromolyn sodium. We were the 55th country to do so.'

"*The Reader's Digest* article continues: 'In 1948, Parke, Davis and Co. was able to get a license for its Benylin Expectorant with a mere 73 pages of facts. In 1968, the same company's application for the anesthetic Ketalar required a truck to haul its 72,000 pages bound into 167 volumes to the FDA.' This 1,000-fold increase in bureaucratic red tape has caused a four to six-year lag in clearing effective drugs, which unnecessarily skyrockets the cost to the consumer and causes untold suffering and death to millions.

"In an article in the highly-respected *New England Journal of Medicine* (May 15, 1975), Drs. Franklin and Lowell report: 'For over three years, wide use of beclomethasone aerosol in England has revolutionized the management of asthma . . . On the basis of past experience, years will pass before beclomethasone will be approved by the U.S. Food and Drug Administration. Needlessly, during this period many children will suffer spinal fractures. In the patient's best

(Please turn the page)

interest, the physician must advise leaving the country or obtaining the drug illegally. How did such bureaucratic tyranny come to be?' Under the Symms-Chisholm bill, widespread smuggling of beclomethasone aerosol, Laetrile, and dozens of other drugs would cease.

"*The Reader's Digest* reported, 'Before 1962 a drug could be tested and marketed in about two years at a cost of $1 to $2 million. Today the process takes an average of seven years and may cost as much as $11 million.' Naturally this excessive cost is passed on to me. Please study Rep. Symms' statement in the *Congressional Record* (Mar. 16; April 13, 27, 29, 30; May 3; and two articles June 1, 1976.")

Congressmen receiving the letter are asked to forward it to Representative Paul G. Rogers, chairman of the House Subcommittee on Health, with a personal supporting letter asking for immediate hearings on H.R. 54. Coauthored by a conservative and liberal, bipartisan support is being sought — and obtained. As of mid-April, 52 Republican and 34 Democrat congresspersons were on the bill. Cosponsors at that time follow:

Alabama: Tom Bevill and Walter Flowers; *Alaska* (100%): Don Young; *Arizona:* Eldon D. Rudd; *Arkansas,* J. Hammerschmidt; *California:* Robert E. Badham, Clair W. Burgener, Del Clawson, Robert Dornan, Barry Goldwater, William Ketchem, R. Lagomarsino, Jim Lloyd, Paul McCloskey, George Miller, * Carlos Moorhead, Jerry Patterson, John Rousselot, Leo J. Ryan. B. F. Sisk, Bob Wilson, and Charles Wilson.

Florida: J. H. Burke, Richard Kelly, William Lehman, and Robert Sikes; *Georgia:* Larry McDonald; *Guam:* Antonio Won Pat; *Idaho* (100%): George Hansen and Steven D. Symms; *Illinois:* Philip M. Crane, Paul Findley, Robert McClory, George O'Brien, Melvin Price, and Paul Simon; *Indiana:* J. D. Quayle; *Iowa:* Berkley Bedell; *Kansas:* Keith Sebelius; *Louisiana:* David C. Treen and Joe Waggoner; *Maryland:* Robert E. Bauman and Marjorie S. Holt; *Michigan:* William Broomfield, Elford Cederberg, Philip E. Ruppe, and Harold S. Sawyer; *Minnesota:* Tom Hagedorn; *Mississippi:* Thad Cochran and Trent Lott; *Missouri:* R. A. Gephardt, R. H. Ichord, and Gene Taylor; *Nebraska:* Charles Thone; Nevada (100%): *Jim Santini; *New Jersey:* W. J. Hughes and *Matthew J. Rinaldo; *New York:* Joseph Addabbo, Shirley Chisholm, Thomas Downey, Jack Kemp, John LaFalce, *Norman Lent, Charles Rangel, and Leo Zeferetti; *North Carolina:* James Martin and Charles Rose; *Ohio:* John Ashbrook, T. Guyer, **Samuel Devine, T. N. Kindness, and C. E. Miller; *Oklahoma:* Mickey Edwards and James R. Jones; *Pennsylvania:* Allen Ertel, W. F. Goodling, Robert Walker, and Gus Yatron; *Texas:* W. R. Archer, *James Collins, Sam B. Hall, *Robert Krueger, and Charles Wilson; *Virginia:* W. C. Daniel and W. Whitehurst; *Washington:* Joel Pritchard.

(*Member of the Committee on Interstate and Foreign Commerce; **Member of House Subcommittee on Health and the Environment — committees that will hear the bill).

CORRECTION

In reporting results of the 1977 election of National Health Federation officers, the editor incorrectly listed Lorraine Rosenthal as treasurer — an office she held two years ago, now held by Paul J. Virgin.

'We'll Never Submit to Tyranny': Graham

Editor:

Please accept my belated thanks for your gracious editorial in behalf of the people of the City of Brainerd, Minn., and myself, as their special counsel, in the November issue of the *NHF Bulletin.*

Despite your good wishes, the United States Supreme Court dismissed our appeal. Still, you will be happy to know that the city refuses to fluoridate. We are back in the Minnesota District Court, on motion to vacate the writ of mandamus directing fluoridation of our world-famous water supply.

We rely heavily on the superb scientific work of Dr. Yiamouyiannis, your science director, showing unmistakably that fluoridation causes cancer.

Meanwhile, the judge procrastinates on the ruling, while we are making nice progress in the Legislature. Our new governor, Dr. Rudy Perpich, is a dentist, and one of the coauthors of the mandatory fluoridation law in our state. He has forthrightly recognized at least the moral and political error in the law, and endorses a local-option bill now awaiting action in the Minnesota House and Senate, with broadly-based, bipartisan support.

The people of Brainerd extend their spirited greetings to NHF, and give firm assurances to our friends that we are confident of success, and that we will never submit to tyranny. God bless.

John Remington Graham
Counselor at Law
Hamline University Law School
St. Paul, Minn.

(Ed. Note: The District Court ruled against the city, the Minnesota Supreme Court refused to hear the appeal, and the council was pondering its next step when almost "out of the blue" came a bill (attached to a billion-dollar appropriations measure) establishing a two-year moratorium on mandatory fluoridation in the state, and authorizing the governor to name a commission to study the fluoridation-cancer link).

'Never Dreamed NHF Would Be So Great!"

Editor:

Being a life member, I feel pretty good about the Federation successes on behalf of the people as a whole.

I have to laugh and choke at some of the statements — as on Page 20, April *Bulletin.* They may think all but they are stupid. Not so! I have eaten as many apricot kernels as I felt like, for years — and I mean years. I am 71 now, and at age six I ate as high as 50 of them an evening. I put them in everything I take, and grind them up in raw cereal. Those who say they're bad for you don't know siccum about health.

Here in Myrtle, Ore., they are free — most canneries will give you all you can pack away. Why buy nuts when you can get free ones? Peach pits are hard to crack, but very good. I use pits from my own cherries also.

I never dreamed years ago the Fed-

(Please turn the page)

From Megavitamins To Orthomolecular Medicine

BY MARSEILLE SPETZ, M.D.

Megavitamin therapy is not about to be wiped out by the objections of traditional medical specialists. Instead, it has been expanded into sweeping programs of observation on patients, and complicated tests in the laboratory.

The California Orthomolecular Medical Society was organized in San Diego two years ago by 10 M.D.s and Ph. D.s who met to draft legislation to establish a formal program of investigation in California. The Society succeeded in establishing orthomolecular medicine as part of the services to be considered in the contracts of private health insurance companies with their clients. In addition, the California State Department of Public Health has been mandated to arrange for federal Medicaid coverage for orthomolecular medicine in three of the state's 52 counties starting July 1.

Meanwhile, the publicity incident to successful lobbying by the Society was evident at the February symposium in San Francisco. Some 500 persons attended. Many were consumers who remained politely attentive during the highly technical presentation of some reports.

Dr. Linus Pauling, Nobel Laureate in Chemistry and Peace, author of a book on vitamin C and the common cold, was one of two principal speakers, along with Dr. Walter Alvarez, noted columnist on medical subjects and for many years a physician at the Mayo Clinic.

The term *orthomolecular medicine* grew out of Dr. Pauling's discovery of abnormal hemoglobins more than 20 years ago. He coined the term molecular disease at that time because the condition was understandable at the molecular level.

His attention was more specifically concentrated on the idea of molecular disease when Hoffer and Osmond reported on the beneficial effects of megadoses of vitamin C and niacin (one of the B vitamins) in schizophrenia. At that time Dr. Pauling was reminded of the report of Irwin Stone in a journal of physical anthropology on the amount of vitamin C synthesized by animals in their normal metabolic processes. (Only the guinea pig, monkeys and man require vitamin C from the diet).

The comparison suggested to Dr. Pauling that human beings might require a lot more vitamin C for optimal health than is generally available in the diet, especially under times of illness and other stress (at which times animals markedly increase their synthesis of vitamin C). Since one individual can be quite different from another, each person must be evaluated separately. The prefix *ortho* in *orthomolecular* means *right, correct* or *straight,* and this prefix is used with the same connotation in *orthopedics,* initially applied to the correction of a club foot. So a *right molecule,* or *orthomolecular,* refers not only to the presence in the body of vitamins and minerals in optimal amounts, but also to the removal or neutralization of molecules abnormally present and which might cause disease.

Seldom is a person ill as a result of deficiency or accumulation of only one kind of molecule. Consequently, depending on the individual patient, tests must include hair analysis for toxicity, excess or deficiency of trace minerals, and a period of fasting with water only under controlled conditions to determine if specific chemicals or foods in the environment are responsible for symptoms. In the case of cerebral dysfunctions such as schizophrenia, depression or inability to concentrate, the administration of vitamins and minerals and some medications are quite different, depending on whether the patient has a high or low histamine level.

The multifaceted approach by orthomolecular practitioners is not to say the situation with regard to vitamin C has been in any way diminished. Dr. Robert F. Cathcart, an orthopedist at Incline Village, Nev., has his patients taking vitamin C by the teaspoonful to the point of diarrhea to control symptoms of the common cold and influenza as well as other viral diseases such as infectious hepatitis, herpes simplex and herpes zoster (shingles). Vitamin C (which sometimes must be given intravenously) also reduced symptoms from a penicillin reaction, bee stings, and poison oak.

Vitamin C is being used in Scotland by Dr. Ewan Cameron who found that large doses prolonged the life of cancer patients otherwise given up as hopeless. Dr. Virginia Livingston of San Diego also used large doses of vitamin C as part of her program to bolster the immune system in cancer patients. Pain is thereby lessened, especially when there is bone metastases.

Statistical evidence of the value of the orthomolecular approach to medicine is somewhat hampered by the difficulty of selection of matched cases. However, in many instances patients can serve as their own controls, noting whether they are better or worse as the program is instituted or abandoned. Long- range epidemiological patterns of death and disease also are being recorded. For example, at Incline Village where people are managing their own vitamin C program, the overall statistics of illness as judged by sick leave and mortality may be significantly reduced after a period of five to 10 years. A comparable situation might develop with regard to patients requiring hospitalization because of mental illness, the need for which might be reduced after five to 10 years on an orthomolecular program. What is not helpful in evaluating the efficacy of orthomolecular medicine is a double-blind short-range study, because the challenge posed by so many variables is impossible to solve under short-term and general methods of observation.

(Please turn the page)

eration would be so great. Fred Hart had hopes of it, I'm sure, and I knew him quite well. Heard him in Seattle years ago, and kept him from his needed rest that night. He convinced me, and I've been in the National Health Federation ever since.

Betty Lee Morales talked me into a life membership years later. National Health Federation: One of the greatest things that ever happened to our good old U.S.A.!

EWARD HOWELL
Box 134, Sitkum Rd.
Myrtle Point, Ore. 97458

Dr. Spetz, Box 4682, Sacramento, engages in the practice of orthomolecular medicine in California's capital city.

CHIROPRACTIC CONVENTION AUGUST 20-21

The annual convention of the International Chiropractors Association, 741 Brady St., Davenport, Iowa, will be held Aug. 20-21 in the Sheraton Hotel in Rock Island, Ill., across the river from Davenport.

Research, chiropractic philosophy, and X-ray techniques will be discussed by the following speakers: C.H. Suh, professor and chairman of the Department of Engineering Design and Economic Evalution, and director of the chiropractic research program there, and his colleague, Dr. M. W. Luttges who will report on status of the project; Dr. Galen Price, administrator of Palmer College of Chiropractic; and Marvin Klaes, D.C.

International Chiropractic Youth will be involved in its own program, including a Saturday night dinner. Board of Control and Representative Assembly meetings have been set for the three days prior to opening of the convention.

ENERGY FAIR SLATED FOR PENNSY NFA

An extensive outdoor alternate-energy fair will be a part of the 23rd annual Pennsylvania Natural Food Associates' Convention July 23-24 at Susquehanna University, Selinsgrove, Pa.

Sponsored by the Pennsylvania Organic Farmer-Consumer Organization, speakers will cover such topics as healthful nutrition, herbology, nontoxic cancer therapies, and health spas. Workshops are scheduled on food preparation, and skin and beauty care.

To be emceed by NHF Executive Vice-President Clinton R. Miller, the program will include these speakers: Dr. John Christopher, Dr. Jacobus Rinse, Ted Black of Rodale Press, Beatrice Hunter, Dale Alexander, Dr. Philip Calahan, Tom Mansell, and Dick Raymond of Gardenway Publishing Co.

The California Orthomolecular Medical Society is not alone in its pioneering efforts. An almost simultaneous development has taken place on the east coast where the work of a pharmacologist, Dr. Carl Pfeiffer, has been used in monitoring the management of mentally ill patients. The east and west chapters of orthomolecular medicine have now been organized into the National Orthomolecular Medical Association. The aspect of orthomolecular medicine dealing with mental illness is the concern of psychiatrists of the Academy of Orthomolecular Psychiatry. Lay persons interested in this approach to the management of the mentally ill are affiliated with the Huxley Institute.

With the aspirations of those interested in orthomolecular medicine being supported by the California legislature, and the possibility Connecticut will be the next state to follow suit, there is increasing interest in both research and practice in orthomolecular medicine. The evolving study is one not likely to be for or against the orthomolecular system, but simply a refinement of the original concept to explain specific situations as aided by innovative laboratory tests.

INTERNATIONAL GROUP HEARS U.S. TEAM'S AGE, CANCER DEATHS, FLUORIDATION FINDINGS

The latest cancer-fluoridation research findings — these related to victims' ages — as developed by the research team of Dr. John A. Yiamouyiannis and Dr. Dean Burk was presented by Dr. Burk to scientists attending the Eighth Conference of the International Society for Fluoride Research May 29-31 at Oxford, England.

Their paper, titled "Fluoridation and Cancer; Age-Dependence of Cancer Mortality Related to Artificial Fluoridation," is a result of further work done on the research initiated by Dr. Yiamouyiannis, science director of the National Health Federation, in December 1974.

Dr. Yiamouyiannis was unable to make the trip because of an airliner's mechanical failure. He had been invited to report to Fluoridation Society attendees, following a reception at the start of the convention, on the paper he delivered last February to the American Association for the Advancement of Science discussing the unreliability of a statistic known as S.M.R. (standardized mortality ratio), widely used in analyzing mortality data. This was read at the meeting.

The Yiamouyiannis-Burk paper presented by Dr. Burk was among 29 presented by scientists from Finland, Switzerland, France, United Kingdom, India, the German Democratic Republic, Poland, and United States.

Fluoride Chromosome Damage Reported

Fluorides may have unforeseen effects in mice, a new study reports. Aly H. Mohamed, University of Missouri, Kansas City, reported at the American Chemical Society meeting an experiment in which mice received varying concentrations of fluoride, from 1 to 200 parts per million, in their drinking water. Food and water consumption by the mice reportedly declined as fluoride consumption increased.

Autopsies of the mice showed that frequency of chromosome breakage in bone marrow and testes also increased with fluoride dosage. Details of the study have not been published, but the report is being prepared for submission to professional journals, Dr. Mohamed told *Environment*. He said this was the first direct test of the effects of dietary fluorides on chromosome damage in animals, although the subject has been disputed for many years.

— Environment
(Nov. 1976)

CANCER CONVENTION

The Second Annual Cancer Victory Convention is scheduled for the weekend of Sept. 23-25 in the Mayflower Hotel, Washington, D.C. Sponsored by the Arlin J. Brown Information Center, the program will center on nutritional and nontoxic cancer therapies.

ALLENTOWN COUNCIL ENDS FLUORIDATION

The city council of Allentown, Pa., thanks to the effective "needling" of Manuel Roth, in mid-February voted to end fluoridation of the city's drinking water.

THE WELCOME MAT'S OUT TO THESE NEW NHF MEMBERS

PERPETUAL

Ted Manning
Miami, Florida

Loey Ringquist
Norwood, Colorado

Elizabeth Shafer
Ogden, Utah

Dorothy F. Lyons
Lakeside, Calif.

Dorothy B. Hart
Palm Springs, Calif.

W. H. Oliver
Bakersfield, Calif.

John D. Bowman
Los Angeles, Calif.

Robert L. Titus
Los Angeles, Calif.

LIFE

Anne E. Krick
Altoona, Pa.

Mr. and Mrs. William Faiss
Washington, Utah

Mrs. Nora Hula
Covina, Calif.

Duane and Judy Goltz
Drummond Island, Mich.

Russell and Jean Cousineau
Big Rapids, Mich.

William and Valorie Holcomb
Rockford, Mich.

Food For Life Baking Co., Inc.
Los Angeles, Calif.

Mrs. Florence C. Shivell
Palm Springs, Calif.

Mrs. Edna K. Brady
Fillmore, Calif.

Larry Newhall
Honolulu, Hawaii

H. L. Fisher, D.C.
Ontario, Calif.

Louis Menold
Los Angeles, Calif.

Mr. and Mrs. William B. Kowalski
Detroit, Mich.

Mr. Harry Wilson Hill, D.D.
Columbus, Ohio

Osmon Rohm
Long Beach, Calif.

Mr. and Mrs. N. B. Biggerstaff
Houston, Texas

John T. Claypool, D.C.
Bakersfield, Calif.

Ronald D. Peak, D.C.
Fennsauken, N.J.

Alan Grinnell
Lomita, Calif.

W. Richard Stamm
Avon, Conn.

Dorothy Trottier
Bellingham, Wash.

Mrs. Julia F. Utz
Santa Cruz, Calif.

Andrea Claire
Hollywood, Calif.

John R. Carruthers
Sedona, Ariz.

Malinda Schlarman
Fort Recovery, Ohio

Amy B. Rud
E. Grand Forks, Minn.

James Strickler
Mountville, Pa.

Randolph A. Parkell
Cut Bank, Mont.

Vaughn Paul Huppert Jr.
San Diego, Calif.

Robert A. Woodward
Chester, Mont.

Robert W. Woodward
Cut Bank, Mont.

Irvin K. Hauge
Chester, Mont.

Ann Hauge Parkell
San Diego, Calif.

Dennis H. Estabrook
Manhattan Beach, Calif.

Eldora Royse
Los Angeles, Calif.

Ruth Guynn
Harrison, Ark.

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

Unless otherwise indicated, address all officers and staff members: P.O. Box 688, Monrovia, Calif. 91016.
Telephone (213) 357-2181

Charles I. Crecelius — President and Executive Head of the Federation

Betty Lee Morales — Secretary

Dorothy B. Hart — Vice-President

Kurt W. Donsbach — Chairman of the Board of Governors

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

PAID FEDERATION STAFF AND THEIR FIELDS OF ACTIVITY

Clinton R. Miller—Executive Vice-President, in charge of Legislation and Regulations

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Helena Young — Assistant to the President, in charge of Wills, Estates, Gifts, Properties

Convention Bureau
Chapter Department
Carole J. Smith, Coordinator

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

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The expiration date of your membership is shown below your address. If it expires next month, please renew now, so that you will not miss a single issue of *The Bulletin*. This also saves NHF the expense of billing you. PLEASE NOTE: Renewing your membership under the same given and surname as the previous year, avoids duplication and error.
Thank you for your cooperation!

PLACE
13c 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

Northwest Regional — July 9-10
Sheraton-Portland — Portland

Midwest Regional — Sept. 10-11
Holiday Inn — O'Hare Kennedy
Rosemont (Chicago)

Southeast Regional — Oct. 8-9
St. Petersburg (Fla.) Hilton Hotel

HELP SAVE OUR HEALTH FREEDOMS