

National Health Federation

BULLETIN

**Dr. 'Y' Sues
Consumers
Union for
\$8 Million
On 4 Counts
of Libel**

THE CASE FOR HOME BIRTHS



H. SCHLOSSER

**Helmut Schlosser, Enjoined
from Practicing Obstetrics,
Says Naturopathic Approach
Superior to Orthodox Route**

**California Bears Down on Midwifery; One
Charged with Murder in Babe's Death**

**Doctors Who Refuse to Attend Home-Birth
Patients Are Guilty Ones, Say Some Mothers**

**Perinatal Drugs Can Be Dangerous
to Fetus Unable to Protect Itself**

HEAR 'EM—AND MANY MORE—AT 24TH ANNUAL!



MAX HUBERMAN



DR. PAAVO AIROLA



WILLEM KHOE, M.D.



GARY GORDON, M.D.

THE NATIONAL HEALTH FEDERATION BULLETIN

Protection of Health Freedoms

Published Monthly

Volume XXIV — Number 11

December 1978

CONTENTS

Humanitarian Award for Year Goes to Dorothy Bobby Hart	1
NHF Science Director Tired of Slander Against Reputation, Files \$8-Million Suit Against Consumers Union	2
Jersey City Council Ends Fluoridation After 3 Years	4
NHF Gearing Up for 'Greatest Yet' Annual Convention	5
New Law Won't Permit Diagnosing, Prescribing, Warns Ajay	6
Brown Praised for Signing Nutrition Counseling Bill	7
John Hofbauer's Bosses Want Him Out	8
Laetrile To Be Tested on Terminal Patients, Says NCI	9
Tour of Nontoxic Cancer Clinics Planned by I.A.C.V.F.	9
Childbirth Best Handled Through Naturopathic Techniques, Says Helmut Schlosser, Whose Practice Grew Too Big	12
Young California Lay Midwife Faces Murder Charges, But Babe's Parents Say She's Blameless	17
Noncooperative Doctors Blamed for Occasional Tragedies	21
Midwifery in Western Europe Works Well, Says Assemblyman	23
Some Startling Info on Prenatal, Perinatal Drugs	24
Connection Between Electric Grounding and Copper Pipes?	26
Silence from San Diego Sheriff on 'Anti-Quackery' Binge	27
Laetrile Deductible Where It's Legal, I.R.S. Rules	27
House Okays Bill Permitting Chiropractic 'Clinical Findings' to Substitute for x-ray Examinations	28
FDA on Warpath Against B-15	29
Davis Warns That Too Much Emulsified Vitamin A May Harm	29
Blue Cross Won't, But Several Texas Firms	

Cover Laetrile Claims	32
-----------------------------	----

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

Permission to reprint articles, with credit, is granted.

National Health Federation Bulletin, published monthly January through December, except July-August which are combined, at 212 West Foothill Boulevard, Monrovia, California 91016, by National Health Federation, a nonprofit corporation. Don C. Matchan, Editor. \$7.50 of the \$10.00 annual membership is paid as a yearly subscription to the National Health Federation Bulletin. Single copies, 50 cents. Second-class postage paid at Monrovia, California 91016.



IN RECOGNITION of the years of selfless devotion to the work of the National Health Federation, Dorothy Bobby Hart was awarded the Federation's Humanitarian Award for 1978. Shown here with NHF President Charles I. Crecelius, the plaque is inscribed: "... This heart of gold, for the labor of love you have freely given to humanity ... With sincerest appreciation from the Board of Governors and all members of the National Health Federation." Mrs. Hart works four and five days a week full time without pay. During the 1977 annual convention she became a perpetual member, presenting her check of \$1,000 to the Federation. She is a member of the NHF Executive Committee, and vice-president. Because of the illness of her sister, Mrs. Jean Dixon, Medford, Ore., she was there four months, but returned in October, accompanied by Mrs. Dixon.

Charging 'Malicious Defamation of Character'

DR. YIAMOUIYIANNIS FILES \$8-MILLION LIBEL SUIT AGAINST CONSUMERS UNION

In the four years since he's been science director of the National Health Federation, John A. Yiamouyiannis, Ph.D., has been subjected to verbal attacks from persons and organizations who resent his increasingly successful efforts to take fluoride out of the drinking water of 100 million Americans.

He's been slandered by amateurs and pros, and, though not exactly welcoming the brickbats, has ignored them and used his time fighting fluoridation rather than detractors.

But when Consumers Union, publisher of the 2-million-circulation monthly magazine *Consumer Reports*, carried a sophisticated hatchet job on his work, and denigrated the expertise of reputable scientists whose laboratory studies provide a basis for the contention that fluoride kills not only rats but people — and when he was accused in the articles of "promoting one of the greatest triumphs of quackery over science in our generation," 'Dr. Y.' as he is known by NHF members, said he'd had enough. Assured by knowledgeable attorneys that indeed he and Dr. Dean Burk have a valid cause for action — in laymen's language, "a good case" — he wasted no time in filing a libel suit against the Mount Vernon, N.Y., consumers' organization.

First, of course, he asked for a retraction — the right to respond via *Consumer Reports* — to the attacks on his professional competence and character. The request refused, the lawyers drafted the complaint filed October 6 in U.S. District Court for the Southern District of New York. The action lists four counts of libel, and he's asking for \$2 million on each count — a total of \$8 million. Representing him are Attorneys Paul Stephen Beever, 781 Old Country Rd., Plainview, N.Y. (Mr. Beever is attorney for the New York Antifluoridation

Committee); John Remington Graham, 224 North 5th St., Brainerd, Minn. (Mr. Graham was the brilliant chief legal counsel in the "Pittsburgh case"); and the astute veteran freedom-fighter and NHF general counsel, Kirkpatrick W. Dilling, 188 West Randolph St., Chicago.

After pointing out in the general allegations that Dr. Yiamouyiannis "has relied upon numerous laboratory studies by Drs. Alfred and Nell Taylor, Drs. I.H. Herskowitz and I.L. Norton, and Dr. Aly Mohamed, among others, showing that low levels of fluoride in water can cause or accelerate cancer tumors, and genetic damage in experimental animals, insects, and plants under controlled conditions," and that he and his co-worker, Dr. Burk, "one of the most highly-decorated cancer research scientists in the world, have confirmed the laboratory studies by way of epidemiology, showing the fluoridation and cancer-death-rate-experience of 18 million Americans over 30 years," the complaint lists the "defamatory claims (made by *Consumer Reports*) against the plaintiff, either prima facie or by inducement and innuendo," and then responds to them.

Patently false, the complaint charges, are the "defamatory claims" by Consumers Union that: (1) Dr. Yiamouyiannis' research revealing a link between fluoridation and cancer was "demonstrated in Congressional hearings to be grossly and irresponsibly misleading to the American people"; (2) that fluoridation of public water supplies "has been proven to be absolutely and unquestionably safe"; (3) that Dr. Yiamouyiannis was "hired by the National Health Federation to discredit fluoridation," and that in accepting this employment, he "sold his scientific integrity and objectiv-

ity in order to contrive a deliberately false case against fluoridation. . . .";

(4) That his work on the fluoridation-cancer link "consists of desperate scare propaganda, does not constitute a serious scientific effort, was not prepared for publication in a reputable scientific journal, is emblazoned with slogans without cautious interpretation or restrictions, lacks even a sincere effort to be objective, is full of obvious and pervasive bias together with gross and naive mistakes of logic, is generally incompetent in point of epidemiology, amounts to an effort to lend credibility to claptrap, can be refuted by anyone with a library card, and does not consider age, race, sex, and other fundamental risk factors which elementary principles of epidemiology require";

(5) That his work was shown to be "groundless by the National Cancer Institute, the Royal College of Physicians, the Royal Statistical Society in Great Britain, and several other organizations in the English-speaking world"; (6) that Dr. Yiamouyiannis and Dr. Burk, "in order to offset the complete refutation of their work, for malicious political reasons have insisted both in America and Europe that fluoridation is mass murder, and that the National Cancer Institute was engaged in a public coverup thereof"; (7) and that "colleagues of the plaintiff in the medical and scientific worlds who agree with him are also men of no credibility or honor, and that the plaintiff shares their ignominy."

"All these claims are false and untrue," continues the complaint, which states: "It was demonstrated at the 1977 hearings before the subcommittee of the House Committee on Government Operations that the critics of Drs. Yiamouyiannis and Dr. Burk had in fact made errors in tabulation and failed to consider most of the available data, and that when these errors and omissions are corrected, the so-called refutations of the National Cancer Institute and others actually confirmed the

IT'LL TAKE MONEY!

It's going to take money to finance the legal costs of the libel action, and NHF members or friends who wish to lend a hand may send contributions to the National Health Federation, P.O. Box 688, Monrovia, Calif. 91016.

The Coalition for Pure Water in Allentown, Pa., according to Coordinator Emanuel Roth, is soliciting funds for that battle among its members. Referring to the *Consumer Reports* articles "which promoted the party pro-fluoridationist line with distortions, misrepresentations, and deplorable attempts of character assassination," Mr. Roth told CPW members, "we need your help. We must not allow such libel to stand unchallenged. . . ."

fluoridation-cancer link; and that the NCI sent their erroneous and omisive data to the Royal College of Physicians and the Royal Statistical Society which copied the errors and omissions and were perpetuating them, creating a false appearance that (the NCI) studies constituted an independent confirmation."

On the contrary, continues the complaint, in the case of Aitkenhead v. West View, Pa., (tried between March and September in the Allegheny County Court of Common Pleas), "efforts to impeach" the work of Dr. Yiamouyiannis and his colleagues, "were not only unsuccessful, but backfired so as to confirm that fluoridation . . . is certainly unsafe for humans. . . ."

"Though many have tried to criticize, the fluoridation-cancer link remains unrefuted and unimpeached . . . it was shown that the case of the National Cancer Institute against the fluoridation-cancer link was erroneous at least, and probably willfully fraudulent . . . (and) the National Cancer Institute was in fact trying to cover up the . . ."

link, and this may well constitute genocide, contrary to the Law of Nations. . . .

"The defendant published the libel in the actual knowledge of the coverup by NCI of the fluoridation-cancer link, and with the spiteful purpose of seeking to destroy the well-earned reputation of the plaintiff . . . (and) in any event published with reckless disregard for the truth of the career of the plaintiff and his work, as well as his fierce courage, scientific message, his humility, and his honesty. The defendant published the libel with condescending disdain for the personhood of the plaintiff, or the importance of truth, or both . . . to create a hostile political climate, thus seeking to influence popular opinion, the judgment of courts, and the acts of agencies of government in relation to fluoridation, without regard to the facts, or the honor of the plaintiff."

Demands for the retraction have been refused, the complaint continues, and "as a consequence of the malicious libel . . . the plaintiff has lost much of his good name and reputation in the eyes of professional colleagues in science, and of his fellow countrymen to whom he has something important to say. He has suffered personal anguish, been humiliated . . . and rendered doubtful in the eyes of the public whom he serves and must convince in legal, scientific, and political discourse. He has lost time from research, and incurred much per-

sonal expense to defend himself. . . ."

In response to the *Consumer Reports* inference that scientists who agree with Dr. Yiamouyiannis "are also men of no credibility or honor" — such individuals as Dr. Mohamed, Dr. Waldbott, Drs. Taylor and Taylor, and Drs. Herskowitz and Norton — the NHF science director points out that "the work of Dr. Mohamed showing that fluoride is mutagenic is confirmed widely in the scientific literature, and has never, anywhere, been impeached or refuted. The efforts to show fluoride is not mutagenic actually show, if anything, that fluoride causes genetic damage." And the work of Dr. Waldbott "is triumphantly sound, unimpeached, and unrefuted by any authority in the medico-scientific world. . . ."

In response to the *Consumer Reports* statement that the work of Dr. Taylor is "no good because of experimental misdesign and miscalculated fluoride content of water used in the experiment," the complaint states that "the work of Dr. Taylor was well-controlled according to exacting requirements of laboratory science, is published in reputable scientific journals, and is confirmed directly in the world literature."

The work of Drs. Herskowitz and Norton "shows the tumorigenic potential of fluoride, which yields a fair inference of possible carcinogenic potential of fluoride," continues the complaint in the fourth count for damages.

leadership of Miss Grace A. Edge, 180 Ege Ave., Jersey City, were submitted to the council, and before the vote was taken, the City Dads heard arguments pro and con from local dentists, health department officials, and from professionals including NHF Science Director John A. Yiamouyiannis, Ph.D., who presented scientific evidence on the health hazards of sodium fluoride in drinking water.

JERSEY CITY COUNCIL ENDS FLUORIDATION

By a 5-4 vote, the Jersey City, N.J., City Council in mid-September voted to terminate fluoridation — initiated by the council in 1975. Whether the ban is permanent may be in question, however, since some members mentioned the possibility of placing the issue on the November ballot.

Signatures of hundreds of Jersey City residents, gathered under the

'GREATEST YET' CONVENTION — NHF'S 24TH ANNUAL — PREDICTED BY GOLDMAN

BY ALLEN T. GOLDMAN
Convention Manager

The multitude of plans and arrangements are beginning to take shape for the National Health Federation's 24th Annual Health and Energy Convention January 19-21 in Long Beach, Calif. Being billed as a "World's Fair of Health, Nutrition, and Beauty," it promises to be the most exciting consumer-health-education event in NHF history.

For the first time in three years, the Federation is moving out of Pasadena, south to Long Beach, to the only convention facility on the West Coast located on the Pacific Ocean — the fabulous and recently-renovated multi-million-dollar Long Beach Convention Center at 300 East Ocean Blvd.

Considered one of the most modern and comfortable convention sites in the world, the Center will accommodate more than 300 healthful exhibitors and 100 speakers covering the wide range of philosophies in wholistic healing and preventive health-care. The Queen Mary and Hilton Hotels have been designated official hotels for this convention. NHF attendees will receive special discount rates at these hotels. Make your reservations now. A shuttle bus service to and from the Convention Center to the hotels will be in daily operation.

Although when this was written (Sept. 27), the speakers' roster had not been completed, we have confirmed many — some familiar to perennial NHF convention attendees, some new.

Among those presently slated to appear on the program are:

Dr. Harold W. Manner, chairman of the Biology Department, Loyola University, Chicago, who will discuss the 70% regression of breast cancer in mice demonstrated in NHF Memorial

Library-financed research, and the latest study he is doing with a second Memorial Library grant of \$15,000: "The Mechanism of Action of Amygdalin, Vitamin A, and Enzymes in Mammary Tumor Regression."

Dr. Paavo Airola, internationally-acclaimed nutritionist; Betty Lee Morales, secretary of the NHF Executive Committee, and president of the Cancer Control Society; Garry Gordon, M.D., Sacramento, specialist in chelation therapy.

The anti-aging experts — Dr. Hans Kugler, Dale Alexander, and Corwin West — who will discuss the major ingredients for remaining young and vital.

Willem Khoe, M.D., Sun Valley, Calif., well-known acupuncturist, who will conduct demonstrations.

Dr. John Christopher and Stan Malstrom, two of the nation's foremost herbalists, will speak on the latest research in regenerating the body with herbal remedies.

David Barton, recently-named editor of *Let's Live* Magazine, will moderate a panel of the country's leading doctors. *Let's Live*, under Mr. Barton's editorial direction, has vastly improved and greatly expanded its horizons.

Tom Hayden, Governor Brown's representative to examine new energy sources, will be featured on a panel dealing with nuclear energy.

Metabolic therapy as related to Laetrile will be explored by a panel of specialists including Ernst T. Krebs, Jr., John Richardson, M.D., Charlotte Gerson Strauss, and Dr. Manner.

Robert Mendelsohn, M.D., a dynamic preventive-medicine advocate, family physician and pediatrician, chairman of the Illinois State Medical Licensing Board, whose thrice-weekly column, "People's Doctor," is syndicated by the Chicago Tribune-New York News Syn-

Nutrition-Counseling Bill 'Giant Step Forward,' But — AJAY CAUTIONS HEALTH-FOOD RETAILERS TO NEITHER PRESCRIBE NOR DIAGNOSE

The passage, and subsequent approval by Governor Jerry Brown, of the California nutrition-counseling bill (S.B. 1790) was described by National Nutritional Foods Association President Dave Ajay as "a giant step forward."

In a letter to NNFA members, Mr. Ajay noted that the organization had "been working for many years to set up programs in the various states that would obtain the right of freedom of speech for health-food retailers as maintained by our Constitution."

He gave credit to Senator William Campbell for introducing the measure, and to Sacramento health-food retailer Georganna Elliott "who chose to fight in court what she thought was an unfair citation for 'prescribing medicine without a proper license' under Section 2141 of the California State Business and Professions Code."

Mr. Ajay also cautioned members that health-food store personnel still must be careful of the language used when talk-

ing with customers about the uses of vitamins, minerals, and herbs.

"You still cannot say any more than before . . . when it comes to responding to questions concerning ailments or specific conditions of disease in the human body," he wrote in a newsgram to members.

"There still remain stiff penalties under the State Food, Drug, and Cosmetic Act, as well as under federal law, to preclude our giving advice in such matters. . . ."

"So please do not go beyond what we have advocated before. Let us cooperate in every way . . . and we shall be further ahead. . . ."

Meetings were held in late October by the regional NNFA organizations in Northern and Southern California at which the chief of the California State Bureau of Food and Drugs gave information on existing statutes dealing with such issues as "prescribing," and "diagnosing."

dicating, will be on the program. In June, 1976, Dr. Mendelsohn started advising his readers not to take swine flu shots. He opposes fluoridation. He is administrator of the preventive-medicine-oriented Zion-Benton Hospital, Zion, Ill. A teacher at the University of Illinois Medical School, he has encouraged many students to join the ranks of preventive-medicine practitioners. He is consultant to the Illinois Departments of Public Aid and Mental Health, the Council on Aging, La Leche League, Cystic Fibrosis Foundation, and the Maternal and Child Health Association.

Victories and battles on the fluoridation front will be highlighted in lectures by NHF Science Director John A. Yiamouyiannis, Ph.D., who in all likeli-

hood will discuss some of the fine points of the now-famous "Pittsburgh Trial."

A Freedom Fund Auction and a Surprise "Celebrity Roast" will be conducted by Max Huberman, accomplished humorist, past-president of the National Nutritional Foods Association, and its director of Consumer Affairs.

There will be exciting samples, door prizes, delicious natural foods to satisfy your hunger, and a film festival. Don't miss the most exciting health convention of the year, and the chance to absorb knowledge from top health specialists who will share their latest information to help you feel, function, and look your absolute best at all times!

Crecelius Lauds Brown for Signing S.B. 1790

In a letter to Governor Jerry Brown dated Sept. 28, NHF President Charles I. Crecelius, "on behalf of the officers, members and friends of The National Health Federation," expressed "deep appreciation" for his signature on S.B. 1790.

"We are especially pleased," he said, "that you chose to sign this vitally-needed legislation rather than let it become effective with no action on your part."

"We realize, of course, that much education and clarification of the provisions and limitations of the Nutrition Advice Bill needs to be done, yet we are grateful that the opportunity to promote personal responsibility for health — as opposed to disease — is now before us."

"Vigilance of and for the right of freedom of speech for health-food retailers and educators must now be the watchword."

LET'S DO IT IN OTHER STATES!

NHF President Charles I. Crecelius suggests that "constructive legislation" such as S.B. 1790 be pushed in other states by National Health Federation chapters. Copies of the bill may be obtained by writing the Federation.

"California has adopted pilot legislation — some of it 'bad,' some of it very worthwhile and advanced," he said. "The nutrition counseling bill certainly falls in the latter category. NHF chapters would perform a real service by initiating similar legislation in other states. If such bills are introduced and move as expeditiously as did S.B. 1790, we would be glad to lend assistance by alerting members in the state to the need for supportive communication — letters, phone calls, mailgrams — to legislators and/or governors."

Suggestions for Nutrition Commission Membership to Gov. Brown from NHF

Whether any of the persons will be selected remains to be seen, but NHF President Charles I. Crecelius has submitted the names of eight individuals whom he suggested to California Governor Jerry Brown as possible nominees for the recently-created Commission on Food and Nutrition.

On the list were W. D. Currier, M.D., Pasadena; Dr. Kurt W. Donsbach, Huntington Beach; Mrs. Ruth M. Harmer, Ph.D., Los Angeles; Garry F. Gordon, M.D., Sacramento; Mrs. Wena Dows, nutritionist, Culver City; Dr. Stig Robert Erlander, Pasadena; Granville Knight, M.D., Santa Monica; and Betty Lee Morales, nutritionist, Topanga.

Mr. Crecelius commended the governor for the executive order, signed by Acting Governor Mervyn Dymally, creating the commission — "a significant step toward informing Californians of the vital role good nutrition plays in promoting and maintaining better mental and physical health for everybody."

The governor's office has advised NHF that the appointment of Commission members and administration of its activities is a responsibility of the Lieutenant Governor.

75% OF ADULT SMOKERS started before age 21, 90% before age 25.

Supreme Knight Doesn't Like NHF Thank-You-Grams Faced With Loss of Income, Hofbauer Describes Employer As 'Vindictive'

As if he hasn't been through enough — trying to keep his son, Joey, from falling into the clutches of a state-medico bureaucracy that disdains nutritional therapy for his son, Joey — John Hofbauer now finds his income threatened as a result of top-level management decisions by his employer, Knights of Columbus Insurance.

Mr. Hofbauer told *Public Scrutiny* that instead of sympathetic understanding about his extended hassle over how his son is to be treated for Hodgkins disease, he has had an opposite reaction from superiors.

He has been asked to resign as head of his district — and this despite the fact he has been a top producer. In 1976 he was voted "Agency Builder of the Year," and in 1977, he met 100% of his quota.

In December last year he was asked by Agency Director Joseph Mauro to resign. In January, when he was at 99% of his quota, he was again asked to step down. Not one to accept this kind of treatment, he told his bosses he would not resign, and that unless he were treated with more consideration, he would "go public," and/or sue.

When he refused to quit, his superiors revamped his territory, and in so doing, he lost his most effective sales agents.

His letters of protest have been ignored, as well as communications from his attorney to Knights of Columbus Insurance, he said. "I have told them that by denying me the financial ability to take care of Joseph, and if they continue their vindictive action, I will hold them personally responsible in event of his death."

There seems to be little doubt that Mr. Hofbauer's refusal to be cowed has had a bearing on the decision to curtail his income. He told *Public Scrutiny* that after Judge Leslie Brown had ruled that

Joey could continue on nutritional therapy, he was called into Mr. Mauro's office and told his district had been altered.

Later he met with the Supreme Knight, the Supreme Secretary, and the Supreme Physician (a medical doctor), and "they were sitting in the office with a sampling of the 6,000 NHF Thank-You-Grams. Without directly telling me, they asked me to have NHF turn it off. 'If the Thank-You-Grams keep coming in,' said Supreme Knight Virgil Dechant, 'I will have to disavow you, because it says I favor Laetrile . . . we are very concerned with the volume of these things coming in.'

"I told them I had Ok'd it — my job was in jeopardy and I was being punished — that they were trying to get rid of me because of my position on this."

Shortly after this session, Mr. Hofbauer was told his top insurance salesman had agreed to become a general agent, taking Mr. Hofbauer's field agents. Mr. Hofbauer collects commissions now only on previous sales, "and that income is running out."

To be nearer Joey's physician, the Hofbauers moved to New Jersey, and this costs an extra \$500 a month. In addition, he must pay between \$1,000 and \$2,000 a month to continue the child's treatment. He has borrowed money to keep going, but if deprived of his monthly income, the family faces disaster.

MEMBERSHIP PINS

Are you proud of your NHF membership? And you'd like to "tell the world" you belong to an organization that stands for health-rights freedom? The Monrovia office has replenished its supply of attractive membership pins, and they sell for \$1.50 plus 35¢ handling charge.

NCI Agrees to Test Laetrile in Cases Where Conventional Treatments Failed

Fifteen years after it was first asked to test Laetrile on humans, the National Cancer Institute says it will — on at least 300 patients who have tried "all other known therapies" without success.

According to NCI Director Dr. Arthur C. Upton, the agency will contract with medical centers around the country where new cancer treatments are tried under grants from the Institute.

The NCI director said he believed there would be "no shortage of patients" willing to give Laetrile a try, and that he would "not rule out the possibility of looking at combinations" of Laetrile used with high-potency vitamins.

Dr. Upton told the press that "repeated tests in animals have produced no evidence" that Laetrile can reduce the size of tumors, an indication that those tests did not include the use of Wobe Mucos enzymes and high dosages of emulsified Vitamin A — the combination Dr. Harold Manner has

found effective in mammary tumors in mice.

The NCI made the decision to test the controversial substance — probably because of the public pressure which has been generated for tests, and the fact Laetrile has been legalized in 17 states. It needs the okay of the Food and Drug Administration — long a foe of Laetrile — and FDA Commissioner Donald Kennedy noted that while he does not believe NCI's review of 22 Laetrile cases (upon which the decision was made to conduct human tests) "demonstrates any effectiveness of Laetrile," he added that "there are other reasons we all recognize that a controlled clinical trial might be desirable, and NCI has been persuaded by them."

Dr. Upton said tests would involve groups of 15 to 30 patients with one of 10 different types of cancer. Tests, lasting about six months, would not start before early next year, he said.

IACVF PLANS NONTOXIC CANCER THERAPY TOUR

The Orange County Chapter of International Association of Cancer Victims and Friends will sponsor a bus trip to Mexico Dec. 2, Marilyn Berkowitz, president, announced.

She said she has "challenged" Assemblyman Dennis Mangers of Huntington Beach, Calif., to make the trip which will include visits to the Bio-Medical Center in Tijuana where the Hoxsey therapy is available, a luncheon stop at the Gerson Institute, and the Contreras Clinic where Laetrile therapy is available. Mr. Mangers has accepted, she said.

Other Assemblymen who voted against legalizing Laetrile in California

have been invited, as well as those who voted for it. Among medical doctors who have expressed the intention of making the trip is Bruce Halstead, M.D., of Colton. A charge of \$25 will include a breakfast snack.

Ms. Berkowitz was instrumental in setting up a Cancer Seminar at Golden West College early in September, and plans one at Cal State, Fullerton. Various approaches to cancer control are explored, including state regulation, and alternative and innovative approaches to cancer therapies: Vitamin C, immunotherapy, Laetrile, nutrition, visual imagery, the metabolic route. Conventional therapies will be discussed at a future seminar, she said.

But Really — What Else Could He Expect?

Doctor Thinks AMA Should Support, Not Reject Dietary Nutrition Goals

A Laguna Hills, Calif., physician was disappointed in the American Medical Association's opposition to the dietary goals of the McGovern Committee, and said so in a letter-to-the-editor of the *AMA News*.

"In your excellent editorial (*AMN*, Jan. 9), you described the 'Dietary Goals for the United States' and stated that the AMA rejected them. This letter is to express my great disappointment with the AMA decision, and for these reasons:

"The Dietary Goals were prepared by experts in the science of nutrition, for publication by the Senate Select Committee on Nutrition and Human Needs. The object was to improve the health of the American people by presenting a better tissue-building diet, based on discoveries in nutrition and medical sciences during the past 50 years.

"I agree with these statements by D.M. Hegsted, professor of nutrition,

Harvard School of Public Health (*Dietary Goals for the United States*, page 3, Feb. 1977, U.S. Government Printing Office):

"What are the risks associated with eating less meat, less fat, less saturated fat, less cholesterol, less sugar, less salt, and more fruit and vegetables, unsaturated fat, and cereal products — especially whole-grain cereals? There are none that can be identified, and more important benefits can be expected."

"We of the AMA (and other MDs) need to tell our patients and the public what foods to select. The Dietary Goals, and the AMA's endorsement of those goals, would stimulate and help us in these endeavors."

(Ed. note: Well said, Doctor! But you weren't really surprised at the AMA position, were you?)

Instead of Emphasizing Sickness, Why Not a University Nutrition Department?

Instead of using the entire appropriation for DIMER (Delaware Institute for Medical Education and Research), C. Henrie Woollen, 1218 Gilbert Ave., Wilmington, Del., suggests that half of the money be used to fund DINER (Delaware Institute for Nutritional Education and Research).

The idea was proposed following an editorial feature in the *Sunday News Journal* asking if the state should fund medical education in Delaware.

Mr. Woollen responded in letters to Senator Anthony Cicione and John Jenney, Delaware Postsecondary Educa-

tion Commission, both advocates of DIMER. Said Mr. Woollen in part: "I agree that DIMER must be continued. People are sick. They need the services of a qualified physician. However, as Dr. Elvin Eden reminded us in *Family Weekly*, if we eat the proper food we will suffer much less sickness. Then if we have less sickness we should need fewer doctors. . . . Let's take whatever amount will be approved for DIMER and divide it between DIMER and DINER. Instead of creating a 'task force to determine the feasibility of establishing a school of medicine at the University of

AMA RESOLUTION TACKLES ALCOHOL PROBLEM

During its closing session in St. Louis in June, the House of Delegates of the American Medical Association adopted a resolution recommending that containers of alcoholic beverages be required to contain this warning: "Alcohol may be injurious to your health, and if

consumed during pregnancy, to the health of unborn children."

The resolution, submitted by Dr. Rogers J. Smith, American Psychiatric Association delegate, said clinical and experimental evidence was established that alcohol consumption produces "untoward physical and social consequences," and that alcohol-related diseases and mortality rank high among the nation's major health problems.

MARYLAND SCHOOL OPTS FOR BETTER NUTRITION

Following approval last year by the Prince George County Board of Education in Maryland, certain a la carte school cafeteria food items have been replaced with more nutritious ones. Items with a high caloric or carbohydrate content and little protein or other food value have been phased out, along with vending machine products and soft drinks during lunch time. The superintendent also was considering adding a unit on nutrition to the science curriculum.

Delaware, let's create a task force to instigate and establish a School of Nutrition which will teach the principles and details of proper nutrition.

"Dr. Eden tells us 'the typical American family is not well fed. . . . Our meals are far too high in calories, fats, carbohydrates, salt and sugar. . . . The diet of most American youngsters is awful, and parents must do something about it. Eating healthfully is a learned skill. Parents must teach their children what to eat, making eating habits so ingrained they will continue for the rest of their lives. The entire family must work together. Children learn by example. It is impossible to teach good nutritional habits to youngsters unless the parents take the lead. Many school-lunch programs are a disgrace, and junk food vending machines are all around. But since the stakes are high, you must make the effort.'"

BEQUESTS AND GIFTS

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

"I give, devise and bequeath to The National Health Federation, a nonprofit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of _____

(\$ _____)

(and/or property herein described) for its discretionary use in carrying out its general aims and purposes."

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

"The National Health Federation, a nonprofit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of _____ (\$ _____)

for its discretionary use in carrying out its general aims and purposes."

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

He Was Becoming Too Popular — So They Stopped Him

NATUROPATHIC APPROACH IN CHILDBIRTH SUPERIOR TO MEDICAL, SAYS SCHLOSSER

Normal childbirth should be under the guidance of a naturopathic physician, not a medical doctor, believes Helmut Schlosser, N. D., obstetrics, Mount Messiah Episcopalian Health Care Center, Inc., 1425 No. Rodeo Gulch Road, Soquel, Calif.

For 10 years Mr. Schlosser has been involved as a non-medical obstetrician in a system of natural, and homeopathic health care, involved in 600 to 700 deliveries. In the three years prior to August 4, 1977, he delivered 300 babies, 291 at home, nine in the hospital. Of this number, none died during delivery; 3 were stillborn, as compared with the national average of 6 deaths per 300 deliveries.

During July 1977, he delivered more than half the number of babies born in Watsonville (Calif.) Hospital. That, he believes, may have been the reason the State of California filed charges against him for practicing medicine without a license.

Of course, Mr. Schlosser doesn't believe the birth process is or should be a prerogative of medical doctors. "If having babies is not a matter involving pathology, which it is not," he says, "procedural medicine will never ever meet the requirement leading to a better birthing experience, however important it will be as a standby alternative in case of emergencies. Normal childbirth should be under guidance of a naturopathic physician, which would guarantee a closer working relationship with birth-attending midwives who are more closely oriented toward natural and home-centered health-care."

That his arrest was motivated by the growing number of mothers who sought out the services of Helmut Schlosser (whose wife Veronica teaches mothers-to-be the exercises and tech-

niques preparing for natural birth — her story was published in *Prevention* in 1972), is a strong likelihood. And Mr. Schlosser does not believe it was coincidence that shortly after delivery of a stillborn child, he was faced with an injunction to cease his practice.

"The court denied, when challenged, that this case had anything to do with the restraining order (which should have been reserved for only extreme judicial emergencies)," he says. "Therefore the case was used to arouse public emotion, implying that my work was illegal and dangerous."

TRACK RECORD

His track record, he points out, is "four to five times as good as the national average for birth mortalities. This should make most medical institutions throughout the country more subject to injunctive action than me!"

"However, since the restraining order was issued shortly after our reporting of the Nelson stillbirth — which was at no time ever concealed from authorities and was reported within four hours after it occurred — the painful fact remains that I was judged guilty before I could prove my innocence. . . .

"My July record for homebirths . . . might very well serve as a documentary to three facts:

"That my popularity and quality of work simply became 'too good.'"

"That if women could have their right of choice, conservative medicine might be losing a \$200-million-a-year industry in California.

"That the medical monopoly cannot win except by suppressing and disregarding popular demand through dictatorial force."

His work was "accessible to everyone," he says. While avoiding ad-

vertising, news of his techniques and successes spread, and he found himself serving clients not only in California but in Washington, Oregon, Texas, and Utah.

He says he was told in 1976 by Santa Cruz County District Attorney Chris Cottle that his practice was "exemplary, and well suited as an alternative to hospital obstetric care."

In some cases he performed prenatal care only, the couples arranging for midwife deliveries. About a third of his practice remained in the area of non-pathological care of fertility and female health supportive measures. Joined by his wife and other instructors, couples received "top education in all fields of health care, nutrition, vitamin and mineral supplementation, diet, and exercise programs."

He worked for enactment of S.B. 674, a bill to license naturopathic physicians — a measure which eventually died in Committee. He also was interested in A.B. 1896, a bill to license midwives. He is compiling material for two books: *Glandular and Mineral Balance During Pregnancy*, and *Naturopathic Fertility Treatments*.

He has successfully guided clients, in nine out of 10 cases he says, in overcoming sterility. Instead of hormones, he "would consider the women's general health, observe her eating habits, determine the toxic intake, test for glandular balance, then educate her about what she can do to attain a greater degree of health. This might include cleansing fasts, dietary restrictions, exercises, and addition of vitamin and mineral supplements vital to glandular balance. I would also counsel her to detect possible tensions and stress situations in her life, and follow her through a corrective program, being fully assured that even a negative outcome would still result in a better degree of health." He has learned that in nine of 10 cases, pregnancy occurs under such a regimen.

NOW, HE SAYS, HE'S 'GLAD IT HAPPENED'

Helmut Schlosser, a devout Christian, believes now that the injunction preventing him from practicing obstetrics was "the work of the Lord," and he is "very grateful it happened, because three very important things have taken place since then:

"1. I have been able to finish my education.

"2. I have been able to complete the designing and production of an advanced birth- and life-support system, equipped with an electronic fetal monitor, for use in deliveries in areas outside the normal delivery room.

"3. I think I have discovered a way of delivery that makes the presence of the father even more important."

'NATURE'S WAY'

"The same is true in health-care needs during pregnancy where diagnosing never becomes the issue, but a philosophy of detection and observation is practiced, and corrective plans implemented based solely on use of totally harmless, natural substances. Yeast infections, bladder infections, kidney stress symptoms, liver weaknesses, muscle cramps, indigestion and headaches, rashes — I could go on and on — can be handled in a completely natural way. . . . And this philosophy extends into labor. Relaxation, glandular support of blood sugar levels, for instance, can be attended to through natural means. Delivery through good preparation as well, leaving mother and baby always in top health.

"Through this clear-cut, safe approach, I feel the home with its lack of medical disaster equipment can obtain the same safety provisions as the hospital, yet offers a much higher degree of

comfort to mother and family, and a total lack of foreign incompatible germs, so common in hospitals. Spending often as much as 12 times the amount of counseling time as compared with a medical physician, potential hazards can be practically entirely eliminated. Not once in 10 years did I have to refer a woman to the hospital for reasons of development of toxemia, pre-eclampsia, or hypertensive disorders, some of the common birth pathologies.

"The followup work that extends in many cases over several years has been the most encouraging part of my practice," Mr. Schlosser continues. "Newborns, in fact, benefit most from my efforts to determine the needs of each individual mother-to-be, filling those needs through use of vitamins and mineral supplementation, diet recommendation, exercises. I have had an almost 100% return of favorable comments from parents who underwent my health-care program, with mothers and babies in top health.

"During pregnancy, a time period of often six months is available to the physician to observe and correct health irregularities. Childbearing women are eager to learn to care for themselves, since their prime concern lies in protection of their baby. They are the finest and most cooperative clientele any physician could wish for. To neglect them at this important time is unforgivable.

"Medical care, without realizing this, cannot meet their needs because the medical physician is trained to diagnose and treat pathology, and often is ignorant in the areas of preventive, and natural health-supportive measures. This is where the patient's discontent toward the medical health profession originates. During pregnancy this is worsened by a lack of concern for psychological changes occurring in a pregnant woman, and by introducing a fearful anticipation of an uncertain delivery procedure, either through her physician or a subordinate nurse-midwife. In

my opinion, this impasse will never be overcome as long as natural childbirth is under the auspices of the conservative medical society and its system of examination. . . ."

PRENATAL CARE

Mr. Schlosser's system of naturopathic prenatal care includes these phases: At first contact with the couple, answering basic questions and counseling on specific problems. Questionnaires are filled out dealing with obstetric history, and with "customary food intake over a period of time." The couple is given "warning sheets, and they are encouraged to carefully decide about the type of obstetric care they wish to employ."

Two or three weeks later, after the second visit, the expectant mother starts on her health-care program. Meanwhile, laboratory reports have been obtained. Obstetric history, food intake, living habits and lab test results are then discussed with the couple. Another hour is devoted to outlining the pattern of their future way of life, aiming for an improvement of her health picture.

"I extensively discuss the content and timing of meals, ways and means to better detoxify the system," he says. "In comparing some of the values from blood and urine test results, I make recommendations of homeopathic and naturopathic preparations, based on the specific needs of each person. I then discuss with them the use of vitamin and mineral supplements, gauged only to fill these needs. I do not believe in random supplementation.

"Reevaluations are made after four weeks, and eight weeks, and a second blood test is made at the end of 12 weeks. For this reason I prefer not to work with persons who are past their fifth month of pregnancy. As more time is spent in communication with the couple during the prenatal period, it is possible to counsel with them on many personal issues that may be important in their lives.

'BIRTH' Declares Right of Parents to Choose

An outgrowth of California's injunction against Helmut Schlosser's practice of obstetrics is the formation by supporters of an organization known as "Birth Is Returning to Home (BIRTH), 1655 Laurel Glen Rd., Santa Cruz, Calif. 95065. Its first newsletter says it was organized to "fight for a naturopathic alternative." Membership is \$2 a year.

"We are a nonprofit organization of parents, consumers and interested citizens striving to bring freedom of choice back into childbirth and health care," said the newsletter. "We believe parents should have the right to choose what type of health care and delivery of children they want, and that health care should have available alternatives to the standard medical philosophy. We believe naturopathic childbirth at home can be a safe alternative that produces healthy babies and mothers, while preserving dignity and individuality."

The organization is committed to work for legislation permitting freedom of choice in "all areas of health care, including pregnancy," and for legislation providing for the practice and licensing of naturopathic physicians "in cooperation with, but primarily separated from traditional medical practices and controls"; and education of the public "on the safety and beauty of homebirth when competent naturopathic prenatal care is provided that avoids chemicals and other unnatural intrusions to normal body functions."

"Naturopathic medicine," continues BIRTH, "follows a system of observing the natural processes and aiding their functioning, using natural means such as nutrition, vitamins, exercise, psychological counseling, massage.

"Allopathic medicine follows a system of diagnosing imbalance in the chemical systems of the body and rebalancing them through the addition of unnatural chemical substances. It also follows, in most instances, a system of treating the symptom, not the whole body."

"An important transformation is taking place during this period. From being their practitioner, counselor, or physician, I am becoming their friend. As they experience improvement in health, they gain confidence, and become more and more relaxed in their anticipation of the birth ahead. Without this vital relationship, I believe the resulting statistics would be unobtainable. During this prenatal period, the right to abandon the program is reserved."

FATHER'S ROLE

The training program must include the father, or a person as close to the expectant mother, Mr. Schlosser has found. "Throughout health-corrective processes — pre- and postnatal periods, and particularly in childbirth — his ability to guide, direct, and encourage is of immense value. In childbirth,

the father's ability to coach and understand his wife's normal processes can make the difference between a nightmare and a beautiful relaxing experience. He is an integral part of the team effort. I have often observed an improvement of his own health, and his attitude toward healthier ways of life, as an additional benefit."

Another important part of naturopathic health care, continues Mr. Schlosser, "is the need for education and physical conditioning via group therapy. Classes serving up to 12 couples are held weekly or monthly, according to need. These classes are designed to convey information, making the subject of health interesting and real. Among subjects covered is nutrition, how to prepare healthful foods, and what to beware of when shopping. The exercise classes cover a

wide variety of material, instead of centering on one do-it-all method."

The needs of mother and baby must be a prime consideration in childbirth procedures, believes Helmut Schlosser, adding that "even standard medicine is beginning to understand that incorporating childbirth into its procedural structure must end in failure. Advocates of naturopathic medicine long have been aware of the great need for a health service based entirely on the patient's needs, and the omission of time consideration. It is not just a matter of eliminating unnecessary medication, incising, or awkward birth positions, the use of stirrups, the routine application of forceps, or the quick introduction of a 'Le Boyer bathtub.' One must concentrate on the actual needs of mother and baby.

"I have tried to combine these requirements to assure a high level of safety, and assuring complete comfort to the mother in her needs. For example, a special birth support, and a sophisticated fetal monitor device have been developed and may be used in any home environment. It allows for any obstetric procedure short of a cesarian section without disturbing the woman's freedom and comfort, or the process of birth, and makes possible an almost-operating-room-like cleanliness of the area without destroying the warmth of the home. I have had good results in doing even complex breech deliveries involving forceps work in this arrangement, without the need of episiotomies or restriction of the mother."

DURING LABOR

"Adequate supervision during labor is another important requirement if the hospital is to be avoided. Although calling for a much greater investment of time on the part of the obstetrician, a completely-natural progress of labor and delivery will carry high dividends, benefiting mother and child.

"Here also the father is the second most important person — not the physician or midwife. His ability to communi-

cate with his wife during labor makes him, as Dr. Robert Bradley has learned, the best-suited labor coach. His training in the preparation classes has equipped him to use several methods, and he then can choose the one best suited to his wife's needs during labor. He uses his own judgment, does not follow a rigid one-method pattern. His involvement in the birth process is so extensive that the physician or midwife will handle the newborn only when required for safety reasons. The newborn is handled almost exclusively by the new parents, and is placed on the mother's breast as soon as possible. The babe is not washed or bathed for two weeks to retain the skin's vitamin coating. And the infant is encouraged to nurse within minutes after delivery. Children thus treated have definite neurological advantages over those exposed to nurseries and strangers. They bypass almost entirely the chance of contracting infectious diseases."

SOME NO-NO'S

The expectant mother who follows Mr. Schlosser's regimen avoids drugs, food additives, and tea, coffee, and alcohol. She does not smoke. And she does not permit herself to be exposed to hair sprays, aerosol sprays, gas or carbon tetrachloride fumes, antibiotics. Nor does she expose herself to radiation — color TV, x-ray treatments. And he strongly recommends against use of transcendental meditation during pregnancy.

"After checking individual cases, I believe deep meditation may be more dangerous to a pregnant woman than we think. My observations have showed meditating mothers-to-be at a disadvantage during pregnancy, and labor, and delivery. Nearly all cases showed developing hemolytic toxicity, high blood pressure, exhausted labor patterns, or poor control during labor. All apparently stemmed from a circulatory slowing process, the exact opposite of what we should obtain during pregnancy. At the

Midwifery Under Attack in California

Murder Charge Lodged Against Young Woman in Home-Birth Death of Infant

Having your baby at home is "a beautiful experience" for many. But to organized medicine, it is "unsafe," "risky," and should be discouraged, if not banned.

The issue has come into focus in California as a result of the indictment on a murder charge filed by a San Luis Obispo County Grand Jury in July against 31-year-old Marianne Doshi who acted as midwife, without a license, in the birth of the third child of Robert and Christine Gannage of Los Osos.

The Gannages are born-again-Christians who prayed before making the decision to have their child born at home. Mr. Gannage, a real estate salesman, told *Los Angeles Times* writer John Hurst that their Mikhail, 5, and Faith Ann, 3, were born in hospitals, and the experience was "less than satisfactory" for the mother.

"We felt that to have a baby at home is a healthy, normal experience," he said. "We didn't think having a baby was a sickness."

Unable to find a doctor who would consent to serve at a home delivery, and learning that Mrs. Doshi reportedly was practicing midwifery, they contacted her. "She seemed like someone who would be really good to have at the birth," Mr. Gannage recalled. She seemed like someone who has a lot of concern for the mother and the child. And she obviously knew a lot about delivering babies."

He said he paid her \$25 to \$30 for the

risk of taking an unpopular stand, I nonetheless must discourage all forms of meditation during the prenatal period. The oxygenation of mother and fetus is too important to be fooled with. Simple relaxation can be obtained by less-involved means."

10 classes his wife attended prior to the birth, but that no fee was paid for delivery of the baby.

Mrs. Gannage had visited an obstetrician about three times for prenatal care, and was told "everything was normal." When she began what her husband believes was false labor at 1 a.m. June 3, the baby was four to five days overdue, he said. Labor stopped and began again about 9 a.m. "And at 10 a.m., the dream of a beautiful experience shattered when the infant girl was born deathly white and with no apparent pulse."

Mr. Gannage is convinced that a knot in the umbilical cord caused the baby's condition, and that it was "the will of God. I knew right away when I looked at that knot, that the Lord's hand was in it."

The infant was taken by ambulance to Sierra Vista Hospital in San Luis Obispo, then flown to Mt. Zion Hospital in San Francisco where she was kept alive five days on a life-support system, but died June 8.

REPORTED BY DOCTOR

When Mrs. Gannage was taken to San Luis Obispo County General Hospital, she was interviewed (tape-recorded) by Dr. John Mahnke who had learned of the home birth, and after "evaluating the case," called the hospital administrator and the child abuse section of the sheriff's office. "Any home delivery (by an unlicensed midwife) is failure to provide optimum care for an infant," he said. "It can be interpreted as such."

The sheriff's office and the State Board of Medical Quality Assurance started investigating the baby's death, and Mr. Gannage "pleaded with the authorities to show enough compassion in their report that the case would be closed." The investigators persisted,

however, and Mr. Gannage told the *Times* the questioning by Ward Jayne of the Board of Medical Quality Assurance "was like a dentist working on your tooth."

In San Francisco the coroner's office said the death was "at the hands of another."

Mrs. Doshi, whose father, Dr. Heinz Graumann, is a psychologist at the Menninger Foundation in Topeka, Kan., has been charged on a felony count of practicing medicine without a license, and also with murder.

The San Luis Obispo County District Attorney's office discussed the possibility of prosecuting the Gannages, but after considering the facts, Assistant District Attorney Christopher Money told *The Times*, "we would have to show that the Gannages, in effect, were not exercising proper care in the delivery of their child and were placing their child in a dangerous situation. And we felt there wasn't any evidence of that. I'm sure they felt Mrs. Doshi was competent."

Reported John Hurst: "They did, and still do. Said Mr. Gannage: 'You've got one doctor saying, 'If you'd done this, the baby would have lived. If you did that, the baby would have lived.' Playing God. Who knows? It's in the past.'"

Mr. Gannage does not blame Mrs. Doshi, feels that "in no way was she neglectful." He expressed outrage at her arrest, said he thinks there's a concerted effort in the county to prevent home births.

And he's not alone in that assessment.

Mrs. Doshi maintains she is being used as an example. "My arrest is not solely aimed at me," she says, "but is an attempt to intimidate parents who might choose to deliver their children at home."

'VICTIM OF WITCH HUNT'

Suzanne Arms, author of *Immaculate Deception*, a popular book on home delivery sympathetic to lay midwives and highly critical of hospital-birth tech-

niques, contends, according to Reporter Hurst, "that Mrs. Doshi is the target of a virtual witch hunt. 'There is no doubt in my mind,' said the San Francisco Bay Area writer, 'that the medical establishment in San Luis Obispo County and the medical establishment in many parts of the state are watering at the mouth at the chance to finally put the screws to lay midwives.'"

Although Assistant District Attorney Money says he views the Doshi case as "just a routine criminal case," the case is "being followed at the highest levels of the obstetrics hierarchy in California," wrote Mr. Hurst. "Dr. John Miller, chairman of the California section of the American College of Obstetricians and Gynecologists, said he was glad to see attention focused on the Doshi proceedings. 'I'm pleased with the recognition that this case graphically demonstrates the problem involved in this type of unqualified personal risk. It graphically demonstrates that somebody is dead who would be alive if they were properly taken care of.'"

Dr. Miller reflects the position of organized medicine. The California Medical Association has adopted formal positions favoring births in "accredited" institutions and in opposition to lay midwifery. In 1977 the Orange County Medical Association attempted unsuccessfully at the CMA convention to bring "unprofessional conduct" censure on doctors performing home deliveries.

The American College of Obstetricians and Gynecologists strongly condemns home births, and in January issued a news release warning of the alleged dangers of home birth. It claimed "79 babies died last year in California associated with home delivery that would not have died in hospitals." But Dr. Gary A. Richwald, internist and clinical researcher at UCLA who also runs a home birth clinic in west Los Angeles, said the ACOG statement was misleading because the "out-of-hospital" births included accidental out-of-hospital

births in addition to carefully-planned home births. The ACOG acknowledged that the news release did not differentiate between planned and unplanned out-of-hospital births.

While it might be unkind to suggest that economics has anything to do with organized medicine's opposition to home deliveries (the hospital charge now is said to run about \$1,500), one doctor uses economics in his argument that perhaps parents should not have the unqualified right to decide how a child shall be born.

Dr. Lester T. Hibbard, chairman of the CMA Committee on Maternal, Perinatal and Child Care, told the San Luis Obispo County Grand Jury: "Does society have a stake in seeing to it that a child is well-born? For example, suppose a child is born at home and turns out to be brain-damaged, and this would have been avoided if that child was in a hospital. . . . And society will have to assume responsibility for this child. . . . And that one child can mean a quarter of a million dollars in taxpayers' money That's something society hasn't addressed." (*What about the number of brain-damaged children born in hospitals, Doctor? Ed.*)

Practicing home-birth deliveries is not made any easier for the few doctors willing to do it. Norcal Mutual Insurance Co., a major provider of malpractice insurance for northern California doctors, informed its physician clients earlier this year that after July 1 doctors attending home births would not be covered by malpractice insurance.

And when Assemblyman Gary Hart of Santa Barbara authored a bill to set standards for training and licensing midwives without nursing degrees, the measure was "gutted," at least in part because of CMA opposition.

The prosecution's case against Mrs. Doshi is based on a state Supreme Court ruling that unlicensed midwifery is practicing medicine without a license, ordinarily a misdemeanor. A mis-

demeanor resulting in "great bodily harm," the prosecution contends, becomes a felony, and if death occurs, it is murder.

MIDWIFERY PHASED OUT

Three decades ago California attempted to put a gradual end to lay midwifery when it was decided no new licenses would be issued. The number of "granny" midwives has dwindled to one. Legislation recognizes the profession of "certified nurse midwife," but state certification requires a registered nurse's degree in addition to formal training in midwifery.

Certified nurse midwives must work in conjunction with doctors, but physicians are not required to be physically present during births. Few certified midwives attend home births, however.

But despite the law, lay persons are practicing midwifery — and this would not be happening unless parents were insisting on natural deliveries of babies in the warmth of the home environment.

Mr. Hurst notes that while some hospitals are "moving away from the old straps and stirrups delivery-room procedure, and a growing number are instituting homey, bedroomlike 'alternative birth centers,' home-birth enthusiasts maintain that hospitals are not the best places to begin life."

But to get professional services is not a simple matter, since only a handful of doctors will attend home-births, and the number of certified nurse midwives who will do it is even smaller. So parents must turn to the estimated 200-300 unlicensed midwives in the state, or go it alone.

The women who go through with home births, wrote Mr. Hurst, "are generally considered healthier than average, and are committed to studying and training for the birth. Most home-birth practitioners insist that prospective parents take classes that include instruction in such subjects as anatomy and nutrition, in addition to physical exercise and breathing techniques."

A FEW BRAVE DOCTORS

Among the handful of doctors who assist at home deliveries are two north of San Francisco: Dr. Donald A. Solomon, Sonoma County, perhaps the only obstetrician with such a practice, and Dr. Milton Estes, Mill Valley.

Dr. Solomon, 35, whose wife, an herbalist with a master's degree in botany, acts as a "labor coach," told *Times* writer Hurst that Mrs. Solomon is "an extremely perceptive woman who understands birth energy. We've come to feel that there's a certain kind of energy that occurs as a result of preparation and knowledge, and the power that people feel as a result of making their own choices, which really promotes healthy birthing."

He believes, said Mr. Hurst, "that one of his major functions as a physician is to provide health-care options to patients, but that it is up to the patients to make the decisions. 'We each, individually, are responsible for our well-being,' he said. 'My responsibility to patient and client is to give them clear choices and make clear agreements.'

He told of advising a couple who wanted a home birth that it would be safer to have the baby in a hospital because an examination indicated the infant would be born by breech delivery. "As a result of their previous experience with the medical community," said the doctor, "they told us they would rather have a dead baby than have a baby in the hospital. . . ."

Dr. Estes is another young physician with the "new-breed" philosophy. He told Mr. Hurst: "I feel there is an aspect of having your baby at home — that is, if you want to do that — that leads to an enhancement of life, and to a greater experience of being a family."

But he is cautious. He will not handle the deliveries of women who smoke, use drugs, drink heavily, or are psychologically unstable. He screens out women with medical problems such as obesity, heart disease, and high blood pressure.

He won't handle home births for such obstetric problems as premature deliveries, diabetes developed during pregnancy, twins, breech deliveries, or women who have had previous cesarean sections.

His equipment includes resuscitation apparatus, an ultrasound fetal stethoscope, intravenous equipment, and drugs for emergencies. A nurse accompanies him, and he makes arrangements for transfer to a hospital if needed.

Dr. Estes believes "at least 30% of childbirths are complicated," and that "the statement that 95% of childbirth is natural and uncomplicated is garbage." There is a "rational path," he says, between ignoring risks of pregnancy and treating it as a dangerous disease. He knows one mother who decided to deliver at home, alone, and the baby was breech (the presentation of buttocks instead of head in childbirth, occurring in 3% of all labors). "The child was three when I saw him, severely retarded. To me, that is a tragedy. The answer to that is not to have every baby in the hospital. . . . It's to walk the middle ground."

SPIRITUAL APPROACH

Until recently, Mrs. Cindy Muther was an unlicensed midwife in Ventura County, she told Mr. Hurst. At 30, she had attended 37 home births in two years. She started because a doctor asked her to train as a childbirth educator, coaching women in natural childbirth techniques. The doctor left the area and she was getting calls from the prospective mothers asking "What do I do now?" She says she "wound up catching the babies, as usually happens."

"Like Dr. Solomon in Sonoma County and like many persons involved with home births in California, said the *Times* writer, "Mrs. Muther takes a spiritual approach to life — she is a devout Christian — and like Dr. Solomon she puts the responsibility for a healthy birth on the parents.

" 'The people I deal with,' she said, 'go

SOME SAY IT'S DOCTORS' FAULT FOR NOT COOPERATING WITH HOME-BIRTH REQUESTS

A week after the *Los Angeles Times* carried the comprehensive story on the midwifery indictment in California, the newspaper published several letters whose authors consider it the right of parents to have their children born in the home. We've excerpted a few here. The following letter from Kathleen Rauch of Sunland, Calif., is an articulate summary of the way many parents feel about this very personal subject:

"As the mother of two young sons, both born easily and safely at home with lay midwives in attendance, I read your article (Sept. 13) on the arrest of Marianne Doshi with great interest — and with great sympathy — for Mrs. Doshi and for Robert and Christine Gannage.

"As is generally the case, most of the medical doctors interviewed came off sounding all-knowing, all-powerful, and seemingly desirous of becoming all-

through an extensive orientation — because home birth is the parents' responsibility. It's not mine. It's not the doctors'. It's not the hospitals'."

She believes that only a minority of expectant parents in California are healthy enough and committed enough for home birthing. "It is not for everyone," she says. "It isn't even for the majority. It's probably for only maybe the 15% to 20% who can meet the qualifications for having a baby at home. We don't have healthy women in this state. . . . Even a healthy mother can't give home birth unless she's committed to the birth. And the father must be committed to the birth. . . . I think that's maybe what's wrong with the world — that fathers have been isolated from the birth process."

But, she insists, those who are "committed," have a right to home birth. And she believes, too, in the importance of

present as well. The generally-accepted idea that a hospital birth is guaranteed to be safest (and therefore best) simply is not true.

"For every child born at home who is retarded, or who dies due to oxygen deprivation or other causes that might have been averted in a hospital, there are many children born in hospitals, who are retarded, impaired or dead due to causes that could have been prevented at home — forceps delivery, consciousness-numbing drugs, drugs to speed up labor or slow it down to fit a sometimes-arbitrary schedule, drugs to ease the pain and fear of laboring mother attached to fetal heart monitors or other devices that prevent them from moving about to get comfortable.

"The retardation, respiratory problems, or death of these children seem to be looked at by doctors and hospital personnel as unfortunate but necessary,

"medical expertise," and favors a "bottom line" set of qualifications for midwives. The training, she maintains, should be available at the community level, unlike the present state certification process for nurse midwives who must complete registered nurses' training and then complete midwifery education at one of only a few designated universities.

The training of unlicensed midwives in California runs from "abysmal to excellent," according to Linda Bennett, executive vice-president of the Association for Childbirth at Home, International. Ms. Bennett, 28, who served an apprenticeship with experienced but unlicensed midwives, also favors a certified training program for lay midwives. She says she doesn't "know a single midwife anywhere who wouldn't like access to better training."

whereas any misfortune at home is to be considered negligence. In the cases where damage from drugs or equipment stops short of death, they bring in their marvelously-complicated and expensive machinery to 'save' the child they have endangered in the first place. Modern technology does have a lot to offer during a genuine complication, but this is the exception rather than the rule.

"In many hospitals, healthy or unhealthy infants are still removed from their conscious or unconscious mothers immediately after birth, or after a few token moments of tentative nursing at the insistence of the mother. This practice interferes with the very important bonding that occurs between babies and mothers — and fathers — shortly after birth. Studies have shown a direct correlation between the lack of bonding and child abuse. Staph and other infections also occur in infants sharing a common nursery, which do not occur in a home environment where an infant is immune to familiar bacteria.

"There are many advantages to the infant and parent in a carefully-prepared and medically-screened home birth. Some of these do, indeed, slip past the rather ephemeral border between physical safety and the area of 'feelings' — or psychic, emotional well-being. These same indefinable 'feelings' are the insubstantial, unmeasurable stuff of which good marriages are made — or friendships, or international relations between adults who do not know each other, but who, out of 'feelings' for their common humanity, do not blow each other off the face of the earth. They are important for everyone, and they are best fostered at birth by a warm, compassionate, conscious, healthy environment. For many of us, that means being at home.

"Almost without exception, parents and midwives would appreciate the cooperation of the medical profession in planning and protecting a home birth. In Holland, where home birth is sanctioned, midwifery is legal and hos-

pitals are prepared to assist with the unexpected complication. The total infant mortality rate is considerably lower than it is in the United States.

"During my own second pregnancy, I could not find a physician until my eighth month who would consent to examine me, once I had stated my intention to give birth at home. Not one would agree to accept me as a patient in the event I needed to go to the hospital. Instead, they tried to frighten and bully me into changing my mind. They succeeded only in forcing me to rely more heavily on the judgment of my midwife, my husband, and myself.

"Now I find that if our judgment had been faulty, or if a freak accident had occurred, she or we might have been charged with murder. Perhaps the more logical defendants would be the physicians who refuse care to parents unless all decisions are left in their (the doctors') hands. A logical accomplice would be the State of California, which refuses to certify midwives to attend home births. Certainly the American Medical Association would make an excellent codefendant, for persecuting those few physicians compassionate and brave enough to realize the potential value of home birth and offer their assistance."

F. Studge of Long Beach writes: "I am amazed by the indictment brought against Marianne Doshi of San Luis Obispo. It seems a case of monumental stupidity. . . . It seems unfair that she bear the brunt of prosecution alone. It seems to me that the San Luis Obispo County Grand Jury should have indicted the Gannages' obstetrician, and all other licensed medical personnel who knew of the parents' intention to have their child at home. All trained individuals who were aware of the Gannages' perfectly-reasonable desire to have the baby in a familiar, natural setting were bound by their Hippocratic oath to assist the parents in accomplishing their goal. . . . Since the number of persons wishing to have babies at home is likely to increase — given the impersonal and expensive

Midwife Can Save Families Up to 50%, Says Author of Defeated Measure

Thousands of births are taking place outside of hospitals, many of them through the services of an estimated 200-300 midwives practicing illegally in California, says Assemblyman Gary Hart whose bill — A.B. 1896 — to legalize midwifery was killed during the recent legislative session.

A "shortage and maldistribution" of obstetricians, high medical costs, and growing interest in natural childbirth have led many families to seek less expensive alternatives to hospital-centered births, he told a news conference.

Assemblyman Hart said mothers able to have normal delivery could save up to 50% on childbirth costs by using the services of a midwife rather than an obstetrician. Experience in western Europe, with infant mortality rates below those in the U.S., shows trained midwives are "as technically competent as obstetricians when managing a normal birth," he asserted.

maternity procedures practiced in our hospitals today — it seems that the AMA ought to stop dragging its perineum and make some effort to protect those 'future parents' who are not in a position to choose where they are about to be born."

Gayle Stevenson of Capistrano Beach had this to say, in part: "It seems to me the medical establishment itself is responsible for most of the infant damage or deaths occurring during home deliveries. By refusing to assist women who have chosen this means of giving birth, are not doctors abdicating their most fundamental responsibility? One wonders if perhaps obstetricians do not wish to be bothered with having to go to a woman's home.

"If proper prenatal care, screening for low-risk mothers, and a trained and ex-

A law in 1974 legalized nurse midwifery in California, but not lay midwifery, legal in the state from 1917 until 1949 when it was outlawed in response to pressure from organized medicine.

Michael Krisman, deputy director of the California Department of Consumer Affairs, says many California women go without adequate maternity care because only 37% of the state's obstetricians accept Medi-Cal patients.

Assemblyman Hart said he recently read a statistic that "shocked" him, "showing that 50% of poor women in the nation do not receive prenatal care." He said midwife delivery costs range from \$200 to \$400 compared with \$1,000 to \$1,500 for hospital births.

A.B. 1896, according to its author, would have given parents an expanded freedom of choice in the type of maternity and childbirth care available, while assuring that those in the practice of midwifery are well-trained and competent birth assisters.

performed birth attendant are provided, home birth has been proven to be at least as safe as that undertaken in a hospital. . . .

"I am a mother fortunate enough to have recently had a perfectly-managed home birth, thanks to a humane doctor and an experienced nurse-midwife. The comparisons between that experience and two previous hospital deliveries are so stark, descriptions would require another whole letter. Suffice it to say I have deep regrets that I traded, for the 'safety' of hospitals (in the second instance, an assumption I found to be false), the experience my family and I had in our home. . . ."

Barbara Langston of Independence, Calif., wrote in part: "Where and how people have their babies is the responsibility of the couples involved, not the

'Childbirth Is Not an Illness'

Damage to Infant from Painkilling Perinatal Drugs May Be Permanent

About 90% of American women opt for anesthetized childbirth, according to government statistics. And many — probably most — have no idea that the drugs they take to achieve "painless childbirth" may cause permanent damage to the child.

In fact, Yvonne Brackbill, Ph.D., a psychologist at the University of Florida who is studying data from a \$110-million research project funded by the National Institutes of Health (NIH), believes the Food and Drug Administration should require manufacturers to submit results of long-term behavioral tests on immature animals before approving drugs for obstetrical use.

She goes further: Women must be informed of the possible permanent effects such drugs may have on their babies. And mothers should be given the chance — when they can think clearly — to say no to drugs. "Childbirth

is not an illness," she says. "Administering drugs prenatally and perinatally is often more optional than essential, and there is plenty of room for decision-making."

In an article by Robin Marantz Henig in the October 1978 issue of *Human Behavior*, (\$14/year, 12031 Wilshire Blvd., Los Angeles), Dr. Brackbill is quoted as testifying before a Senate subcommittee investigating the hazards of high-technology childbirth: "... Within the age range for which we have data — one day to seven years — there is some evidence of decrease of adverse behavioral effects for a few drugs. But for other drugs, most notably inhalant anesthetics (and the narcotic meperidine, known popularly as Demerol), the adverse effects are as strong at four years as they are at one year. It is difficult to avoid concluding that the damage is permanent."

Dr. Brackbill bases her conclusion on an analysis of data from the NIH-funded Collaborative Perinatal Project, a survey of obstetric practices in the U.S. The data covers some 50,000 women who gave birth between 1958 and 1965. Infants were "followed" with periodic neurological and psychological exams until age seven.

Results of the first three exams — administered at four months, eight months, and 12 months after birth — have been analyzed by the Florida researcher to see whether the use of perinatal drugs (drugs given during labor and delivery) is associated with differences in test performance. Her colleague, Sarah Broman of NIH, is analyzing the four- and seven-year followup data.

According to Dr. Brackbill, not only are perinatal drugs often associated with

harmful behavioral effects, but these effects seem to stay with an infant throughout the first year of life, and in many cases are still evident years later.

Dr. Brackbill says that ideally, she would have compared infants born after a medicated delivery with those whose mothers were given no drugs. But she couldn't find enough nonmedicated children for comparison.

"All previous literature tells us that inhalant (general) anesthesia is more deleterious than conduction (local) anesthesia, and conduction anesthesia more deleterious than none at all," she told the subcommittee. Because of a lack of nonmedicated controls in the study, "our results tend to be conservative," she said.

But as Ms. Henig noted in *Human Behavior*: "The results, conservative or not, tend to be sobering. At the four-month neurological test, Dr. Brackbill found infants in the inhalant group tended to laugh and coo less than the controls. They had inappropriate placing and stepping responses, were less able to sit with help and hold heads erect, and showed abnormalities in such physiological measures as heart rate, length, respiratory rate, blood pressure, and liver size.

"At eight months, when a *Bayley Scale of Psychological Development* was administered to test mental and motor development, the skills most often inhibited in the inhalant group included the infant's ability to respond to social play, sit alone, manipulate a bell, pick up a cube, and pull a string to obtain an object. A second neurological examination, given at 12 months, revealed abnormalities in sweating patterns, locomotor and postural development, gait, and overall neurological scores for babies in the inhalant anesthesia group."

Dr. Brackbill says early results of the four- and seven-year followup analysis indicate that while effects of some of the drugs appear to wear off with time, ef-

fects of the inhalants persist. And effects of the narcotic Demerol seem to become worse as the child grows. These older children, she says, are stunted in language and cognitive development when compared with controls.

"It seems to make no difference what kind of inhalant is administered, one inhalant is as bad as the next," Dr. Brackbill found, and the depth of anesthesia in the mother — ranging from lack of sensation to lack of consciousness — had "no strong or consistent relationship" to the infant's later behavior.

With the increasing incidence of cesarean sections — up from 3% to 8% of all births 10 years ago, to 9% to 12% today — the use of obstetric drugs continues to rise. Dr. Brackbill notes that in 1970, 32% of cesarean sections at university and teaching hospitals used inhalants. Five years later, the proportion was 43%.

Dr. Brackbill, says *Human Behavior*, "is suspicious of just about any medication used during pregnancy. The placental barrier, she says, is really no barrier at all: 'almost anything smaller than a golf ball will cross it.' And newborns are peculiarly incapable of dealing with painkillers and other perinatal drugs, since the liver and kidney, the organs of drug metabolism and excretion, are immature at birth, while the central nervous system, also immature, is highly receptive to these medications.

"Even for the two drugs tested whose behavioral effects seemed to lessen after several years — promazine and Seconal — Dr. Brackbill attributes most of the apparent improvement to the child's compensation for earlier losses. Defenders of painless childbirth may wonder whether it really matters whether the children are compensating, so long as they can perform as well as their peers. But to Dr. Brackbill, compensation is qualitatively different from ability, and may break down in times of stress, when the environment is no longer supportive."

Is There Connection Between Electric Ground and Cancer?

Is there a possibility that grounding electric wiring to copper pipes creates a chemical reaction that causes cancer?

Dr. F.A. Baker, retired Minnesota chiropractor, isn't sure — but is intrigued with the thought there might be a relationship. If true, the implications are frightening. His observations and thoughts are contained in this letter to the editor. In the hope it might trigger research by persons skilled in electrochemistry, the letter is reproduced herewith:

"I am still trying to unravel the etiology of cancer. . . . There are many metals that are carcinogenic. How does a metal become so obnoxious?

"I built my home 40 years ago. The electrical board had never been grounded when completed. It should have been. I had the service-boxes grounded (1939) to a spike driven into the ground beneath the board. I tried to keep all grounds — radio, and the like — off the water pipes.

"Recently the telephone company rewired all our homes, and without telling me, grounded the line onto my copper water pipe, remote from the meter. The latter is plastic, so the ground was worthless. Wondering if the company

Frank A. Baker, D.C., 60-year resident of Mankato, Minn., an inveterate student, has had a remarkable career in healing, as well as politics. He was a member of the Minnesota State College Board for a number of years, and served as Resident Director of Mankato State College. His success with tic douloureux through spinal adjustment was described in the Nov. 1976 Bulletin. His address is 129 Shaubut St., Mankato, Minn. 56001.

had the right to do it, I inquired and the Public Service Commission contacted the phone company. I told the company I wanted it on the spike. Then I learned that the Minnesota Electrical code makes it mandatory to ground, in every possible instance, on the copper water pipe before it goes through the meter.

"A lot of copper solutions are carcinogenic. They worry about the CuSO₄ used in lakes to control algae. With a telephone ground, the current is DC, and the house wiring is AC.

"Is it not possible, with this universal situation, that there might be an electrophoresis in the copper pipes? All grounds have a current leak, or buildup, just as current acts on water, evolving H₂O gases.

"Within the water system are many pollutants, fluorine, for one. Proteins, joining with chlorine, makes PCB. All are bad. Could it be possible that the grounding of household equipment — washers, dryers, mixers, stoves, refrigerators — produces a considerable ground? If I recall my electricity of 65 years ago, no ground should be more than 5 ohms resistance. A ground is never tested, it is just taken for granted.

"Could this electrophoresis, if present, cause production of cancer-producing compounds from the copper and/or the chemicals in the water? Remember — the use of copper pipe is universal in this country. Imagine what a power company and an electrical company save by not producing their own spike grounds, using your water pipe instead. . . .

"A few years ago a druggist living about 50 miles from here took treatments from me. I relieved his aches and pains, but treated with extreme caution.

NO ANSWER FROM SHERIFF WHO SENT OUT BOOKLET CONDEMNING 'HEALTH QUACKERY'

San Diego County Sheriff John F. Duffy has not replied to a series of questions from the National Health Federation dealing with his distribution of a booklet titled "Beware of Health 'Quackery.'" The publication bears all the earmarks of a "made-in-U.S.A.-by FDA" product, and nutrition-minded citizens are not exactly pleased with the idea of tax money being spent by a sheriff to ballyhoo the processed-foods-industry and organized-medicine line as echoed by the bureaucracy.

In a letter Sept. 13, NHF Executive Secretary Clinton R. Miller posed these questions to Sheriff Duffy:

"1. How many of the booklets "Beware of Health 'Quackery'" did you distribute?

"2. What was the cost of the booklets and their distribution?

"3. Under what authority did the County authorize your office to use taxpayers' money for this project?

"4. How, and to whom were the booklets distributed?

It was my opinion that he was afflicted with some kind of environmental poisoning, but I couldn't put my finger on it. We finally induced him to go to the Mayo Clinic for a diagnosis. Doctors there found he had copper poisoning, from ersatz copper pipe installed during World War II — soft, cheap copper. And the grounds to his electric system were on the copper water pipe.

"A malignant growth developed in his head, an extreme case of osteoporosis developed, and he died. His daughter-in-law developed a cortisone problem, and her bones are extremely fragile.

"I am writing some of my pen pals to see if anyone can direct me in the possibility of this fear. Cancer is universal, as is the practice of grounding to water pipes, and everyone has to drink water. . . ."

"5. What was the general response from recipients?

"6. Do you anticipate continuing this project?

"7. Please cite the scientific tests which proved Laetrile is worthless.

"8. Who is the scientific expert in the Sheriff's Department of San Diego County?

"9. Who is the medical expert in the Sheriff's Department?

"10. Please cite your authority for the statement on page 8: ". . . In spite of the fact nothing you eat or don't eat can cause or cure arthritis, thousands of people fall victims to such frauds as milk from 'immune cows,' 'alfalfa tea,' 'sea water,' 'hone-gar,' 'codliver oil,' etc. Some, such as powerful hormone preparations, can have fatal side effects."

"11. On page 14 you state, 'Remember — quackery causes more unnecessary deaths than all violent crimes put together. Don't be a victim.'

"12. How many violent deaths occur in San Diego County each year?

"13. How many deaths occur each year from proven 'quackery'?

"14. Does your Department intend to delegate more officers to seek out and arrest 'quacks' than to arresting those who commit violent crimes?"

'DEDUCTIBLE,' SAYS I.R.S. OF LAETRILE

Laetrile is a "quack" substance to some federal regulators, but that doesn't affect the Internal Revenue Service. The cost of the controversial apricot-seed derivative is deductible as a medical expense when prescribed by a physician and used as prescribed in a locale where its sale and use are legal, the IRS ruled recently.

—Wall Street Journal
(Sept. 13, 1978)

Amendment Removes One Discriminatory Law Against Chiropractors, Patients

Included in a Medicare "package" bill that passed the House of Representatives by a vote of 398-2, is an amendment sponsored by Congressman James C. Corman of California which removes the mandate that chiropractic services covered under Medicare must be based on x-rays.

If it becomes law, the amendment will provide Medicare coverage for chiropractic services to "correct a subluxation demonstrated by x-ray or by other chiropractic clinical findings."

According to Jane Redicker of the International Chiropractors' Association, the amendment "traveled a difficult road before reaching the floor of the House. Under strong opposition from the Department of Health, Education and Welfare, the amendment barely passed the subcommittee. It was almost lost in the Ways and Means Committee where an attempt was made to replace the chiropractic coverage extension with

coverage for another group of health-care providers."

A form letter (A-77, \$2/100, \$1/50) prepared by NHF Executive Vice-President Clinton R. Miller asked that Representatives "work for enactment of H.R. 13097," the Corman amendment.

"Present law very unfairly and unwisely requires an x-ray before a chiropractic Medicare claim will be paid," says the letter. "This has required chiropractors to take unnecessary x-rays to demonstrate some subluxations which could have been demonstrated less expensively by chiropractic clinical findings. When x-rays are unneeded and unwanted, chiropractic patients should not be forced to have to pay for them to get Medicare payments. The Corman amendment (H.R. 13097) will change this unfair provision . . . and save the expense of the unneeded x-rays to patients who must pay for them from their own funds. . . ."

Not to Be Read Or Discussed at Mealtime!

Winona J. Schoar, R.N., Flippin, Ark., a life member of the National Health Federation, noted an item in the "Celebrity Questions" column of the *Arkansas Gazette* (Aug. 21, 1978) which she says doesn't appear on the labels of foods she buys. It concerns the "allowable" limits of impurities in food, as set by the Food and Drug Administration, and includes these tidbits:

"Tomato paste can be legally sold as long as 100 grams contain no more than 30 fly eggs or no more than 15 eggs and one fly larva; popcorn may contain one rodent pellet or one rodent hair per 10 ounces of corn; fig paste may contain up to 13 insect heads per 200 grams; and 100 grams of powdered chocolate may include up to 100 microscopic insect parts, or 1½ rodent hairs."

RAW MILK BILL NIXED BY BROWN

To the dismay of thousands of "raw milk advocates," Governor Edmund G. Brown, Jr., vetoed S.B. 2214, a bill which would have transferred control of raw milk production from the State Department of Agriculture and the Health Department to the Milk Commission.

Aides said he was told by department heads that the measure would have "severely restricted the state's ability to protect the public from potential health hazards connected with raw milk."

FDA Calls B-15 'Unsafe Food Additive'

With its usual disdain for empirical evidence of efficacy, the Food and Drug Administration is pouncing on Vitamin B-15 — the oxygenating agent developed by Ernst T. Krebs, Jr., whose work with Laetrile has made him a target of FDA vengeance over a long period.

The agency in late September announced the recall or seizure of several thousand dollars' worth of the substance manufactured by Nature Bounty, Inc. of Bohemia, N.Y. It also obtained a court order and seized 63 100-tablet bottles valued at \$3,678 from the Orlando, Fla., outlet of General Nutrition Center Corp., Pittsburgh.

B-15 has been in general use — when not confiscated and banned by FDA — for at least three decades. Many persons have found it efficacious in treatment of specific problems, but FDA Spokesperson Wayne Pines says "there has been no scientific substantiation," and the agency has classified it as an "unsafe food additive."

(Having observed the FDA's vitriolic attacks on Laetrile over the years, and its recriminatory "little tin god" behavior toward persons and organizations who challenge its authority, the assault on B-15 probably stems from this motivation — "we'll show you who's boss!" — Ed.)

Dr. Davis Warns on Heavy Vitamin A Doses

Editor:

The Bulletin (Nov. 1977) quotes Dr. Harold W. Manner as recommending for a 150-pound person one million international units of emulsified vitamin A per day as part of a cancer therapy using Laetrile and other substances. He assumed such amounts would be used only under expert supervision, but since vitamin A is easily available without prescription, warnings may be required to prevent serious harm due to self treatment.

Even in emulsified form, such huge doses of vitamin A can be used only for brief periods, because they produce toxic reactions, usually within days. Doses only one-tenth as large have led to hospitalization of sensitive adults who took them for prolonged periods. A few early symptoms include surface skin or hair loss, weakness, severe headache, and other symptoms due to excessive pressure in the brain cavity.

Potentially toxic doses should be supervised by an expert with knowledge of the possible benefits for each particular cancer, of the alternatives (including

reportedly superior synthetic analogs of the vitamin), and of the possible subtle but serious adverse reactions. These include risk of birth defects, liver damage, exacerbation of liver disease or glaucoma, acute hypercalcemia, and bone damage in the young. Very large doses of vitamin A must be used carefully in the same way as a dangerous drug.

DONALD R. DAVIS, Ph.D.
Clayton Foundation Biochemical Institute
The University of Texas at Austin
XC: Harold Manner

SOLAR TAX CREDIT

Under a bill signed into law by Governor Jerry Brown, Californians may take an income tax writeoff of up to \$3,000 for installation of solar energy systems in their homes. Homeowners may deduct up to 55% of the cost of a solar unit and commercial or industrial users qualify for a 25% tax credit on equipment costing more than \$6,000.

NHF Memorial Library News



The Librarian Submits Her Annual Report

BY STEPHANIE SHANE
Librarian

The year of 1978 has come to a close, but the National Health Federation Memorial Library is just in its beginning. The books are out of the boxes now, and in proper sequence on the shelves. All other materials have been arranged, sorted and classified.

A generous number of items were donated by doctors, scientists, National Health Federation staff, organizations, health-food-store owners, authors, publishers, editors, and you — all of the beautiful people who have given tapes, magazines, government documents, pictures, books and financial support.

When will our facility be opened to the public and professional persons? What has been accomplished so far? How will more contributions add to the library's rapidly-growing collection? And where will we be in the days to come?

Even when literature was packed away and everything in chaos, the library was being used. However, patrons now may come in and find what they want easily and quickly. Phone inquiries have come almost daily from persons throughout the United States, including other library personnel, asking questions that run the gamut on general and nutritional information.

With a great deal of cooperation and assistance from individuals — the Cancer Control Society and others — the library is starting to look like one.

Periodicals are alphabetically arranged by titles and subjects, and the books are in order, arranged in accordance with the Dewey Decimal System. Starting with numbers in the 000s-900s, our collection consists mainly of books in the 600 area. Headings include:

- General and Specific Medicine
- Dietetics
- Public Health
- Child Care
- Geriatrics
- Obstetrics
- Pharmacology and Therapeutics
- Agriculture
- Domestic Arts and Sciences

We will not have 400s — for languages, 800s — for literature, or 700s for art, unless the contents definitely pertain to health. The rest of the volumes are divided by:

- 100 — Philosophy and Psychology
- 200 — Religion
- 300 — Social Sciences
- 500 — Pure Sciences
- 900 — Autobiography and Biography

With more gifts, we can fill up the empty spaces and offer more knowledge, with a variety of sources of reading for research, or enjoyment. There are subjects on which not much data is published. We want to make as much of this information available as possible. Patrons who have visited the library ask for such obscure topics as the trace mineral lithium, exhaustion, oriental

CHRISTMAS IS COMING

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

NHF Gift Memberships

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

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

NHF MEMBERSHIP PER PERSON/FAMILY IS \$10 PER YEAR

Membership means participation in a movement dedicated to broadening freedom of choice in health care. Members receive not only the *Bulletin*, but action-alerts when pressing issues are being debated by decision-makers in Washington, and sometimes in state capitals. Many feel it is "a privilege to belong to the National Health Federation" — the consumer organization in the front lines against arrogant bureaucracy which seeks to deprive citizens of basic human rights in the area of personal health choices.

(PLEASE SEE OTHER SIDE OF PAGE FOR ORDER FORMS)

UCSF Sponsoring Health Behavior Symposium

A symposium on health behavior research will be held the weekend of Jan. 13-14 in the Sheraton Palace Hotel, San Francisco. Sponsored by the University of California (San Francisco) Schools of Medicine, Nursing, Dentistry and Pharmacy, and other agencies, the seminar will deal with the "increasing interest in the assumption of individual responsibility for health," as related to "exercise, diet, health habits, and psychosocial change." General admission will be \$80,

students \$35. Program information may be obtained by calling 415-666-3904 or writing Continuing Education in Health Services, 1343 Third Ave., San Francisco 94143.

BUSINESS WEEK SAYS that "at least one cigarette company reportedly is working up a multimillion-dollar campaign — chiefly in 'public service advertising' to counter the health groups' effort."

medicine, and vitamin books dealing exclusively with mental illness. We have all of these.

Tomorrow promises a vast wealth of literature on rare works, the newest therapies, the most-sought-after-writers from the old and new schools of learning. Cassettes and films provide audiovisual education and pleasure, while magazines contain articles in all fields of nutrition and health. We also have

bound copies of every *NHF Bulletin*.

As any enterprise must start somewhere to get somewhere, we have come out of the cobwebs to reach all types of people who want to know more about nutrition, and how to have and maintain good bodies and minds. We would like to continue to offer the valuable material we have, in hopes that we are helping toward the goal of a health-conscious society.

To National Health Federation — Box 688, Monrovia, CA 91016:

Enclosed is check of \$ _____ to cover cost of _____ Gift Memberships. Please send to:

Name	Name
Street address or P.O. Box	Street address or P.O. Box
City State Zip	City State Zip
Name	Name
Street address or P.O. Box	Street address or P.O. Box
City State Zip	City State Zip
Name	Name
Street address or P.O. Box	Street address or P.O. Box
City State Zip	City State Zip

(Use another sheet of paper for additional names)

Four Insurance Firms Honor Laetrile Claims

Although Blue Cross-Blue Shield told a district court it is not liable for payment of medical claims in which Laetrile is used "because treatments are not generally recognized as effective," most major insurance companies told the *Dallas Morning News* they will honor such claims.

A story by Helen Parmley disclosed that, if recommended by a physician, claims would be paid by Montgomery Ward Insurance Co., Omaha Insurance Co., Employers Insurance of Texas (who also honor "prescribed treatment in Mexico"), and Allstate.

Canadian Counterpart of NHF Sets '79 Convention

"Exploring Healing Alternatives for Cancer, Heart Diseases, Diabetes, Arthritis, Obesity, and Other Degenerative Diseases" will be the theme of the Third Annual Convention of Consumer Health

Organization of Canada, said Leon Shelley, coordinator. It is set for Jan. 27-28 in the Royal York Hotel, Toronto. The program will include "well-known speakers in each field."

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, consumers 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 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.
Phone (213) 357-2181 or 359-8334
Charles I. Crecelius — President and Executive Head of the Federation
Dorothy B. Hart — Vice-President
Betty Lee Morales — Secretary
Paul J. Virgin — Treasurer
Kurt W. Donsbach — Chairman of the Board of Governors
V. Earl Irons — Vice Chairman of the Board of Governors

STAFF AND ASSIGNMENTS

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

John Yiamouyiannis, Ph.D. — Science Director
Address: 6439 Taggart Road,
Delaware, Ohio 43015
Phone (614) 548-4067

Kirkpatrick W. Dilling — NHF General Counsel
Address: 188 W. Randolph St.
Chicago, Ill. 60601
Phone: (312) 236-8417

James S. Turner — Washington Representative
Address: 1625 I St. N.W.
Washington, D.C. 20006
Phone: (202) 872-8660

Convention Bureau
Allen T. Goldman, Manager
Chapter Department
Jane Course, Coordinator

NHF Bulletin

Don C. Matchan, Editor

NHF MEMORIAL LIBRARY

Stephanie Shane, Librarian
Telephone: (213) 358-2312

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

NATIONAL HEALTH FEDERATION

P.O. Box 688

212 West Foothill Boulevard
MONROVIA, CALIFORNIA 91016
Telephone (213) 357-2181

Entered as Second-class Matter

\$10.00 Membership (includes **Bulletin** subscription)
PRICE FOR ADDITIONAL COPIES OF THIS
ISSUE

50¢ each—4 for \$1.00—25 for \$5.00—40 for \$7.50—
100 for \$17.00

(Plus Delivery Charges)

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
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

24th Annual — Jan. 19-21
Pacific Terrace Convention Center
300 E. Ocean Blvd. — Long Beach

Southwest Regional — Feb. 24-25
The Adams Hotel — Phoenix, Ariz.

North Central Regional — Mar. 23-24
Wm. Penn Hotel — Pittsburgh, Pa.

HELP SAVE OUR HEALTH FREEDOMS