

National Health Federation

BULLETIN

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Kirk Dilling's



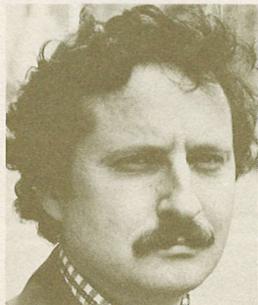
KIRK DILLING

Major
Win
Over
FDA
on

**Chelated
Minerals**

SLOAN-KETTERING

**Fires Man Who
Dared to Expose
What He Calls
'Coverup' of
Its Tests on
Laetrile**

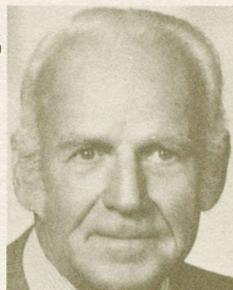


RALPH MOSS

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GUY GILLETTE

BOHANON REAFFIRMS FREE CHOICE

**Humanitarian Judge Tells
FDA to Get Off Backs
of Physicians, Patients
Who Choose Laetrile
Cancer Therapy**



JUDGE BOHANON

**THE PROTEIN DIET CONTROVERSY HEATS UP
A SINGLE CANCER MOLECULE 'CAN START THE PROCESS' — MAYER**

Dedicated to the Protection of Health Freedoms

THE NATIONAL HEALTH FEDERATION BULLETIN

Protection of Health Freedoms

Published Monthly

Volume XXIV — Number 2

February 1978

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

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Public Scrutiny Debuts at Convention

Outspoken Tabloid Geared to Winning Laetrile Fight

Birth of a new publication dedicated to winning the ongoing battle for use of non toxic therapies in cancer treatment, including and with emphasis on Laetrile (amygdalin), has been announced.



Published by Public Scrutiny, P. O. Box 1307, Monrovia, Calif., the tabloid newspaper bearing that name hit the newsstands in time for the January NHF convention in Pasadena where it made its public debut under the editorship of Mark Lockman, 25-year-old newspaperman who spent two years on the staff of *The Spotlight* in Washington before returning to the west coast, his home state.

Mr. Lockman spent three years in military service between 1972 and 1975. He worked 18 months for the Advertising and Information Division of the U.S. Army Recruiting Main Station in Alameda, Calif., then spent a year in Germany as editor of the Miesau Army Depot's publication, *The Bomb Blast*. He is a son of Victor

Lockman, Pensacola, Fla., cartoonist and pamphleteer, and author of *Vitamin B-17 — Key to Cancer*.

In a joint statement to the press, NHF Board Chairman Kurt W. Donceus welcomed *Public Scrutiny* as 'a much-needed vehicle for informing the public as well as building a fire' under private and public bureaucracies who for too long have dominated the health-care field, often with indifference to the needs of the people.

"*Public Scrutiny* will be a hard-hitting, no-punches-pulled, fact-filled newspaper centering on the critical struggle to achieve free choice in selection of therapies. Editor Lockman is a qualified newsmen with a deep interest in freedom of choice in health matters. We are pleased to recommend the newspaper to our members as an additional communications medium. At \$5 a year, we hope its circulation soars. There is a real need for such a publication, and we'll do everything in our power — with the help of interested readers and advertisers — to make it 'fly.'"

Legitimate Case, High Court Tells Chiro

The U.S. Supreme Court upheld a West Virginia Court of Appeals ruling that the antitrust suit of six chiropractors against Blue Shield must be brought to trial. The chiropractors charge that six medical service insurers and 68 doctors conspired to exclude chiropractic services from Blue Shield insurance coverage.

A favorable verdict would triple the \$5 million damages sought. Chiropractors in Massachusetts and Arizona are considering filing similar suits.

Dilling Wins Major Victory in Chelated Mineral/FDA Case

Because a courageous manufacturer stood up for its rights, and a skillful attorney confronted the U.S. government in federal court, consumers desiring chelated mineral products will continue to be able to buy them at their favorite health-food store.

The story goes back to October 1976 when the Food and Drug Administration served notice through the *Federal Register* that it would consider "any vitamin or mineral... in a dietary supplement which is not generally recognized... as safe... to be a food additive..."

Some months later the crackdown got underway, targets including companies in various parts of the country, among whom were the William T. Thompson Co. of Los Angeles, Seroyal Brands of Concord, Calif., and Albion Laboratories, Inc., of Clearfield, Utah.

In a letter to Attorney William J. Kolasky, Jr., of Washington, D.C., whose law firm of Wilmer, Cutler and Pickering represented the Thompson company, FDA's acting director of the Division of Regulatory Guidance Cesar A. Roy said "chelate" is a "nonspecific term (that) fails to define sufficiently the ingredients and chemical compounds used in various 'chelated' mineral food supplements." FDA did "not deem such un-defined substances to be 'generally recognized as safe,'" he asserted, adding that he would not however recommend initiation of enforcement proceedings (alleging 'unsafe food additive') if the products were "labeled properly."

When FDA directed a similar complaint against Albion Laboratories, Inc., of Clearfield, Utah, the company retained Attorney Kirkpatrick W. Dilling of Dilling and Dilling, Chicago, to challenge the FDA position.

Last Sept. 1 Mr. Dilling filed suit in U. S. District Court, Nevada, on behalf of Albion and two of its distributors seeking from the court a declaratory judgment and an injunction against the agency.

Noting that FDA "has declared that certain mineral nutrients are 'unsafe' food additives," the plaintiffs maintained that "such minerals are vital nutrients essential in human nutrition, not 'food additives' or 'unsafe' when employed for nutritional purposes."

Albion and the other plaintiffs, Dawn V. Burton and John Napolin, further contended that "FDA has declared that small amounts of protein, when combined with mineral nutrients, are also 'unsafe'..." They told the court that "protein is absolutely 'safe,' particularly in small quantities, protein being widely consumed by everyone in the everyday diet." FDA's action in trying to restrict the sale of chelated minerals was "arbitrary, improper, and unlawful," and exceeded the agency's authority, they charged.

Faced with this legal challenge, the Food and Drug Administration backed away from its original position, acknowledged that chelated mineral compounds are not in violation of the "food additive" provisions of the Federal Food, Drug and

Proxmire Lays It on FDA for Trying to Circumvent Supplement Statute

The FDA decision to back away from its announced intention of classifying food supplements as "food additives" may have been influenced also by pressure from Senator William Proxmire, champion of the food supplement bill which prevented FDA from classifying vitamins and minerals as drugs.

Alerted by the National Nutritional Foods Association and the National Health Federation that FDA was about to assume control over vitamins and minerals by declaring them "food additives," Senator Proxmire wrote FDA Associate Chief Counsel for Foods Stephen H. McNamara as follows:

"When the so-called 'Vitamin' Amendment — of which Senator Schweiker and I were authors in the Senate — passed the Congress, it was both our intention and the language of the law to treat safe vitamins and minerals as foods, not drugs, and not as

Cosmetic Act, and agreed to the stipulation for dismissal of the case.

Mr. Dilling told the National Health Federation that he considers the judgment "a significant breakthrough" as involving chelated minerals as not being violative of food additive provisions of the Federal Food, Drug, and Cosmetic Act, where a mineral or mineral nutrient "generally recognized as safe" (and certainly any essential mineral in nutritional amounts would be so recognized) is combined with hydrolyzed vegetable protein and/or casein."

The stipulation carried the further provision that "Dietary supplements... are subject to other requirements

food additives.

"We very seriously considered not only providing that vitamins and minerals were to be regulated under provisions of the food laws, but also that they would not be regulated under the food additive provisions. However, we dismissed that as being unnecessary as it was quite beyond any proper interpretation of the law that vitamins and minerals would be regulated as 'food additives.'

"As you know, there is massive authority under the food laws to regulate foods — including special dietary foods — if they are toxic, if they are misbranded, (and now misadvised), or if they are made in unsafe or unclean surroundings. You have all the authority in the world under the food laws to prevent abuse.

"Furthermore, on several occasions I made a legislative record on this point, saying for example, that: 'Vita-

(Please turn the page)

of law... This stipulation does not constitute an agreement with respect to proper nomenclature or any other labeling issues..."

Commenting on the outcome of the case, NHF Executive Vice-President Clinton R. Miller praised Albion Laboratories for challenging the FDA ruling in court, and lauded Mr. Dilling for "one of the most magnificent victories to date. He has often won some really big cases for some really small companies, and seldom gets the credit due him. NHF salutes him, and Albion, for exercising initiative, professional expertise, and good old American guts in standing up to the bureaucrats."

mins are special dietary foods. Vitamins are not food additives. And: 'What the FDA wants to do — and what we object to and which our amendment would prevent — is for them to treat safe vitamins and minerals, which by definition, are special dietary foods, as 'unsafe food additives.' (*Congressional Record*, Feb. 3, 1975, p. S. 1364, and Sept. 24, 1974, p. S. 17373).

"Recently, my Administrative Assistant talked to you by phone to inquire whether the FDA was not attempting to treat some special dietary foods as 'food additives.' The reply was 'no,' that was not the intention nor the policy.

"I now find that the FDA has taken precisely the opposite tack.

"First, on page 46172 of the *Federal Register* for Tuesday, Oct. 19, 1976, third column, last paragraph, it states:

'(8) Any vitamin or mineral which is included in a dietary supplement and which is not generally recognized among experts qualified by scientific training and experience to evaluate its safety, as having been adequately shown to be safe under the conditions of its intended use, is a food additive within the meaning of section 201(s) of the Act, and pursuant to sections 402(a)(2)(C) and 409 of the Act, such inclusion is illegal in the absence of a

food additive regulation approving such inclusion.

"Second, the FDA has taken specific action against certain vitamins or minerals. It has filed a case in the U.S. District court in Arizona . . . saying that selenium, which is an essential nutrient, is a food additive. It has a case in the Eastern District of New York . . . taking the same position. It has an action in New Jersey . . . stating that tryptophane is a food additive. It has put out a food alert stating that ginseng is a food additive except when used as tea.

"I believe these actions are clearly contrary to the law and the legislative history, and clearly contrary to the information which you, albeit in good faith, gave my Administrative Assistant recently.

"I thought this battle was over and that vitamins and minerals or special dietary foods were to be treated under the food laws, where there is overwhelming authority to deal with toxicity or misbranding or safety.

"The FDA tried for years to treat vitamins and minerals as drugs. The FDA was beaten decisively in both Congress and the courts. Having failed, they are now trying to treat vitamins and minerals as food additives.

"Isn't it time to put a stop to this?"

SACCHARIN BAN DELAYED 18 MONTHS

The measure signed by President Carter enacting an 18-month postponement of the proposed ban on saccharin, carries a provision requiring stores handling products containing saccharin to post signs warning it may be hazardous to health.

Required only on products transported in interstate commerce, the

warning says: "Use of this product may be hazardous to your health. This product contains saccharin which has been determined to cause cancer in laboratory animals."

It must be "conspicuously" placed near the product name, and affects mainly diet drinks, but also will be placed on foods used by diabetics and persons on reducing diets.

AROUSED WICHITA CITIZENS MAY HEAD OFF FLUORIDATION

Although the council in Wichita, Kan., voted 4-1 to instruct the city attorney to draw up an ordinance to fluoridate the water, the issue is far from resolved, thanks to alert, concerned citizens and the support of NHF President Charles I. Crecelius and Science Director John A. Yiamouyiannis, Ph.D., in late November.

Their expenses paid by the Wichita anti-fluoridationists, the two presented testimony at a council hearing — testimony which apparently was ignored since the vote followed with little or no discussion.

After the meeting, however, at the suggestion of Mr. Crecelius, Dr. Yiamouyiannis met with a group and stayed over one day, preparing a petition requesting that before fluoridation is introduced in Wichita, the issue be placed before the voters. It is in the form of an ordinance which if approved by the council, would give the public a right to vote on it.

In just two weeks, 13,700 names were obtained on those petitions (9,800 qualified voters are required), and after the signatures have been verified (in 30 days) for voter eligibility, the council has 20 days to vote on the ordinance. If the council refuses

to approve such an ordinance, an election must be called, probably in March.

The National Health Federation, on the recommendation of President Crecelius, may hold a convention in Wichita prior to that election, as a show of support for those who want to keep the drinking water free from fluoride.

On his return to Monrovia, Mr. Crecelius said he could not recall when he faced a more hostile, "arrogant" proponent of fluoridation than the city health officer, who refused to permit the council to identify Dr. Yiamouyiannis as an "expert" witness.

"The vote was 'cut-and-dried,' from all appearances," he said. "The hearing seemed to be mere window-dressing. The testimony of the fluoridation/cancer link was ignored, obviously, by four of the five members of the council. But with the spirit and enthusiasm shown by those opposing fluoridation — such dedicated individuals as NHF's Mrs. Edna Johnson — Wichita may yet be spared that tragedy."

In previous elections, voters have twice rejected fluoridation.

FDA'S BLOOD-LABELING PROPOSAL WINS ORCHIDS

A proposal by the Food and Drug Administration to require labeling of blood for transfusion to specify whether it is from a paid or volunteer donor was lauded by NHF Executive Vice-President Clinton R. Miller as "great, needed, sensible — government's good side."

The regulations are designed to reduce the risk of transmitting hepatitis through blood transfusions. Blood from paid donors and commercial blood banks has been shown to be three to 10 times more likely to cause the liver infection than is blood from volunteer donors.

FDA's 'Laetrile House of Cards' Crumbles

The rigid position of the U. S. Food and Drug Administration, reflected in the intimidation and arrest of doctors around the country for their use of Laetrile, has been shaken to its foundation by Federal Judge Luther Bohanon whose 22-page opinion and two-page court order finally has stopped FDA in its tracks.

A stunning victory for the principle of freedom of choice, the opinion holds that Laetrile (amygdalin) is nontoxic when used in normal amounts, and that the FDA has no legal right to ban its use as a "new drug."

On the issue of toxicity, Judge Bohanon cited the testimony and evidence of 13 witnesses and sources attesting to amygdalin's nontoxic properties in commonly-applied dosages. "It is only within the context of FDA's creation of this record that the specter of Laetrile's toxicity has been raised," said Judge Bohanon. "The drug's reputation for nontoxicity, even among its opponents, is amply documented."

Discussing the contention of FDA that the substance is a "new drug," the court observed: "... Based upon FDA's own administrative record in this case, and the applicable statutes and case law, the court concludes that the agency's classification of Laetrile as a 'new drug' is 'arbitrary, capricious, an abuse of discretion,' and as a matter of law, unsupported."

... Advocates of Laetrile's use in cancer treatment include many highly-educated and prominent doctors and scientists whose familiarity

and practical experience with the substance vastly exceeds that of their detractors. To deem such advocacy 'quackery' distorts the serious issues posed by Laetrile's prominence, and requires disregarding considerable expertise mustered on the drug's behalf.

"While the record reveals an impressive consensus among the nation's large medical and cancer-fighting institutions as to Laetrile's ineffectualness, a disconcerting dearth of actual experience with the substance by such detractors is revealed.

"... There are many thousands of terminally-ill cancer patients each year whose diseases have progressed to a point where, for them, no drug exists which can fairly be termed 'generally recognized as safe and effective.' These are the persons who have been told they are beyond help and have been sent home to die. Should further treatment of these people be precluded by the (U.S. Food, Drug, and Cosmetics) Act? Certainly not. Individuals for whom no orthodox cure is available surely are entitled to select a health-care approach with which they feel compatible.

"The current debate is fierce. The issue appears largely unresolved as to Laetrile's true effectiveness, in large part because FDA has prevented adequate testing on humans. Nevertheless, the evidence of record does not render the (FDA) Commissioner's conclusion that Lae-

trile is not 'generally recognized as safe and effective'...

... As to the danger that Laetrile's use results in postponement of conventional treatments to the patient's detriment, it is to be noted that outlawing Laetrile has not resulted in disuse, but merely in large numbers of Americans traveling to Mexico. It has been estimated that each year 20,000 Americans afflicted with cancer travel to Mexico to receive Laetrile treatments. Thus Laetrile's illegality actually tends to remove many patients from the care of their American doctors.

"As to selecting Laetrile over orthodox, the record discloses that the vast majority of Laetrile patients first underwent the relevant conventional treatments. While isolated, tragic instances may have occurred in which Laetrile was used and conventional treatments avoided, to a patient's detriment, such persons might well have opposed orthodox approaches and remained untreated even were Laetrile unavailable."

RIGHT OF PRIVACY

Judge Bohanon's comments on the issue of constitutional rights of individuals to seek unorthodox cancer treatment are contained in these quotes from his opinion:

"... While the Constitution does not explicitly mention a right of personal privacy, it is unchallengeable that a right of personal privacy, or a guarantee of certain areas of zones of privacy, does exist under the Constitution." (Roe vs. Wade, 1973) ...

"Mr. Justice Douglas referred to 'the freedom to care for one's health and person' as coming within the purview of this right. ... The right of privacy," he proceeded, 'has no more conspicuous place than in the

physician-patient relationship. ...

"This right of privacy has been characterized more than once as similar to the right 'to be let alone.' ... That right includes the privilege of an individual to plan his own affairs, for 'outside areas of plainly harmful conduct, every American is left to shape his own life as he thinks best, do what he pleases, go where he pleases.' ...

"Many knowledgeable and concerned individuals are questioning the effectiveness and wisdom of our orthodox approaches to combating cancer. The correctness of their criticisms may not be determined for many years, and in any event such discussion provokes controversies largely beyond the realm of the courts' function. Nonetheless, it appears uncontrovertible that the patient has the right to refuse cancer treatment altogether, and should he decide to forego conventional treatment does he not possess a further right to enlist such nontoxic treatments, however unconventional, as he finds to be of comfort, particularly where recommended by his physician? ...

"We must carefully distinguish between the constitutional standards applicable to the use of an innocuous substance as a health-care aid, and those standards which apply to the promotion or advertisement of that same substance.

"Plaintiffs seek to exercise final control over the handling of their own individual health-care problems. Numerous cancer patients possess extensive first-hand experience with Laetrile which has led them to believe, correctly or not, that the substance has eased their pain and prolonged their lives. Such personal convictions are not readily dispelled by

(Please turn to page 9)

Bohanon's Landmark Order

Filed Dec. 5, 1977, in U.S. District Court, Western District of Oklahoma, here is the order signed by Judge Luther Bohanon which, unless overturned in an Appeals or Supreme Court ruling, permanently enjoins the Food and Drug Administration from interfering with any physician or cancer patient in the use of Laetrile.

"This action came on for determination by the court, and the issues having been duly considered and a decision having been duly rendered as set forth in the Opinion . . .

"It is ordered, adjudged, and decreed:

"1. The action of the Commissioner of Food and Drugs dated July 29, 1977, is declared unlawful, and such action, findings and conclusions are hereby vacated, set aside, and held for naught;

"2. Laetrile (amygdalin) is exempt from the 'new drug' requirements of 21 U.S.C. para. 355 (b);

"3. The Secretary of Health, Education and Welfare and his subordinates in the Food and Drug Administration are hereby permanently enjoined and restrained from interfering, directly or indirectly, or acting in concert with United States Customs Service or others, with the importation, introduction, or delivery for introduction into interstate commerce by any person of Laetrile (amygdalin) for the reason that application has not been filed or approved in the manner provided by 21 U.S.C., para. 355 (b) for a 'new drug';

"4. The Secretary of Health, Education and Welfare and his subordinates in the Food and Drug Administration are hereby permanently enjoined and restrained from interfering with the use of Laetrile (amygdalin) for the care or treatment of cancer by a person who is, or believes he is, suffering from the disease;

"5. The Secretary of Health, Education and Welfare and his subordinates in the Food and Drug Administration are hereby enjoined and restrained from interfering with any licensed medical practitioner in administering Laetrile (amygdalin) in the care or treatment of his cancer patients;

"6. The Secretary of Health, Education and Welfare shall distribute or cause to be distributed to all personnel within the Food and Drug Administration and the United States Customs Service concerned or involved in the enforcement of the Food and Drug Act, copies of the Opinion and Order herein, and shall file with the Clerk of this Court within 20 days of the date hereof his certificate showing distribution as required herein;

"7. This Order is binding upon the Secretary of Health, Education and Welfare, his agents, servants and employees in the Food and Drug Administration, present and future, and upon those persons in active concert or participation with them who receive actual notice of this Order by personal service or otherwise;

"8. The Clerk of this Court shall serve by certified mail, deliver to addressee only, return receipt requested, Joseph A. Califano, Secretary of Health, Education and Welfare; Donald Kennedy, Commissioner of the Food and Drug Administration; and Vernon D. Acree, Commissioner of the U.S. Customs

(Continued from page 7)

government pronouncements or affidavits to the contrary. When deprived of treatment in this country, they go elsewhere, and in so doing are denied close contact with their families and family doctors."

ON FDA'S BACK

"Unintentionally, FDA has wrought needless hardship and expense to countless individuals required to travel to Mexico or Germany to utilize Laetrile. If it were more readily available in this country, perhaps many patients currently obtaining the treatment abroad could be persuaded to remain under their doctor's care here, and use the substance in conjunction with conventional treatments.

"The final consequences are ultimately borne by those whose bodies are the battleground on which cancer's war is waged. Many perceive the drug's acquisition as a life-and-death matter, and are understandably frustrated and enraged over attempts by their own government to deny them the right to decide for themselves questions of such a personal and grave nature.

"Doubtless, FDA desired to protect the public. Such good intention, however, is not the overriding issue. Many of us allocate time and money and other resources in ways susceptible to just criticism by many standards. Nonetheless, our political ideals emphasize that the right to freely decide is of much greater significance than

the quality of those choices actually made. It is never easy for one who is concerned and who feels himself particularly knowledgeable to observe others exercise their freedom in ways that to him appear unenlightened.

"As a nation, however, historically and continuously, we are irrevocably committed to the principle that the individual must be given maximum latitude in determining his own personal destiny."

'SLIGHT UNDERSTANDING'

"To be insensitive to the very fundamental nature of the civil liberties at issue in this case, and the fact that making the choice, regardless of its correctness, is the sole prerogative of the person whose body is being ravaged, is to display slight understanding of the essence of our free society and its constitutional underpinnings. This is notably true where, as here, there are no simple answers or obvious solutions, uncertainty is pervasive, and even the best efforts leave so much to be desired. . . .

"This court's decision in this case in no way portends the return of the traveling snake-oil salesman. As emphasized earlier, the right to a harmless, unproven remedy is quite distinct from any alleged right to promote such. FDA is fully empowered under other statutory provisions to combat false or fraudulent advertising of ineffectual or unproven drugs. . . .

"The Commissioner's 'Laetrile' (Please turn the page)

Service and their attorneys of record, certified copies of the Opinion and Order herein;

"9. The Court hereby retains jurisdiction for all further orders appropriate and necessary to enforce this Order or to adjudicate any dispute arising hereunder. Any complaints arising under this Order by any party shall be heard by the Court on not less than five days' notice to the opposing party."

Decision of July 29, 1977, must be vacated. . . .

FDA'S ANSWER

The Commissioner's decision to which Judge Bohanon alludes followed a hearing in May at which FDA presented its case against Laetrile and attempted to defend itself against the judge's charge — upheld by an Appeals Court — that the agency had not constructed an administrative record justifying its refusal to permit the use of Laetrile.

In a case brought against FDA by Glen Rutherford and others, Judge Bohanon in January 1977 ordered FDA to prepare and present in court an administrative record of the reasons for its proscription of Laetrile. Its answer to that order was the FDA Commissioner's Decision July 29 declaring Laetrile unsafe, and a new drug subject to its regulatory authority.

THE JUDGE'S RESPONSE

"Meaningful judicial review," said Judge Bohanon in his December 1977 Opinion, "requires determining that an agency's course of action flowed from a proper interpretation of the relevant law, and a proper application of that law to facts sufficiently well-developed by agency inquiry as to reflect the truth of the matter in controversy. The court should intervene where it appears from a combination of danger signals that the agency really has not taken a 'hard look' at the salient problems, and has not *genuinely* engaged in reasoned decision-making. . . .

"The exercise of discretionary authority requires a decision based upon adequate information; to act without collecting necessary facts is abusive of discretion. . . . After collect-

ing the facts, appropriate legal standards must be applied. If administrative construction of a statute is clearly wrong, it is the court's duty to correct. . . .

"Having reviewed the Decision of the Commissioner of Food and Drugs on Laetrile, dated July 29, 1977, and the entire administrative record upon which that decision was based, and the pleadings and briefs, the court concludes that such decision is arbitrary, capricious, that it represents an abuse of discretion, and is not in accordance with law. Consequently, it must be set aside and vacated."

The judge also observed that "considerable evidence calls into question FDA's sense of objectivity in this case. When this suit was initiated, FDA had declared Laetrile a 'new drug' without ever having constructed an administrative record in support of such designation. Ideally, agency decisions and conclusions should flow from a probing and objective analysis of a carefully-amassed and encompassing factual record. When ordered to conduct an appropriate investigation, FDA begrudgingly announced its intentions to do so, and then previous to ever having received the evidence on which its conclusions are ostensibly based, FDA reaffirmed its same, entrenched positions on the salient issues in the case. . . . Understandably, many contributors to the administrative record expressed skepticism concerning the proceedings' fairness."

EXAMINER ERRED

"When an administrative officer is sitting in a dual role as judge of the law and trier of the facts, and when as judge he gives himself, as fact-finder, an incorrect instruction as to the law governing the decision he must make,

Creceilius Censures California Attorney General

'Long-Standing Bias' in Cancer Treatment Choices Deplored

Taking exception to comments about cancer treatment appearing in a state-supported publication, and accusing him of "continued and long-standing bias," NHF President Charles I. Creceilius has suggested to California Attorney General Evelle J. Younger that any discussion of cancer therapy by his office be "open," and "balanced." Mr. Younger in 1971 attempted to muzzle the National Health Federation and the International Association of Cancer Victims and Friends by preventing them from dispensing information about non-toxic therapies.

In a letter to the chief of California law enforcement, Mr. Creceilius said: "I have reviewed your message to senior citizens in the *Senior Crime*

Preventers' Bulletin (April 1977), dealing with cancer cures. It reflects a continued and long-standing bias on your part against those who wish to practice and follow minority health points of view.

"The bias would appear to date back at least to March 31, 1971, when you and your office took court action against the International Association of Cancer Victims and Friends, the National Health Federation, and its officers. It was action intended to deny the Federation and its officers the right of freedom of speech, of press, the right of people peaceably to assemble, and to petition their government for redress of grievances in health matters.

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error is committed, just as there is error if a judge incorrectly charges a jury. We must assume that the examiner applied the standard, as he stated it; and if he did, he erred, and on a question of law. The decision therefore cannot stand." (Williams vs. Ribicoff, 1963).

"FDA errs as a matter of law when it asserts Laetrile cannot escape new-drug classification unless it is shown that: 'It is currently intended solely for use under conditions prescribed, recommended, or suggested in its labeling on October 9, 1962.' Under this interpretation, if someone were suddenly to begin promoting aspirin for some new or unconventional purpose, all aspirin, regardless of its use, would ipso facto be subject to being

classified a 'new drug,' and regulated as such under provisions of the Act. The appropriate statutory construction requires that Laetrile be considered exempt from 'new drug' status to the extent it is currently being used for the same purposes and under the same conditions and labeling as on Oct. 9, 1962. . . . 1962 labeling characterizes Laetrile as a palliative agent for use in 'cancers beyond aid by standard agents,' and warns that 'it is not to be employed to the exclusion of surgery, radiation, or similar standard modalities so long as they are indicated.' . . . the '1962 grandfather clause' prevents Laetrile from being classified or treated as a 'new drug' when labeled in substantially the same manner as previous to Oct. 10, 1962."

"If successful, the action would have denied us the right to mention the food substance Laetrile as a possible supportive aid in the treatment of cancer. It would have prevented us from telling people where they might obtain a therapy legally available in 21 other countries.

"Although you would restrict our constitutional rights in this matter, a landmark victory was won by the IACVF and NHF in the California Superior Court on May 3, 1971, when Judge Max A. Wiscot refused to grant your request.

"It should be clear to you now, that actions by state legislatures vindicate the Federation and the organizations and individuals who have steadfastly argued for the right of individuals to select therapies of their choice. But since this most recent article from your office continues to imply that anyone who opposes orthodoxy in cancer treatment belongs to the 'quack' category, we cannot help but conclude that your bias continues.

"You have aligned yourself against those of us who wish to choose our own treatment for cancer and other illnesses, and you have used demeaning language in attempting to influence senior citizens against exploring possibilities that might offer greater relief than is currently available through conventional means. Your writer, Dr. John Bachman, has his own axe to grind. He should not be allowed the platform of the Attorney General's office for the free distribution of his views.

"In the future we would hope to see balanced reporting permitted for the expression of different opinions, as in any other field of endeavor.

"Since the final answer to the treatment of cancer and other degenerative diseases is not yet in, the

APPEAL FILED

It would appear that Attorney General Younger has had no "change of heart" in his view toward Laetrile therapy. He has filed an appeal to the Supreme Court on behalf of the State Department of Health contesting the Appeals court decision which overturned the Laetrile conviction of Dr. James R. Privitera, and found invalid the section of the California Health and Safety Code which bans the use of Laetrile.

subject should remain open, with information from all sources made available to the public."

(Ed. note: As of this date, there has been no response by Attorney General Younger to this letter).

PATIENT, DOCTOR CCS DIRECTORY

A unique service is being provided by the Cancer Control Society, 2043 No. Berendo St., Los Angeles—a list of 36 persons willing to share with others their experience with such nontoxic therapies as the Gerson, Kelley, and Hoxsey treatments, and Laetrile, and wheatgrass.

The range of diseases includes lung, brain, prostate, cervix, bladder, pancreas, breast, liver, nasal pharynx, colon, hip, and jaw cancer, and melanoma and Hodgkins disease. Addresses and telephone numbers are included, as well as the name and location of the doctors. The Society also publishes an updated directory of nontoxic therapies and diagnostic tests, available by writing or calling (213-663-7801) CCS in Los Angeles.

Editorial

Those FDA Posters . . .

As taxpayers, we are financing the distribution of a 60-second radio "spot," and the printing and mass distribution of 40,000 two-color posters warning the public against use of Laetrile as a cancer therapy.

A brain-child of frustrated Food and Drug Administration big-wigs, the poster has been compared with the "wanted" type posters used by the Justice Department to hunt criminals.

In bold red letters it carries the word "Warning" across the top, followed by a message including these passages:

"Laetrile can be fatal for cancer patients who delay or give up regular medical treatment and take Laetrile instead . . . One infant is known dead of cyanide poisoning after swallowing fewer than five Laetrile tablets. At least 16 other deaths have been documented from ingestion of Laetrile ingredients (apricot and similar fruit pits)."

Only twice before has FDA resorted to this type of attack on therapy of which it disapproves. During the 1950s, in a vicious campaign to drive Harry Hoxsey's cancer clinic in Dallas into oblivion, FDA plastered postoffices across the country with a blast at the Hoxsey treatment. And in the 1960s, a poster campaign was directed to stamp out sale of a device known as a relaxacizor, which FDA maintained posed a shock hazard.

The decision to condemn Laetrile via this means of communication comes at a time when the bureau has suffered a number of setbacks in U.S. courts, and in legislative halls around the country. With 13 states having legalized Laetrile, and with a no-nonsense judge in Oklahoma pinning FDA to the wall by insisting the agency follow its own rules before outlawing it, FDA officials have once again yielded to the temptation to use official muscle to enforce their will. One is reminded of the town bully.

Actually, as NHF Executive Vice-President Clinton R. Miller observed, the pro-Laetrile forces "couldn't have a better ally."

The nation's press has carried enough material for and against Laetrile (amygdalin) in cancer treatment to have given the public at least a hazy idea of what the argument is all about. Opinion polls show the public substantially in favor of free choice in selection of cancer therapy—a view not shared by FDA officials.

Thus, when the posters blare out the warning message, it simply reinforces the FDA image of pettiness and arbitrary behavior, and renews the determination of the "freedom-of-choice" champions to force FDA to accept the principle that each of us has a right to determine what we will or will not put into our bodies. That goal will be achieved. And the egg on the FDA face will get thicker and thicker the longer its decision-makers insist on bowing their necks.

— D.C.M.

Sloan-Kettering Fires Man Who Exposed Its 'Laetrile Coverup'

Although management failed to put it in writing when he was handed his walking papers, Ralph Moss, assistant public affairs director of Memorial Sloan-Kettering Cancer Center, New York, was fired from his \$20,000-a-year job because he "violated the trust that was placed in him" by representing a group critical of the Center's position on Laetrile.

Mr. Moss wrote the material for *Second Opinion*, a newsletter published by "rank-and-file employees" of Sloan-Kettering. (NHF members are familiar with the revelations by *Second Opinion* (Sept. 1977 *Bulletin*) of the Center's role in the Laetrile battle).

He was fired after he appeared at a news conference in mid-November, announcing his role with *Second Opinion*, which has documented its accusations that Sloan-Kettering has ignored some of its own research showing that Laetrile may be effective in treating cancer.

He told NHF Executive Vice-President Clinton R. Miller that he intends to "stay in the fight," and that he plans to write a book based on information gained while employed at the Center — material gleaned from various sources within the organization, and not flattering to the Center's "image."

Mr. Moss' discharge followed the release by *Second Opinion* (Box 548, Bronx, N.Y. 10468) of a 48-page "Special Report — Laetrile at Sloan-Kettering," (\$2 a copy). It is a critical analysis, not only of the Center's role,

but of the monopoly system which inhibits medical research and impedes development of new therapies.

'INCOMPLETE, INVALID'

Summarizing the Sloan-Kettering involvement with Laetrile, *Second Opinion*, "Special Report" . . . said: "The Memorial Sloan-Kettering Cancer Center (MSKCC) Report on amygdalin, or Laetrile, is both incomplete and scientifically invalid.

"It is incomplete because at least half a dozen experiments with amygdalin performed at the Center between 1972 and 1976 have been omitted from the Report. They are described for the first time in this monograph.

"It is invalid because specious arguments are advanced for the value of the animal model used in most of the experiments, the spontaneous breast tumor of CD8F1 mouse. The nature of the scientific controversy over how best to detect metastases, or secondary tumors, in mice is also misrepresented.

"There are numerous errors in many of these experiments which allegedly prove amygdalin's ineffectiveness as a palliative or cure of cancer.

"On the other hand, the positive experiments with amygdalin carried out by veteran researcher Kanematsu Sugiura appear to be valid, and are not successfully challenged by the report.

"There is still a need for further examination of amygdalin, as well as related compounds, in spontaneous

tumor systems in animals and in man."

POLITICAL ANALYSIS

In a "political analysis" of the reasons *Second Opinion* believes Memorial Sloan-Kettering "misrepresents the results of its Laetrile tests," the *Special Report* asked that those "who do not share our political perspective, not reject our scientific critique because of ideological differences."

(In a country) "in which the profit motive is king . . . the competitive, dog-eat-dog spirit also pervades the world of medicine. . . . While some doctors are truly devoted to their patients' welfare, all too often the doctor's concern for the sick loses out to his own self-interest. The medical profession as a whole is organized to defend its own narrow economic interests. . . .

"In fact, the medical profession reacts with knee-jerk rapidity against anything which could overturn the apple cart and bring about sweeping changes in the way medicine is practiced, or which would undermine the almost-complete monopoly the profession possesses in all matters of health. . . .

"This general atmosphere in medicine helps to explain what is happening to Laetrile. This is not to say that Laetrile is an effective anticancer agent. . . . But no one can honestly deny that the theory behind it is not provocative and challenging. . . .

"This closed-mind attitude can be illustrated by an incident that took place at Sloan-Kettering several years ago. A person prominent in the Laetrile movement was quietly invited to speak to a select group of doctors. After he finished presenting his 'trophoblastic theory of cancer,' —

which holds that cancer is a single disease rather than many different diseases and that Laetrile is a sweeping preventive and cure — a leading SKI chemotherapist exclaimed: 'Well, if that's the case, there isn't a need for Memorial Sloan-Kettering Cancer Center any more, is there?' He proceeded to storm out of the room."

CANCER BUREAUCRACY

"But doctors alone are not responsible for Laetrile's suppression. For with the passage of the National Cancer Act and the disbursement of billions of dollars in research funds, an extensive cancer bureaucracy has grown up to administer those funds. These bureaucrats at the National Cancer Institute, the American Cancer Society, the Food and Drug Administration, and Sloan-Kettering itself are enmeshed in their own continual, narrow power plays and jealously guard their own ground. . . . We do not believe that anybody is deliberately and maliciously sitting on a cure. Rather, bureaucracy engenders a generally-stupefying conservatism. Issues are avoided, and no one wants to be the 'bearer of ill tidings.' . . .

"There is an unhealthy skepticism, and even cynicism, about anyone else's claims to progress, especially if it relates to therapy. This is understandable in bureaucrats and fund-raisers who must promote their own institution's work above all others. Even about your own work, it is far safer to talk in general terms about the progress being made than to make specific claims that can be proven or disproven."

FEAR OF THE NEW

"Rather than a conscious conspiracy, you often find a blanket of apathy

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or fear about new things. The chronology of the Laetrile tests illustrates this, we think. Why, for example, did it take five years to publish this paper (which still isn't officially published, as of this writing)? Why did it take six months for two experienced researchers (Stock and Martin) to design the first 'blind' test?

"Sadly, this foot-dragging and fearfulness, vacillation, cynicism, and delay are all too common at Sloan-Kettering, and we suspect, at other large, centralized research centers as well.

"Scientists suffer in this situation. Whether or not they realize it, they are surrounded by 'electric fences.' So long as a scientist sticks to a safe topic, on well-trod ground, and develops cozy relationships with his peers, he is left alone. If he does good work, he will be rewarded with grants and contracts.

"When a lab's work progresses to the point where it has medical implications, the difficulties really begin. The safe thing is to draw back, go back to your test tubes and 'further studies.' If the scientist persists with a new therapeutic idea, he is bound to run into heavy opposition from those who already occupy the space he is vying for. He finds he cannot get patients to try his new compound on, even if they themselves are willing. He cannot get cooperation from other departments. He cannot get funds, laboratory space, even government grants!

"There are a number of exciting, imaginative and worthwhile therapeutic ideas presently 'kicking around' Sloan-Kettering. Experience has shown that few will ever be given a fair test, much less become established forms of treatment."

Board is intertwined with the personal and business needs of the men on the board, and the general needs of their class."

SOME HISTORY

"The Astors founded Memorial Hospital largely because two members of the family were dying of cancer. James Douglas, president of Phelps-Dodge mining company, was fascinated by radium, as a miser is enthralled by gold. He set up an elaborate mining and marketing scheme under government auspices to handle radium, then selling for \$150,000 a gram. We are told he did this for the sake of poor cancer victims, but he himself wrote, 'All this story about humanity and philanthropy is foolish. I want it understood that I shall do what I like with the radium that belongs to me.' (H. H. Langton, *James Douglas: A Memoir*, Toronto, 1940, p. 118)

"At the time of the Depression, the Rockefeller took over control of Memorial. John D. Rockefeller then entrusted his interest in the hospital to Frank Howard, vice-president of research at Standard Oil Co. Howard, in conjunction with 'Dusty' Rhoads, began to envision a great research institute attached to the hospital which would seek out a chemical cure for cancer, analogous to the newly-discovered 'sulfa' drug Prontosil, the first modern antibiotic.

"There was a catch to Howard's 'humanity', however, just as there was to Douglas's. Drug companies reap superprofits through the perfectly-legal expedient of patents. In the eyes of Howard, the cure for cancer had to be a patentable cure or it simply was not worth the effort.

"To undertake a costly industrial

research or development project, he wrote, 'without inquiring into the patent situation is like drilling an exploratory oil well without finding out who owns the property on which you drill.' (Lecture at George Washington University December 5, 1956).

"Upon the founding of SKI, Howard drew up a legal agreement called the 'Standard Form', under which SKI agreed to test various compounds for the drug companies, to keep completely silent about its research in progress, to give the companies the right to review all papers about its product, and to provide patents or free licenses to the company should the product turn out to be valuable. Methotrexate, one of the most widely-used anticancer agents, emerged from this program as the possession of Lederle Laboratories, a division of American Cyanamid chemical company (a director of American Cyanamid, James Fisk, sits on the MSKCC Board and is in fact, Chairman of the Board of Sloan-Kettering Institute).

"What's wrong with that? you might ask. At least they're developing a cure for cancer! What is wrong is that promotion of one kind of cancer therapy has brought with it suppression of other kinds. In this case, a chemical cure for cancer was promoted to the rafters, while most other approaches were ignored or suppressed."

PREVENTION? NO!

"The most glaring and tragic example has been suppression of the field of cancer prevention. According to various estimates, 50% to 90% of all cancers are environmentally caused. To this day, however, SKI has only the most paltry program in cancer preven-

(Please turn the page)

'THIRD FORCE'

"A third force which makes a fair test for Laetrile almost impossible is also the most powerful: the Board of Trustees. The Board's meetings are closed to the public, and in fact, no notes are kept of what transpires. A look at composition of the Board, however, shows an awesome concentration of power. These are among the richest and most powerful men in the world.

"Of course, most members of the Board are basically ornaments — big donors or once-a-year fund-raisers. A handful are really active in the affairs of the Center and personally direct the Administration: they include Laurance S. Rockefeller, Chairman of the Board, Benno Schmidt, Vice-Chairman, and a few others.

"These men are all investment bankers. Their primary business interest may therefore seem to be divorced from the realms of cancer research, but actually the two can be closely related. Making profitable investments is often dependent, on knowing the latest developments in technology, and Laurance Rockefeller in particular has made much of his money by investing at the initiation of technologically-oriented businesses (Eastern Airlines, McDonnell Douglas, Mallinkrodt Chemicals, etc.) 'In venture capital investment, the main line of Mr. Rockefeller's activities has involved new or young enterprises operating on the 'frontiers of technology,' according to his official biography.

"There is nothing illegal about this, but being on the MSKCC Board clearly gives these men access to some of the best scientific talent and ideas in the country, in addition to whatever benefits the position confers. The history of the Memorial

tion: only three or four individuals out of several hundred are seriously working on the preventive approach.

"Is it accidental that a research center which has on its board the president of Exxon, a director of American Cyanamid, and the Philip Morris tobacco company has no serious program to study the environmental origins of cancer? We don't think this is a coincidence.

"In fact, we feel it is inherent in the nature of our entire economic and political system that threatening and revolutionary scientific ideas *can* be suppressed. There is a 'good' reason for this.

"In huge corporations, enormous sums of money are invested in new plants. These plants are supposed to last a certain number of years before they are obsolete. But science knows no bounds: new inventions, unbridled, can lay low a factory as effectively as a missile! Look at what the transistor did to the vacuum tube business, or what the calculator did to the adding machine. . . .

" . . . Modern-day monopoly capitalists have such power over their industries and the economy as a whole that they can delay for many years the appearance of revolutionary techniques which threaten their profits. . . .

"This suppression is not limited to cancer, nor is it a recent thing. Justice Louis Brandeis pointed out over 50 years ago that the gas companies tried to suppress the electric light, the electric industry then suppressed development of neon lighting, Western Union fought against the telephone, and then both Western Union and the telephone company opposed radio. In 1937, the Federal Communications Commission found that Bell Telephone had bought up and locked in its

vaults 3,400 useful patents for fear a competitor would get hold of them. . . .

"Unless one sees the difficulties of Laetrile and other such therapies or approaches as part of this *objective* process of our society, one is left with the 'devil' or 'conspiracy' theory. Unfortunately, some people in the leadership, some people in the 'Laetrile movement', even in its leadership, take this view of things. . . .

"Our interest in Laetrile has always been to have it be adequately tested and to have *all* those research results released. If it is indeed a useful agent (whether as preventive, palliative, or cure), *all* patients should have access to it, including the poor. If it is useless, as determined by fair and extensive tests, we would oppose its use. . . . As Dr. Virginia Livingston points out, 'freedom of choice' is not very meaningful to the poor who cannot afford *any* decent cancer treatment. . . .

"We recognize that the FDA has played a suppressive role in the Laetrile controversy and that some of its leaders epitomize a kind of arrogance and pigheadedness which simply is incompatible with good science. On the other hand, we think the FDA provides *some* (although hardly enough) protection against the introduction of poisons, and especially carcinogens, in our food and drugs.

" . . . The focus of the Laetrile movement should be to mobilize large numbers of people to demand the truth from the scientific establishment about this agent, and all issues relating to cancer. Exposure of the Laetrile coverup already has been an eye-opener for tens of thousands across the country. It could become a revelation for millions about the real nature of this system."

McNaughton Pleads Guilty to One Charge, Others Dropped

As a result of a "plea-bargaining" agreement with the U.S. Justice Department, Andrew R. L. McNaughton, president of The McNaughton Foundation and longtime protagonist of Laetrile in cancer therapy, has pleaded guilty to one count of "conspiracy to facilitate the transportation of Laetrile," and was placed on two years' probation by Judge William B. Enright.

The government agreed to seek dismissal of other indictments brought against him, with 15 other defendants, and to not recommend that he be jailed. The government further said it would not take a position on the issue of Mr. McNaughton's motion for a judicial recommendation against deportation proceedings pending before the Immigration and Naturalization Service. (He is a British citizen).

The specific charges to which he pleaded guilty involved delivery of Laetrile between 1970 and 1973 to Dr. Emory Thurston, at that time head of General Research Laboratories, Van Nuys, Calif.

Before entering a plea, Mr. McNaughton read the following statement to the Court:

"I understand that at a future date I will have opportunity to set forth the circumstances which have resulted in my being before you today. Now, with the Court's permission, I wish only to make a few brief remarks prior to making my plea.

"As the Court is perhaps aware, I returned from Mexico where I was living, and surrendered myself voluntarily as soon as I was informed of my indictment in this case.

"As a British subject, I could easily

have remained abroad and avoided any trial. I returned for two principal reasons: (1) Because it is my dearest wish to one day become a citizen of this country; and (2), as one of the leaders of this 'Laetrile crusade' I felt a moral imperative to answer in person the charges against me in this country.

"For more than 21 years, I have expended most of my time and all of my then-not-inconsiderable fortune as a member of an ever-increasing group seeking to advance the orderly development of Laetrile for the prevention and control of cancer.

"Indeed, in 1970, my foundation held, for a brief period, a permit (No. 6734) from the Food and Drug Administration authorizing us to carry out human clinical trials of Laetrile in hospitals in U.S.A.

"When this permit was withdrawn, for reasons which to many appeared inadequate, I concentrated the operations of my foundation in Mexico where we were already engaged, with the approval of the Mexican authorities, in human testing of Laetrile as a component of an overall metabolic therapy.

"At the time of the offense for which I am charged, I was greatly concerned about those American patients who, having been treated in Mexico, had improved to the point where they were able to return to their homes in the U.S.A., provided they were able there to obtain Laetrile with which to continue their treatment. This concern led me in July of 1970 to make certain arrangements with Dr. Emory Thurston of General Research

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Caution Against Poisoned Pears

Following considerable research, Edith Jane Parke of Temple City, Calif., has concluded that because of a deadly pesticide, it's safer to not eat pears from the 1977 pack.

"When in doubt," she advises, "just don't eat pears, either canned or fresh. Del Monte canned pears in June and/or July. Supposedly they turned down California pears, preferring those from Oregon and Washington.

"Formerly-used pesticides had been taken off the market, so to save the pear crop in Oregon and Washington from a loss of \$13 million, the Environmental Protection Agency allowed BAAM (containing the toxin Amitraz made by the Upjohn Company) to be used, even though it is a

suspect cancer agent (mouse and rat studies). Roughly 53% of all U.S. pears are grown in these two northwestern states. Whether peeled or not, the spotless pears in the produce sections of any market could have been sprayed with BAAM."

WANTS RABIES INFO

Mrs. Marilyn Gavran, 129 Howland Ave., River Edge, N. J. 07661, says she would appreciate hearing from "anyone whose dog had a reaction to administration of rabies vaccine." Mrs. Gavran is collecting material for a book on the subject, and says "such information would be helpful to a good presentation of material on rabies."

the government, since both the costs of the prosecution and of my defense are being borne by the people of this country.

"In extensive discussions these past months between myself and my attorney, Mr. Frank Nemser, and the U.S. attorney, Mr. (Herbert B.) Hoffman, we have reached an understanding which we consider fair and just, not only with respect to my case but also with respect to those others who were indicted with me.

"I understand that these original charges against me are now being dropped and replaced with a new charge of which I am truly guilty. Therefore, despite the fact there are, I believe, many mitigating circumstances which I will present at an appropriate time, I now plead guilty to the superseding information for which I stand accused before you today. Thank you for your patience."

Atkins Defends Position, FDA, Others Disagree

Conflicting Views on Value of High-Protein Diet

Is the liquid high-protein diet dangerous to health? The Food and Drug Administration believes it is. In public pronouncements the agency has said unsupervised and unformed use of this product had created a "serious health hazard" across the country.

"It is clear, said FDA Commissioner Donald Kennedy, "that low-calorie protein diets, especially the liquid protein diets, have great potential for damage."

The deaths of 31 women and two men who followed such a regimen about five months and lost an average of 90 pounds have been attributed by FDA to the liquid protein diet.

The agency has asked 29 manufacturers of liquid protein to voluntarily include a health warning on labels until FDA completes legal steps to compel the labeling requirement. The proposed label warns against use of liquid protein without medical supervision, particularly while taking

other drugs. In addition, says FDA, liquid protein never should be used by infants, children, pregnant women, or nursing women.

The commissioner also urges diet-ers using liquid protein "to find a doctor knowledgeable about weight reduction." Use of such a diet without a doctor's advice, he says, "could lead to serious nutritional imbalances, especially of potassium. Other side effects include muscle weakness, cramps, dry skin, or hair loss."

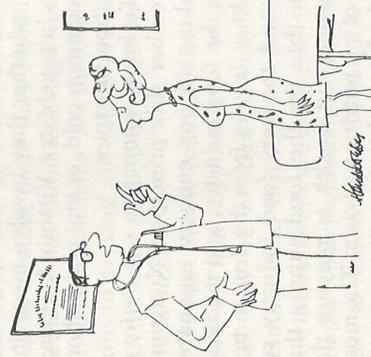
SHE AGREES

One person who agrees with the FDA position has written NHF Executive Vice-President Clinton R. Miller that she blames serious physical disorders on such a regimen.

"While at the Fairfield Centre in Montego Bay, Jamaica," said Carol Van Dyke, 125 Ray Mar Dr., Ormond Beach, Fla., "I promised you I would state in writing what I am pretty sure of — that the Dr. Atkins high-protein diet caused not only severe digestive problems, but also cancer.

"I went on the diet five years ago to lose weight, but had to stop after a month because I suffered so with indigestion and abdominal pains. It was at that time that a small mole appeared on my arm. It later turned out to be a melanoma. Surgery was the first step, followed by enzyme therapy, Laetrile, a vegetarian diet, etc.

"You have my permission to use my statement in whatever way you want, so that others might benefit from my experience. With so many 'fad' diets, particularly these high-protein, (Please turn the page)



"We treat illness here, Miss Rothbart. If you insist on being cured, you'll have to go to some quack."

almost-no-carbohydrate diets sweeping the nation, it is time someone shouts a warning. I wish you continued success in your work."

(ED. note: Whether Mrs. Van Dyke's cancer was coincidental to the month-long diet is a matter of opinion. Her comments are reproduced with the expectation it may spark a dialogue on the pros and cons of such a program).

DR. ATKINS' POSITION

The high-protein diet gained favor in 1972 with publication of *Dr. Atkins' Diet Revolution*. He has come out with a new book, *Dr. Atkins' Super Energy Diet* (Crown Publishers, Inc., New York, \$8.95), in which he offers "super energy" diets for four kinds of individuals: (1) The overweight and obese; (2) those who are too thin and can't gain weight; (3) those whose weight is what they want it to be; and (4) people with special problems such as pregnancy, or a condition requiring special medication.

The doctor's first book was condemned by the medical establishment, FDA, and the food industry. In his new book, the New York cardiologist and specialist in obesity says he "never could live with myself if I backed down or compromised on a position I know to be true. Is Robert Atkins really a nut, a hoax? Then what about the tens of thousands of persons writing and calling saying how much better they feel? Are they (the medical establishment) after me because I didn't first publish in a medical journal? Hardly reason enough for this much flak. Is it jealousy that my book was so successful and they think I'm getting rich? I would have made more per hour collecting old Captain Marvel comic books. Or do the leaders of the American Medical Association, the FDA, major drug companies, and

SHE SUPPORTS FDA PROTEIN WARNING

In her Report to the Consumer (Nov. 1977, No. 162), Consumer Activist Ida Honorofis sharply critical of "second-hand protein, dotted up with chemical additives and preservatives . . . contaminated with heavy metals, PCBs, fluoride, etc.," and wonders why the Federal Trade Commission has not acted sooner to warn the public of a total diet of liquid protein. Her article, taking segments of the health-food industry to task, covers the dangers of excessive protein to infant lives, and advises people to "stick to unprocessed, untampered, unadulterated food for good health — vegetable protein the way God meant you to eat." The newsletter is published in Sherman Oaks, Calif., P.O. Box 5449.

the food industry do their best to repress advances that are unorthodox or that involve nutrition or that threaten their profit picture?

"Whom can you believe? I want to tell you something that will help you understand *all* nutrition controversies, whether they involve megavitamins in psychiatry, Vitamin C against the common cold, or *any* claim about nutrition therapies.

"To know whom you can believe, remember this principle: Nutrition-thinking in our country emanates from the food industry, and medical thinking derives from the drug industry. And the very food industry responsible for the food supply that threatens our health is playing the role of our nutrition advisor. The more you look into this, the more you will see how widespread is this conflict of interest."

Dilling Demands 'Corrective Statement'

The FDA attack on protein is bitterly condemned by Attorney Kirkpatrick W. Dilling who says the effect of the publicity about liquid protein diet has been to discourage protein intake in general. The attack has "unfairly caused heavy economic hardship to several companies," he says.

Representing one such company, distributors of a protein product used in connection with "a balanced dietary program," he met in mid-December in Washington with top FDA officials to request "a remedial and corrective statement clarifying the differences in protein."

Mr. Dilling said he told Dr. Allan Forbes, nutrition director of FDA, that minutes of the ad hoc advisory committee (upon whose findings the FDA based its protein recommendation) "state there is no cause-and-effect relationship between the deaths and protein."

"FDA has no foundation for what it has done," says the attorney. "They are trying desperately to find some basis to justify their action. I told them the FDA Commissioner should issue a corrective statement to the minutes of the Oct. 26, 1977, meeting referred to in the Federal Registry Order of December 2 to the effect that: 'The cause-and-effect relationship in regard to these deaths has not been established.'"

"I assume the Federal Registry Order is meant to deal with liquid protein. The sweeping order should not include all protein supplements. Our clients make it very clear that along with the protein diet, the consumer should eat at least one good, balanced meal a day. A diet of liquid protein alone is unbalanced. We've always known that if you starve yourself to death, you will die. But what's that got to do with a balanced, natural regimen in which one loses weight?"

The October 1977 issue of *Better Nutrition* carried a review of *Dr. Atkins' Super Energy Diet*, pointing out that in treating more than 10,000 patients, he has found that sugar and refined carbohydrates "are the chief villains in causing not only overweight, but diabetes and hypoglycemia or low blood sugar."

He has become convinced, says the review, "that supplements are essential, may be needed in very large amounts, and that each individual's nutritional needs are different . . . The chapters on vitamins and minerals are easy to understand, and helpful."

"Most significant is chapter 25 in which Dr. Atkins reveals what happened to his professional life when

his first book soared to the top of the best-seller list and stayed there month after month, when many thousands of people all over the country were enthusiastically following his recommendations, and reporting success . . .

"The impression was given that the diet created unhealthful side effects. The American Medical Association

asked physicians to report to them what terrible side effects they had witnessed in people on the Atkins diet. In the five years since 1972, not a single such report has been made to AMA . . . He was attacked unmercifully in the medical and general press.

Always his response was to invite critics to examine the files on his more (Please turn the page)

KUGLER'S NEW BOOK ON AGING MAY BECOME BEST-SELLER

"... Healthy, active oldsters are not special people — they are not much different from you and me. We all have the potential to be as vigorous as a Churchill, as prolific as Grandma Moses, if we follow the right health habits and take reasonable precautions in our lifestyles..."

With this as a cornerstone of his philosophy, Hans J. Kugler, Ph.D., NHF member and convention speaker, has produced *Dr. Kugler's Seven Keys to a Longer Life* (Stein and Day, available NHF Monrovia, \$8.95 plus 75¢ postage/handling and tax for Californians). And it looks like it could become a best-seller. On the market for only a week in November, it went into a second printing. It was serialized in the *New York Post*.

Dr. Harold Rosenberg, New York, in a review for the *Journal of the International Academy of Preventive Medicine*, noted that many say "there are too many books being written about health, and each book is a rerun of someone else's. This is hardly the case with Kugler's latest book. Its

than 10,000 patients. To date, no one has taken up this challenge..."

"There is a chapter on children, and the necessity of protecting them from the first days of life from the ravages sugar can bring. There is a list of carbohydrate units in some 200 foods and beverages. There are 11 pages of references for statements made. And finally there is a blank to be completed and sent to Dr. Atkins to help in a national diet study, with participants receiving a summary of results."

theme is based on well-documented experimentation, patient observation, as well as personal experience. It is a sound book, full of the latest weaponry and facts in the battle against degenerative disease... In an intelligently-easy manner, Hans explains how to combat the impact of aging... His *Seven Keys to a Longer Life* contains questionnaires that should prove invaluable to both lay and professional readers in assessing de-aging programs..."

Purpose of the book, says Dr. Kugler in the introduction, "is to help you live longer and better by acquainting you with the most recent findings in the field of aging research, and by helping you incorporate those findings into your lifestyle. A few of the treatments described are not available in the U.S. because they have not yet been approved by the Food and Drug Administration. Many observers, myself included, believe that in its attempt to keep harmful substances from reaching the American public, the FDA unnecessarily withholds many valuable drugs from distribution. My intention is to inform you as to which medications have been used effectively and are available in other countries so you can ask your doctor about them, follow their coverage in the news media, and decide for yourself whether to pursue them."

In response to the rhetorical question, "Just what causes aging?" the author presents his pioneering work on the center of aging in the brain, and concludes that many aspects of aging

Send Your Tips to National Suggestion Box

Do you have any ideas you'd like to present the new Administration in Washington? We don't guarantee they'll be acted on — but there is an address now, and if frustration hasn't already made you a letter-writing dropout, you might give it a try:

National Suggestion Box
Box 2009
Washington, D.C.

S. W. Mattoon, organic farmer, Box 280, Penrose, N.C., told NHF President Charles I. Crecelius that he has sent material "that would exactly fill the needs of the appeal — 'ideas... helpful to the public...'"

"The information I have in the health field," he says, "has been blocked in past years by the FDA and the AMA. I have been trying to get a manuscript on the subject published — and in time, it will be. I tried to publish the story of the findings of the original work in allergy but without success... A foreword now has been written by an M.D. who used the method in private practice for years,

can be avoided. We should not only live longer, he believes, but "we can stay mentally and physically fit longer as well."

In a section titled "Improving the Quality of Life," he deals with "the ideal" nutrition, exercise, smoking, environmental factors, alcohol and other drugs, and stress. Prevention of heart attacks, cancer, senility, and other disorders is discussed in 67 of the book's 245 pages.

Three chapters are devoted to "three giant steps toward dealing with the true causes of aging": vitamin requirements "plus an added ingredient;" "new horizons in aging re-

as did hundreds of other physicians across the country..."

The essence of Mr. Mattoon's letter to the Suggestion Box was that "knowledge of how to avoid the bulk of our allergy problems... by avoiding pitfalls in food purchases and uses... can be easily conveyed to lay persons... The original method used to determine the allergens of so many patients is found in the U.S. Patent Office, titled "Diagnosis of Allergies," patent number 2,570,339, dated Oct. 9, 1951."

SHE WANTS HER HOME BACK; ACS SAYS NO

Datedlined Fort Lauderdale, Fla., United Press International reported that Constance Yarde has filed suit against the American Cancer Society, contending it refuses to return to her the title to her \$150,000 home. Ms. Yarde said she signed her home over to the society in 1976 when she was admitted to a hospital with what doctors said was terminal brain cancer.

search" which touch upon cell therapy and nucleic acid therapy; and the chapter on the center of aging in the brain. Chelation therapy, Laetrile/enzyme/vitamin therapy, fasting, fluoridation, are among other topics considered. "Assigning priorities for your personal anti-aging plan," with chapter notes, completes the material.

Dr. Rosenberg ends his review with the comment, "Hans is a living expression of this book. He is charged with vigor and vim as well as exuding charm. All these qualities are created between the covers of his book."

Criticism of CU's Vit. C Bias Finally Accepted, Years Later

Dr. Donald R. Davis, research scientist associate, Department of Chemistry, University of Texas, Austin, spent two years and more than 40 letters to get a 400-word letter critical of its biased Vitamin C position published in *Consumer Reports*.

Titled "Vitamin C and Colds," his letter follows:

"Your February 1976 report, 'Is Vitamin C Really Good for Colds?', is improved over two published earlier, but bias and inaccuracies remain, and it is seriously flawed by CU's suggested limit of 120 mg a day, cold or no cold.

"In my judgment, CU's limit would deny readers most or all of the benefits reported in the cited Toronto studies. It ignores one of their two major conclusions — that 'increased daily intake appears to be beneficial in times of illness.' Contrary to CU's report, the data suggest that high doses are useful at the very beginning of a cold.

"You cite Dr. Terence W. Anderson's suggestion about so-called 'saturation' at 120 mg per day, but this does not apply to those with colds — they require much larger amounts for 'saturation.' A 120-mg limit probably leaves one little better off than the 'untreated' placebo subjects — the majority of whom, says Dr. Anderson, probably were receiving a generous intake from food or allowed supplements. The positive results came from additional intakes of at least 500 mg a week and/or still larger doses at the onset of a cold.

"CU speaks of the 'slight effect of Vitamin C,' but overlooks the national benefit in a billion dollars a year saved, and misery and harmful drugs

avoided, that would accrue from a possible 30% reduction in days off work or confined at home due to colds.

"Many of CU's other concerns are 'slight' by comparison. Individual Vitamin-C needs and responses vary, and no study is likely to establish what dose and regimen may work best for each person. Some find a much better response than the 30% average recorded in Toronto.

"CU says 'some individual cases have been reported of serious adverse reactions. But CU should say some speculations have been reported. Greater perspective is needed: People are injured and sometimes die from aspirin, antibiotics, and other remedies. Vitamin C is not in the same category, and shouldn't be called a drug. *We should* be wary of large doses, but what is large? Is it 400 mg a day I and many other worldwide routinely get in food? Is it the larger amount (for body size) ingested or synthesized presumably by all other mammals? Or the still higher amounts animals synthesize under stress? Man's ancestors lost their synthetic ability, and no one knows what amounts are useful for health, not just for colds. We need an open mind to find out."

Noting that this is "the first critical comment ever published by CU on its three biased and inaccurate stories published since Feb. 1971," and that it appeared "only after extraordinary effort," the Texas U researcher revealed:

"Ten months and 16 letters after I first questioned CU's second brief and thoroughly inaccurate report, CU agreed in writing to publish a letter of

Hair Dye Chemicals Found Carcinogenic

The Environmental Defense Fund, a public-interest group based in Washington, has filed a petition with the Food and Drug Administration asking for a cancer warning on permanent hair dyes used by some 25 million Americans.

Dr. Joseph H. Highland of EDF says a still-secret National Cancer Institute study has revealed evidence that two compounds used in the dyes — 4-methoxy-m-phenylenediamine and 4-methoxy-m-phenylenediamine sulfate have caused "a significant increase" of tumors in male and female rats and mice.

Dr. John F. Corbett, chairman of a technical committee of the Cosmetic

Toiletry and Fragrance Association, denies the EDF charges that the chemicals are a hazard to humans.

Dr. Highland maintains that "chemicals entering the bloodstream through the skin are just as dangerous as those ingested as food. "No one ever asked how many Tris-treated packages an infant would have to eat to get cancer," he asserted in response to Dr. Corbett's claim that humans would have to drink 20 bottles of dye a day during a lifetime to be exposed to the same amounts laboratory animals were given.

Among companies using the dyes are Alberto Culver, Clairol, Cosmair, Revlon, and perhaps others.

correction — after six more months of delay. Later CU reneged, on grounds of the long delay! Twice I appealed this logic to the directors, to no avail. I was told I might reply to the next report.

"Under this pressure, CU began to see the light with this latest report, but it is seriously flawed with misleading omissions, errors, and expert use of significance tests, not all mentioned above. The letter was revised twice to try to meet CU's objections, and was published after I refused to accept a CU version unless CU acknowledged authorship. In all, I have spent two years and more than 40 letters achieving this publication.

"The facts are, there have been 13 double-blind studies since 1940 of Vitamin C against colds caught in the usual way. Not all are equally reliable, but all save one have given the same results of fewer and/or shorter colds, with a 9 to 68% reduction in morbidity (average 32% in the 13 studies). These facts have been con-

sistently misrepresented by CU, the AMA, government agencies, and many nutritionists. Simultaneously, the spectre of overdoses is greatly exaggerated (CU refuses to identify its recently-alleged 'individual cases' of serious adverse reactions).

How can this go on? My experience is revealing. Biased, incompetent reports are left to stand uncorrected and unchallenged by reputable publications. As a result, many innocent hold views not in accord with evidence. Science is seriously vulnerable to bias. Failure to study original literature and permit criticism are deadly. Finally CU is moving in the right direction.

"... Linus Pauling describes his attempts to have CU publish a statement of 'correction, retraction, and apology,' in *Vitamin C and the Common Cold* (Bantam, 1971, pages 78-80). My efforts in 1974-75 are described in the *Austin American Statesman* (Texas newspaper) Feb. 2, 1976, p. 17."

'One Molecule of Carcinogen' May Start the Cancer Process

The saccharin controversy should not be allowed to change or eliminate the protection afforded through the Delaney Clause, in the opinion of Dr. Jean Mayer and Dr. Johanna Dwyer. In their syndicated column, the two nutritionists point out that "under this clause, the FDA is empowered to act against things like Red Dye No. 2, saccharin, and other substances found to cause cancer in man or experimental animals."

While critics of the Delaney Clause contend there is no proof that the high amounts of saccharin given the test animals are applicable to humans, "the Delaney Clause — or something like it — is necessary even though the data are not absolutely conclusive," write Drs. Mayer and Dwyer.

"For one thing, it is probable that carcinogens (substances causing cancer) and mutagens (those causing genetic change or mutation) are unlike other toxic substances. The major difference appears to be what we call the threshold effect.

"There are dosage levels of most toxic substances that are perfectly safe. Indeed, some substances such as vitamins A and D are toxic in large amounts and yet essential to human health at a lower level. In contrast, many scientists believe that *even one molecule of a carcinogen* may be enough to alter the structure of a cell and begin the cancer process. (Emphasis added). It is this vital aspect of the dispute over saccharin that has escaped public attention.

"For example, a recent British study found increases in the risk of lung cancer with any level of cigarette smoking, however low. Whether this may be true of all carcinogens can be determined only by long-term, large and costly studies, none of which have even begun.

"(In the) meantime we could apply the same risk-versus-benefit reasoning to cancer that we use for other dangers. For instance, we are unwilling to ban automobiles even though we know that 60,000 Americans die on the highways each year, and 1 to 2 million others are injured. On the other hand, we cannot pretend a risk of cancer does not exist by ridiculing studies with statements such as, 'Rats do not drink 800 cans of diet cola a day, and neither do people, so we have nothing to worry about from saccharin.'

"In conducting animal experiments, it is essential to employ a magnifying effect by giving large doses. From the point of view of both time and numbers, we must make the dosage of a suspected carcinogen large enough so the effect will not be missed. If a substance is not carcinogenic, it will not result in cancer, no matter what the dosage. In the case of saccharin, however, the evidence is clear that it does result in an increased risk of bladder cancer.

"Why then, the critics argue, haven't we seen a massive increase in human cancer rates since so many Americans use saccharin? A possible answer may

Solar-Heated, Cooled Offices Planned

A design incorporating a 25,000-square-foot solar-energy collector into a 250,000-square-foot state office building in Sacramento, Calif., has been approved by State Architect Sim Van der Ryn, who called it "an extremely bold and significant concept which . . . will make Sacramento the solar showcase and energy-conservation showcase of California and the nation."

The giant solar collector, set at a 45-degree angle, will be comprised of hundreds of dish-shaped reflectors that will automatically tilt to take best advantage of the sun's rays. Those rays will focus on pipes, heating them to steam as high as 300 degrees Fahrenheit. The steam will be converted to ice much as old gas refrigerators converted heat to cold. In warm weather, air will blow over the ice, cooling it for the building.

simply be that we haven't been using it long enough. Many cancers, such as the more common types of bladder cancer, may take 30 to 40 years to manifest, and we have been consuming saccharin in large quantities only since the early 1960s when it was introduced into processed foods and diet drinks.

"Therefore, it appears the FDA's action is reasonable. Saccharin should be barred from foods, particularly those consumed by children and young people who have many years to live.

"If there are people who want saccharin so much they are willing to accept the increased risk of cancer, perhaps it should be made available to them (by marketing it) as an over-the-counter drug with a clear label, such as the one on cigarettes, that

notes its dangers.

"The problem with this approach lies in trying to establish that saccharin has a possible health benefit, a requisite for an over-the-counter drug, when in fact the advantages of saccharin appear to have been greatly overestimated.

"There is little evidence that it has a value in weight control, even though it has no calories. While it is true that saccharin does allow diabetics to enjoy the taste of sweetness, under the circumstances this is a dubious benefit, especially for young diabetics.

"However, until we know whether there is a safe dosage level, it is reasonable not to allow saccharin in foods, or the Delaney Clause to be simply abolished."

Daytime temperatures will vary from about 63 degrees mornings to 74 degrees afternoons, according to Barry K. Johns, president of Benham Blair & Associates, designing architects, Los Angeles. When necessary, heat transferred from solar-heated water will warm the offices. Natural insulation provided by underground office space and thick concrete walls aboveground will be major energy-conserving factors of the structure.

— JOHN DREYFUSS
Los Angeles Times
(Excerpt)

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

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

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An Open Invitation for Contaminated Meat

Butz Study Recommends Letting Meat Industry Make Inspections

BY INDERJIT BADHWAR
(Federal Times)

... A recent analysis by Ken Blaylock, president of the American Federation of Government Employees... is a carefully-thought-out tirade against the meat and poultry industry and its handmaidens in the Department of Agriculture...

At issue is a study written by the management consultant firm of Booz, Allen and Hamilton for the Agriculture Department about food inspection practices. It was commissioned at a cost of nearly \$400,000 to the taxpayers by the great champion of agribusiness interests, Earl Butz.

Basically, the study calls for greater self-regulation by the meat and poultry industries. In other words, the functions performed by federal meat and poultry inspectors — checking to make sure the animals we buy in the supermarket are free of diseases and bacteria that can affect humans — should be turned over to company employees. The benefits? Cost-savings to the taxpayers. No more will taxpayers have to foot the bill for government meat and poultry inspection.

Mr. Blaylock has it dead right when he castigates the study for focusing on cost rather than value. "What is the value to the American consumer of having his health and that of his children protected against diseased, unwholesome, or adulterated red meat and poultry showing up as dinner one night? If costs were the primary concern, it would be simple enough to cut meat and poultry inspection costs by whatever percentage the budget and

manpower people dictated as desirable at any time. Thankfully, Congress has seen fit to continue funding the continuous inspection process as mandated by existing legislation."

What Mr. Blaylock is referring to is the difference between regulation and consumer protection. Perhaps, in the food and poultry inspection function, the government provides us with the only example of on-the-spot consumer protection. The meat and poultry inspectors' continuous presence in plants where they can see dirty hands to cigarette butts to diseased carcasses is one of the few examples of how the government can protect the consumer directly.

Regulation is different. Regulation calls for an industry to self-police itself by meeting certain prescribed regulatory standards, occasionally opening itself up to spot checks. The drug industry, for example, is regulated by FDA. Its record of self-policing is abysmal.

Food and poultry inspectors are the last of a rapidly-vanishing species whose monitoring skills were acquired at the marketplace, and who make sure the sirloin or broiler chicken you buy at the supermarket doesn't send you scotching off to the emergency ward.

The Booz, Allen, Hamilton study could destroy this profession and replace it with a quality-control mechanism of, by, and for the producers.

And I wonder, along with Mr. Blaylock, why the Agriculture Department (Please turn the page)

partment would permit the industry to inspect its own product despite the living example of the recent grain inspection scandals where the federal government merely monitored non-federal inspectors.

And history seems not to have served as a guide to the Booz, Allen recommendations. Upton Sinclair's novel, *The Jungle*, described the horrendous conditions which spurred the hoof-to-can inspection system under the Meat Inspection Act of 1906. Again, Congress acted in 1957 to create the Poultry Products Act. Legislation was enacted again in 1967 and 1968 to ensure the wholesomeness of meat and poultry products through federal inspection. And the recent grain inspection scandals which brought the country international disrepute led to creation of a direct federal inspection system.

Industry simply does not police itself where there's a buck to be made. The Booz Allen study tells us that there's a buck to be saved the taxpayer through the process of self-regulation. Mr. Blaylock rightly condemns this as financial legerdemain. The apparent inspection costs would be shifted from "the taxpayer-citizen to the consumer-citizen" as the industry passes on its own inspection costs in higher prices for its products.

Another important point: The consultant's report recommends that plant-line inspectors look at 2,100 birds an hour to speed up the inspection process. Currently, federal inspectors see about 1,500 birds an hour, and admit to a substantial percentage of inspection errors. Increase the number of birds per hour being seen by nonfederal inspectors, and the error rate will skyrocket.

The conflict-of-interest inherent in the consultant's scheme boggles the

mind. Only recently, Congress shifted federal mine safety inspectors from the Interior to the Labor Department because Congress figured the inspectors might be in a conflict-of-interest at Interior because of that department's official responsibility for increasing the supply of coal.

"That conflict which so worried Congress," Mr. Blaylock asserts, "is nothing compared with the conflict-of-interest that the contract consultant accepts in the case of authorizing poultry inspection by the producer itself."

And he adds that meat inspection techniques developed by federal inspectors, and proven empirically over the years, can get to the core of how the industry "deceives through technology. *We live in a time when things can be made to look and taste like ham, meat, sausage, and bacon.*" Federal inspectors ensure that such items are properly labeled, so the consumer knows what he's buying.

Anyone who tells the consumer he is economically better off with industry employees protecting his interests, is either very naive or is in fact not acting in the consumer's best interest, Mr. Blaylock maintains.

The Secretary of Agriculture should deep-six the Booz, Allen Study, and fast. Or we will be adding to the widespread marketing of dangerous drugs and cancer-causing chemicals, the widespread marketing of contaminated meat.

DE-WORMER

"Figs are useful for de-worming. The fig tree almost never is attacked by worms. Figs and fig juice paralyze any worms, even the tape worm, pin worms, round worms, etc. Learned this from my doctor."

— ORGANIC CONSUMER REPORT

THIS IS THE NATIONAL HEALTH FEDERATION

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

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

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

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

Will you join us in this worthy effort?

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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.

HELP SAVE OUR HEALTH FREEDOMS