

OPTIONS

Revolutionary Ideas in the War on Cancer



THE NEWSLETTER OF PEOPLE AGAINST CANCER

Volume 5, Number 3, November 1999

Government Poisons Citizens with Malathion

Editorial

The government has poisoned its citizens.

In a "Rush to Judgment" The Federal Centers for Disease Control (CDC), the New York State, New York City and Connecticut health departments have poisoned all of the residents of New York City and the surrounding areas with a toxic pesticide which causes effects similar to nerve gas.

What are we doing here.

Through inaction and government ineptitude, we have allowed poisons to permeate our food, air, water and environment.

Now we are **deliberately** spraying a substance which is a **known toxic poison** on our citizens in the hopes of killing a few mosquitoes which **may** be dangerous.

This is an outrage!

And where was the press?

The press, bought the whole story put out by government spin doctors, about a strange new virus, spinning stories about biological terrorism, without raising serious questions about the risks of spraying the entire population of New York City and the surrounding area with a toxic poison.

The breakdown products of Malathion kill the cytotoxic cells, the very cells in the human body that fight cancer cells.

The government will deny the risk and quietly and slowly bury the evidence one body at a time.

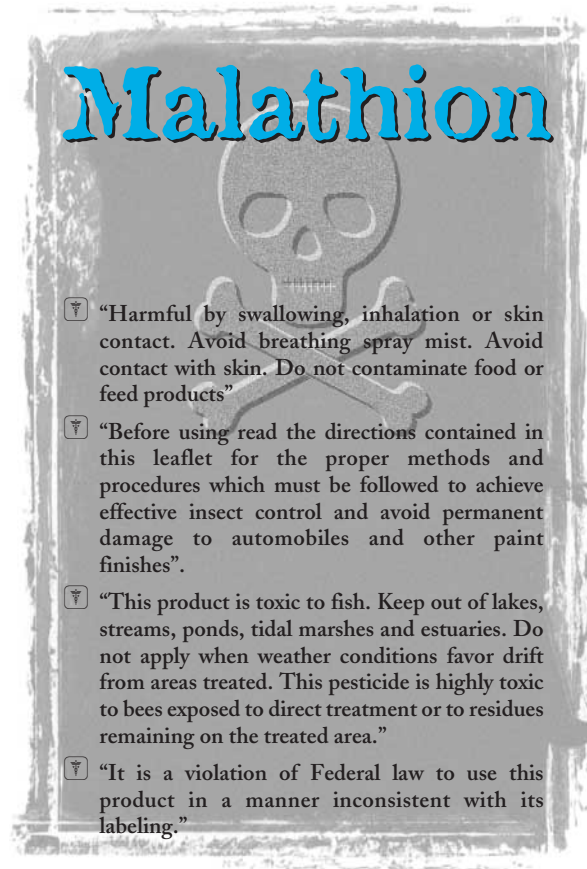
This is biological war fare.

The government officials are the terrorists and the American citizens are the victims.

God help us! We will reap a deadly harvest from this outrageous act. ☹

OPTIONS

Options: Revolutionary Ideas in the War on Cancer is published quarterly as the Newsletter of People Against Cancer. We hope you find it both provocative and informative.



☹ "Harmful by swallowing, inhalation or skin contact. Avoid breathing spray mist. Avoid contact with skin. Do not contaminate food or feed products"

☹ "Before using read the directions contained in this leaflet for the proper methods and procedures which must be followed to achieve effective insect control and avoid permanent damage to automobiles and other paint finishes".

☹ "This product is toxic to fish. Keep out of lakes, streams, ponds, tidal marshes and estuaries. Do not apply when weather conditions favor drift from areas treated. This pesticide is highly toxic to bees exposed to direct treatment or to residues remaining on the treated area."

☹ "It is a violation of Federal law to use this product in a manner inconsistent with its labeling."

ALSO IN THIS ISSUE

NIH Supplement Research 3

Torrey Morse: The Cancer Survivors Program 4-5

Cell Phones Linked to Cancer 6

Vaccine May Fight Prostate Cancer 7

Green Tea Against Cancer 8



PEOPLE
AGAINST
CANCER

The Malathion Controversy

In August, New York Health Officials identified a strange virus which was killing birds in the Bronx zoo. The U.S. Centers for Disease Control and Prevention (CDC) then made the link between the West Nile-like virus found in birds in New York City and the ongoing human encephalitis outbreak in the area.

Later the CDC identified a West Nile-like virus in tissue sample from a New York City resident who recently died from encephalitis.

In addition, CDC confirmed that birds and mosquitoes in Connecticut also have been infected with West Nile-like virus.

The CDC, the New York State, New York City and Connecticut health departments, recommended spraying the entire area with the insecticide Malathion.

New York Mayor Giuliani ordered the entire city, with all of its residents, to be sprayed with the insecticide malathion.

New York City officials from the Office of Emergency Management (OEM) began the spraying immediately. But critics contend that the cure might be worse than the disease.

There is scientific evidence that malathion is toxic to humans, fish and birds. There is also evidence that malathion is rapidly metabolized in the human body to maloxin which is a dangerous immuno-toxin. There is also evidence that the New York officials knew this and misled the public about the potential danger. More serious charges have been made that New York health officials may have violated both state *Malathion Controversy* continued on page 2

Malathion Controversy (cont'd from page 1)

and federal laws.

In an article entitled "Why is the Media Hiding The Truth About the NYC 'Epidemic' and the Deliberate Misuse of Malathion?" consumer activist, Robert Lederman, points out that public officials repeatedly claimed that Malathion was highly diluted. But, in fact, the Malathion that was aerially sprayed from the first day to the last was not diluted. It was an almost pure 96% jell concentrate of Malathion which was aerated by an air compressor right from the manufacturers original canister.

New York residents were sprayed with pure Malathion.

Additionally, Lederman points out, that in the New York City spraying, the manufacturer's instructions as listed on the product's label, Cheminova Malathion FYFANON ULV, were disregarded in virtually every single detail.

The Malathion label, specifically states that it is not to be sprayed on people, that people should not be allowed access to areas that have been sprayed for at least 12 hours, that it is not to be used near water and is not to be used so as to contaminate food supplies.

To calm the public, New York officials made public statements that only a minute amount of extremely diluted Malathion was used. Jerry Hauer, of New York's Office of Emergency Management (OEM) and Mayor Giuliani repeatedly described the application rate of three ounces per acre. It was described by the actual chemical applicator as being, in fact, three ounces of 96% pure Malathion on each NY City block.

In a tape recorded interview with Lederman, John Sondgeroth, who was in charge of the aerial spraying project said, "The way this material is used for mosquitoes, it's used directly from the container with no dilution; it's put out of the aircraft at that particular, that's three ounces per acre with no dilution." When asked why public officials would repeatedly tell the public that the Malathion was extremely diluted, Sondgeroth told Lederman, "I don't know how that whole thing transpired there. Sometimes you just say things people



**City of New York
Chem-bio Handbook
Rudolph W. Giuliani, Mayor**

Malathion is a commonly used organophosphate insecticide that causes the same biological effects as nerve agents. Malathion itself is relatively non-toxic, but it is quickly metabolized in the body to maloxin, which is the toxic material. This causes effects similar to those caused by nerve agents...Malathion can be absorbed by ingestion or through the skin.

Malathion: Decontamination consists of moving the patient to fresh air, removing all of his clothing and washing him thoroughly with soap and water. The responder must insure his own safety by donning appropriate protective apparel before handling the patient.

Chemical Effects: Chemical agents may persist longer in an urban environment than in an open environment since building materials are often porous and readily absorb agents, which will slowly be released later...protection can be improved by closing doors and windows, turning off ventilation systems and sealing all windows and cracks with tape.

Nerve Agents: Protect yourself by wearing a mask, gloves and a protective suit until the casualty is decontaminated. Remove casualty from contamination and contamination from casualty. Get the casualty away from the source, such as by moving him upwind or out of a contaminated building. If there is a possibility of liquid contamination, all clothing must be removed and the casualty must be showered or washed with soap and water, dilute hypochloride or water.

Malathion: Like nerve agents, Malathion inhibits cholinesterase to cause biological effects. By any route, the signs and symptoms resemble those caused by nerve agent exposure.

want to hear, you know, and these are the facts here as I know them pretty well, and some people say it's diluted. But in essence we know—I know—it's not."

In fact, Lederman states, "The label refutes virtually every statement we've been told about this product by Mayor Giuliani and OEM." It's also worth noting that one of many side effects of Malathion exposure is encephalitis!

But the most frightening thing of all is that Malathion contains impurities which weaken the immune system. According to a scientific study in *The Journal Immunology*, 140(2);564-570 Malathion has been shown to significantly weaken the cytotoxic lymphocytes ability to attack cancer cells and viruses in the human body.

Consumer activist Frank Wiewel, who heads a non-profit public interest group called People Against Cancer warns, "This is a toxic pesticide which is dangerous to humans. It was sprayed over the entire city of New York and all its residents. It works like a nerve agent. It causes immune suppression, which could lead to cancer. This may be a clear case where the cure is worse than the disease."

On November 11th, the Centers for Disease Control (CDC) admitted that Malathion sprayed over two Florida communities to kill crop-eating Mediterranean fruit flies, may have sickened 123 people last year. In one case, a woman with asthma who was exposed to malathion suffered nausea, diarrhea, coughing, wheezing and fatigue when she was exposed to the chemical.

Cheminova the company that manufactures Malathion, had no comment.

"People are spraying poison on your head," said Jeffrey Huggins of Tampa, a spokesman for the group Citizens for Responsible Alternatives to Malathion, which has been pushing to get Malathion spraying banned in Florida.

The CDC has now asked federal and state officials to look for less toxic, or pesticide free alternatives for wiping out the Medfly.

EDITORS NOTE: New research shows that certified organic young barley grass juice effectively degrades a variety of organophosphorus pesticides including Malathion. ☺

NIH Office of Dietary Supplements Announces Funding of Dietary Supplements Research Centers

WASHINGTON OCTOBER 6, 1999

The Office of Dietary Supplements (ODS) at the National Institutes of Health (NIH) has announced awards, in collaboration with the National Center for Complementary and Alternative Medicine (NCCAM), to establish the first Dietary Supplements Research Centers with an emphasis on botanicals. The Research Centers are expected to greatly advance the scientific base of knowledge about botanicals, including issues of their safety, effectiveness, and biological action. The competitive awards of approximately \$1.5 million per year for five years were made to the University of California at Los Angeles (UCLA) and to the University of Illinois at Chicago (UIC).

For centuries, numerous botanicals have been used with alleged or demonstrated effectiveness. In some developing countries, medicinal plants are utilized as a primary source of health care. In Germany, where many herbal remedies are regulated and prescribed as drugs, botanicals are also an integral component of primary health care. In the United States, a recent survey conducted by the Food and Drug Administration has indicated that millions of Americans use dietary supplements with botanical ingredients. However, health practitioners and consumers currently do not have adequate knowledge to evaluate critically the health effects of many botanical products in the market place.

To address these issues, Congress appropriated additional funds for the ODS in fiscal year 1999 to "develop a botanical research center initiative with major research institutions across the nation." The primary goal of this initiative is to foster interdisciplinary research, in order to identify potential health benefits and to develop a systematic evaluation of the safety and effectiveness of botanicals, particularly those available as dietary supplements.

The UCLA Center for Dietary Supplements Research on Botanicals,



directed by Dr. David Heber, will conduct basic and clinical research to explore the potential mechanisms of action of yeast fermented rice for cholesterol reduction with implications for heart disease prevention, green tea extract and soy for inhibition of tumor growth with implications for the treatment of cancer. Further, the UCLA group will conduct research on St. John's wort, an herb used for relieving mild depression, and will also assess the levels of bioactive compounds in several botanicals available as dietary supplements.

The UIC Center, directed by Dr Norman Farnsworth, will establish a Dietary Supplements Research Center with an initial focus on ten herbal supplements that have implications for benefit in women's health issues, including therapies for menopause. In addition to conducting basic and clinical research, the UIC group will support research training in pharmacognosy (the study of natural products, primarily plants). The UIC group will also provide information on botanicals to consumers and health professionals; educational activities will include an interactive website.

The two Dietary Supplements Research Centers will provide new insights and knowledge to the scientific foundation from which to assess the use of botanicals. They also represent the realization of scientific goals developed in the ODS Strategic Plan. In addition to the ODS and NCCAM, the Office of Research on Women's Health and the National Institute of General

Medical Sciences have contributed funding to this project.

Dr Charles Simone, a renowned conventional oncologist with a long interest in alternatives, points out, "The research that needs to be done concerning botanicals is to **Define the Active Component(s)** of each botanical—otherwise we are dealing with weeds. Right now, companies say they have a standardized form of the botanical—but all that means is that some certain **Spike** of activity, which could be an unrelated compound that does not have the desired activity, is reproducible with every batch of that particular botanical."

The Office of Dietary Supplements (ODS) was established at NIH in November 1995 as a result of the Dietary Supplement Health and Education Act passed by Congress in 1994. The mission of ODS is to strengthen knowledge and understanding of dietary supplements by evaluating scientific information, stimulating and supporting research, disseminating research results, and educating the public to foster an enhanced quality of life and health for the U.S. population.

Simone supports the fair testing of alternatives and also points out, "There is enough data concerning the rice fermentation product that shows it can lower cholesterol—in fact, it is the same compound that is being marketed as a prescription product with all of the same side effects—liver enzyme dysfunction, etc."

Frank Wiewel, a founding member of the Office of Alternative Medicine (OAM), now the National Center for Complementary and Alternative Medicine (NCCAM) in the National Institutes of Health (NIH) agrees suggesting, "While there is a long history of safety regarding the use of vitamins, minerals and botanicals, we desperately need to scientifically test all of these new products for safety, efficacy and cost effectiveness. Further, we need to focus on those substances with existing evidence as cancer therapy." ☐



It was 1978, and Torrey Morse was only 8 years old when she and her family discovered she had cancer.

Little did she realize that she would be in for the fight of her life.

Torrey was diagnosed with diffuse histiocytic lymphoma, classified as non-hodgkins lymphoma (NHL), an aggressive adult type of cancer, rarely found in children.

Her doctors recommended two to three years of chemotherapy followed by cranial radiation. After six months of chemotherapy Torrey was very sick with nausea and fever. She was bald and bloated. And worst of all, her doctors downgraded her chances of survival from 80% to 50%.

Her mother Margaret Berger Morse and her father Whitney Morse told the *Connecticut Post*, "We could hardly stand to watch this beautiful child physically change before our eyes. We did not want her to die! What were our choices? Did we have any?" Torrey said, "I don't remember talking about my fears of dying, but I used to dream about who would come to my funeral."

Just when things seemed the darkest, a church member told Torrey and her parents about a Greenwich physician, Dr John Beaty, who told them of an alternative cancer therapy known as Immuno-Augmentative Therapy (IAT) given at a Clinic in Freeport Bahamas.

They were encouraged by Dr Beaty's support for IAT. Beaty had observed the benefits of IAT in the patients he referred to Burton, and had followed many who had tumor regression, remission and long term survival with the treatment.

IAT was an unconventional immune therapy developed by a controversial American cancer researcher named Lawrence Burton PhD.

Burton believed everyone got cancer, hundreds perhaps thousands of times in their lifetime. But a healthy functioning immune system would patrol, isolate and

Torrey Morse: The

eliminate the cancer cells before they colonized and became tumors. In his research, he found deficiencies in certain immune proteins in people with cancer. He developed a method to isolate and extract these immune proteins from the blood of healthy patients. He then refined a method of augmenting the immune system, of people with cancer, with injections of these non-toxic natural immune proteins (see inset on IAT).

But, the Morse family knew it would be dangerous to take a child out of conventional therapy for treatment with an unconventional therapy not approved by the medical establishment in the US.

They had heard frightening reports that children had been taken away from their parents and taken into custody by the medical authorities and social services officials.

On March 16, 1979, unable to continue with the chemotherapy, with donations from friends and family, Torrey and her mother Margaret took a leap of faith and flew to the Bahamas.

Margaret Morse says, "We knew we wanted her to do a non-toxic treatment. It just made sense."

But there would be challenges ahead. Morse writes, "Do you have any idea what it feels like to step into an experience foreign to all you have known?"

They had extremely limited resources and had booked two nights in a Freeport hotel. They had no idea where they would stay for the six weeks necessary for her treatment.

But as soon as Torrey started the treatment, Morse wrote, "I saw her change within days. You could see a change in her whole demeanor and attitude. Once we got there, she's never been sick since."

Morse added, "Everyone at the Center had hope, even the most terminal patients." They met many who were far worse off than Torrey who were now well.

After five weeks in Freeport, Torrey was well enough to come home with home maintenance shots for the next six months. She would return each six months for a checkup, and a week or two of treatment. She now returns every year.

Torrey is now alive and well 20 years later.

Margaret Morse believes it was faith in god which helped them make the decisions which were right for them. She chronicles

the fascinating journey in her new book entitled, *Choices: A Journey of Faith—Torrey's Miracle* (available from People Against Cancer, Item #780, \$14 plus \$5 S/H).

Today Torrey is a vocational rehabilitation counselor with the State of Connecticut and a mentor in the Bright Springs Beginnings program for young mothers at Yale-New Haven Hospital.

Margaret Morse works within the Christ Episcopal Church and received her master's degree in theology from the Hartford Seminary. She writes and gives spiritual direction.

Immuno-Augmentative Therapy (IAT)

Lawrence Burton, PhD was a research scientist who studied cancer.

In the early 1960s, Burton discovered measurable deficiencies of certain immune proteins in the blood of people with cancer. He isolated the substances. He extracted the substances. And when he injected them into people with cancer they often produced remarkable results.

That's when his trouble started.

Burton, was a professor of medicine, a research immunologist, and the senior associate in oncology at St Vincent's Hospital in New York, where he made what some researchers claim may be, "one of the most important discoveries of the 20th Century."

A Background of Controversy

Burton earned his PhD from New York University in 1955. Between 1955 and 1965 he held positions at California Institute of Technology (Cal Tech) and New York University. Burton moved on to St Vincent's Hospital where he rose to the ranks of Senior Associate in Oncology. It was at St Vincent's where Burton and his team discovered substances which caused dramatic reductions of tumors, first in mice then in humans. During this period Burton and his colleagues published 17 scientific papers in the peer-reviewed scientific literature, appearing in such prestigious journals as *Science*, *Cancer Research*, *The New York Academy of Sciences*.

Of Mice and Men: Burton and His Discovery Makes Front-Page News

During this period, Burton made two spectacular public presentations. The first presentation took place at the American



Cancer Survivors Program

Cancer Society's (ACS) Science Writer's Seminar where Burton made tumors disappear in mice within an hour. The Story made front page news. The *Los Angeles Times* banner headline read, *15-Minute Cancer Cure in Mice—Are Humans Next?* But, as is often the case in paradigm shifting discoveries, the demonstration created a tremendous controversy. There were charges that Burton had committed "slight-of-hand" and secretly switched the diseased mice with healthy mice while no one was looking.

Seemingly undaunted, Burton arranged for a second demonstration in an attempt to put the controversy to rest. They chose the conservative New York Academy of Sciences. Burton injected the mice and the tumors disappeared. Though no one could come up with a plausible explanation of what happened, once again, there were immediate charges that the experiment was "a fake."

Burton Begins Treating People

In the early 1970's Burton focused his work on four factors which he and colleagues identified as *blocking protein, de-blocking protein, tumor antibody and tumor complement* which were isolated from human blood. And while still at St Vincent's, Burton developed the non-toxic natural biological therapy which would later become known as Immuno-Augmentative Therapy (IAT).

Through IAT, Burton measured the deficiencies of the immune proteins in individuals. He then isolated the substances and extracted the proteins from the serum of healthy donors and augmented the patients supply with self-administered subcutaneous injections.

After remarkable results treating several individuals, and incurring the wrath of the physicians who viewed their work as "uncontrolled human experimentation," Burton and Friedman left St Vincent's to form the Immunology Research Foundation in Great Neck, New York to treat people with cancer without interference.

The FDA Makes It Impossible

The team applied to FDA for permission to treat in the form of an Investigational New Drug Permit (IND). According to Burton, the FDA sent a request to answer three questions. After the team answered the questions FDA sent 3 pages of new questions including the question, *What is*

the effect on leukemic cats? The researchers estimated that it would take 5 years to develop the strain of leukemic cats, and millions of dollars to conduct the research to answer that one single question. Further, the FDA and NCI wanted the trials to be placebo controlled with 50% of the terminal patients receiving no treatment. Burton refused on ethical grounds asking, "why should some get the 'good treatment' and others get none."

Burton Leaves for the Bahamas

Burton, seemingly surrounded by controversy his entire career, took the most controversial step yet, he set up a research center at Rand Memorial Hospital in Freeport, Bahamas and began to treat cancer patients under a protocol still in use today.

During the initial treatment the patient is given a daily dosage of medicine and the following day a computer analysis of the dose and response ratio is performed. This continues for 6-12 weeks at the IAT clinic in Freeport, Bahamas. When the clinic physicians feel confident making a projection, the person with cancer returns home with "home maintenance serum" for self-administration. People are required to return to the clinic for periodic check-ups.

CBS 60 Minutes Visits Burton

"Research into the cause and cure of cancer is in the hands of a great medical establishment. People who go to each others meetings, are not only published in each others journals, but decide who else is published. Learned men and women who compete in a discrete way for billions of government and charity research dollars. And if these insiders, sizing up an outsider, conclude there's no promise in his theories - he becomes an 'un-person' - funds dry up - journals reject his papers - he finds it nearly impossible to get a hearing. Which brings us to Dr Lawrence Burton...- Opening segment - CBS 60 Minutes May 5, 1980.

"This may very well be the best news report we will ever see on an alternative cancer therapy," says Frank Wiewel, founder of the non-profit public interest group, People Against Cancer. "It was truthful, balanced and objective, with no outrageous claims or unsubstantiated rumor on either side—a sterling example of the precept of journalism 'unbiased reporting of newsworthy events'."

Millions saw the program, and since then, IAT Clinic has treated over 5000 people with cancer with a large group now

surviving over 20 years.

In 1985, the IAT Clinic was closed briefly for a purported AIDS scare, but officials were unable to document the transmission of AIDS. The Clinic was re-opened and the National Cancer Institute has withdrawn its negative policy statements on IAT.

University of Penn Evaluates

In 1988, a team of researchers at the U of Penn led by cancer researcher, Barrie Cassileth PhD, conducted a small retrospective study which compared 79 people with cancer treated with IAT to 79 similar people treated with conventional therapy at the U of Penn.

The IAT Patients were surviving nearly twice as long with few if any side-effects.

The results shocked the researchers, who admitted to tremendous pressure from colleagues not to publish these results. "This study stands as a striking example of 'publishing bias'. This is a little known research loophole which allows those who accept public funds to publish only those studies which agree with their particular preconceived notions," says Wiewel, a founding member of the Office of Alternative Medicine (OAM) in the National Institutes of Health (NIH). "These researchers took public funds, found remarkably positive results, then buried the data. They should be ashamed."

Dr John Clement, MD, the current director of the IAT Clinic, and former head of the Bahamian Medical Association, is now working with People Against Cancer and the National Foundation for Alternative Medicine (NFAM) toward a retrospective case study of IAT.

"There are a large number of people with cancer, treated by IAT, who remain alive years, and even decades, beyond their orthodox prognosis. They represent a significant body of scientific evidence that clearly warrants sound scientific evaluation," says Wiewel.

Further information: Dr Lawrence Burton's IAT Therapy Information Package (includes a free complementary copy of the CBS 60 Minutes segment), People Against Cancer Item #033, \$40 plus \$10 S/H. Also available, The New Cancer Industry by Ralph W Moss, Item #725, \$17 plus \$5 S/H. Cancer Therapy by Moss, Item #200, \$20 plus \$5 S/H, Repression and Reform by Robert Houston, Item #006, \$10 plus \$5 S/H. Foreign postage on these items is \$15. ☐



A scientist, who was paid millions by mobile phone companies to investigate health risks, has bitterly criticized them for failing to act on his findings.

While the cell phone industry has assured consumers for years that cellular phones are completely safe, the industry's former research director has now come forward to say this can no longer be presumed.

In an interview with Brian Ross on ABC NEWS 20/20 on October 20, 1999, Dr George Carlo said, "The industry had come out and said that there were thousands of studies that proved that wireless phones are safe, and the fact was that there were no studies that were directly relevant." For the past six years, Carlo ran the cell phone industry's \$25 million research program, which has studied the effects of microwave radiation from cell phones. "We've moved into an area where we now have some direct evidence of possible harm from cellular phones," Carlo says in an interview with ABC's 20/20.

Dr George Carlo found that the rate of death from brain cancer is higher among mobile phone users and the risk of contracting a rare tumor on the outside of the brain is more than double. In an astonishing attack on the industry for which he once acted as spokesman, he accused firms of not taking safety seriously. "The companies are now spending millions trying to discredit me because, basically, they didn't like what I told them," he revealed to *The Express*. "I feel angry and let down."

His research body, which was hand-picked by the industry, was given 15 million pounds to carry out a six-year study into the health effects of mobile phones. But after presenting its results to the phone companies in February, he claims they failed to take the "appropriate steps to protect consumers." Dr Carlo, a leading public health scientist based in Washington, said: "They have shown total disregard for mobile phone users."

In a damning letter to the heads of each

Cell Phones Linked to Cancer!

of the 26 US firms that funded the research, Dr Carlo wrote of his extreme frustration and concern. His study showed that there "appeared to be some correlation between brain tumors on the right side of the head and use of phone on the right side of the head." Laboratory studies also looked at the "ability of radiation from a phone's antenna to cause genetic damage." These studies proved positive.

Dr Carlo said: "Following my presentation, I heard by voice vote of those present, a pledge to do the right thing in following up these findings. But since I presented my findings, which they found surprising, they have failed to do anything. In that time there have been another 15 million users in the States and thousands more in Britain. From a consumer point of view the delaying tactic is not good but from a business point of view it's great." Alasdair Phillips, of the consumer group Powerwatch in England, said: "To have someone like him, who has even acted as a spokesman for the industry, come out and say this is quite amazing. There is a definite link between mobiles and brain cancer which the companies can't continue to ignore."

In his letter, Dr Carlo said: "Alarmingly, indications are that some segments of the industry have ignored the scientific findings suggesting potential health effects." He said some companies had "repeatedly and falsely claimed" that mobiles "are safe for all consumers including children."

His findings add to concern over the safety of mobiles—used by 13 million in Britain and 80 million in the US, with the number rising daily. But a spokesman for the British cellular industry insisted that it was committed to addressing health concerns. Dr Carlo warned of a consumer backlash and said customers should be given all the information they need to make up their own minds about the health risks. He advised people to cut the time they spend on their mobile or use hands-free phones which do not come into direct contact with the ear.

The Federation of the Electronics Industry, which represents the UK cellular phone companies, said. The consensus of scientific opinion is that there is no consistent evidence that mobile phones and

masts (towers) operating within the guidelines have any adverse health effects."

Earlier this year British researchers found that mobile-type radiation created mysterious hot spots which could damage children's developing brains. The Government promised a rigorous investigation. Days later a study of 11,000 volunteers, the largest so far, found a link with headaches, dizziness and concentration lapses.

The \$200-billion-a-year cell phone industry maintains the devices are safe. "There is a preponderance of evidence that there is not a linkage between the use of wireless phones and health effects," says Thomas Wheeler, president of the Cellular Telecommunications Industry Association, the industry's trade group. The industry has announced that it supports and will sponsor follow-up research.

What many of this country's 80 million cell phone users may not know is that cell phones send electromagnetic waves into users' brains. In fact, every cell phone model sold in the United States has a specific measurement of how much microwave energy from the phone can penetrate the brain. Depending on how close the cell phone antenna is to the head, as much as 60 percent of the microwave radiation is absorbed by and actually penetrates the area around the head, some reaching an inch to an inch-and-a-half into the brain. "This is the first generation that has put relatively high-powered transmitters against the head, day after day," says Dr Ross Adey, who has worked for industry and government for decades studying microwave radiation, and is one of the most respected scientists in the field.

Tests conducted by 20/20 found that some of the country's most popular cell phones can—depending on how they're held—exceed the radiation limit. 20/20 reported that government testing guidelines are so vague that a phone can pass the FCC's requirements when tested in one position and exceed those maximum levels when held in another position. Along with the test results, the 20/20 story showed how users can significantly reduce their exposure by using hands-free phones which do not directly contact the ear. ☐

Vaccine May Fight Prostate Cancer

BALTIMORE,
OCTOBER 20, 1999 (AP)

Researchers have developed an experimental vaccine that appears to fight prostate cancer by revving up the body's immune system.

"This same concept could be applied to breast cancer or other cancers," Jonathan Simons, who led the study done by researchers at the Johns Hopkins Oncology Center, said Wednesday. "This is not a cure, but this is a whole new door to walk through to get to curing prostate cancer using the immune system." The study was published in the October issue of the journal *Cancer Research*.

Researchers tricked the human immune system into recognizing cancerous prostate cells as foreign invaders by genetically engineering patients' own cells and injecting them back into the body.

While the approach has been tried before, the researchers at Johns Hopkins were able for the first time to activate the body's entire immune system to fight prostate cancer, Simons said.

Researchers used a substance, called GM-CSF, that activates the immune system, attached it to a common virus and implanted it inside cancerous cells of 11 prostate organs surgically removed from patients. In eight cases, researchers were able to grow a culture of

the modified, cancerous cells in the laboratory. The cells were then irradiated, which kept them alive but stopped them from multiplying any further.

After the vaccine was injected, the immune system of all eight patients produced antibodies that identified foreign invaders as well as immune cells that attack and kill infectious cells, Simons said.

The vaccine not only recognized the injected cells as foreign but apparently told the immune system to recognize cancerous prostate cells remaining in the body as foreign, Dr John Gutheil, clinical research director at the Sidney Kimmel Cancer Center in San Diego, said of the research.

"It's good stuff, if they've really had immune response," Gutheil said.

"Our immune system doesn't see cancer as being that much different from our normal tissue, a situation we refer to as immune tolerance," he said. "What you're seeing here is people are trying to use GM-CSF to actually override this immune tolerance that we have for our own tissues."

Prostate cancer is the second-leading cause of cancer death among men, behind lung cancer.

"Using the immune system to fight cancer is not new. Dr Lawrence Burton pioneered the use of Immuno-Augmentative Therapy (IAT) over 20

years ago," says cancer researcher Frank Wiewel, who heads the non-profit public interest group People Against Cancer. "We have research which shows remission, tumor regression and long term survival with IAT in a wide variety of cancers including prostate cancer. Burton was just 20 years ahead of his time."

Simons said it is also unclear whether the new vaccine would convince the immune system to attack normal prostate tissue in patients with cancer of the prostate who have not had the organ removed.

"Chances are the immune system would attack the normal prostate as well, but that's not a big deal because the prostate is not a life-sustaining organ," Gutheil said.

Simons said while the study dealt with whether it could produce the immune response, further research is under way to determine whether the immune system can fight cancer in patients.

"I've been in the field for decades and people have been skeptical about whether the immune system could ever see prostate cancer," Simons said. "What's truly novel about this paper is not only can the immune system see prostate cancer, but you can activate all the appropriate anti-cancer killing arms." ☺

MEMBERSHIP FORM

Yes! I would like to support the important work of *People Against Cancer*.

- ☐ \$35 **Regular Annual Membership** — Includes our newsletter, *Options*.
- ☐ \$50 **Foreign Regular Annual Membership** — Includes our newsletter, *Options*.
- ☐ \$100 **Supporting Annual Membership** — Includes our newsletter, *Options*, plus a free book.
- ☐ \$450 **Sustaining Annual Membership** — Includes the Alternative Therapy Program with: a comprehensive search for the best treatment options worldwide, a detailed written report, an extensive personal telephone consultation, unlimited one year follow-up. Also includes our newsletter *Options* and the book *Repression and Reform*.



PEOPLE
AGAINST
CANCER

- ☐ \$500 **Benefactor Annual Membership** — Includes all the benefits of Sustaining membership plus a free book.
- ☐ \$1,000 **Founding Annual Membership** — Includes all the benefits of Benefactor membership plus special select reports and publications.
- ☐ \$5,000 **Patron Annual Membership** — Includes all the benefits of Founding Membership and all select reports and publications.
- ☐ \$10,000 **Golden Circle Patron Membership** — Special Membership with all select reports and Golden Circle publications.

Name (print) _____

Address _____

City/State/Zip _____

Phone (w/area code) _____

☐ Renewal ☐ New Member

☐ Special Extra Donation (US funds) \$ _____

☐ I have enclosed (US funds) \$ _____

☐ MC/Visa # _____ Exp _____



PEOPLE
AGAINST
CANCER

Send Tax-Deductible Check in U.S. FUNDS (only) to:
P.O. BOX 10 • OTHO, IA 50569-0010
515-972-4444 • FAX 515-972-4415
E-MAIL: info@PeopleAgainstCancer.com
WEB: <http://www.PeopleAgainstCancer.com>

OPTIONS

Editor in Chief: Frank Wiewel
 Managing Editor: Denise Dallman
 Associate Editors: Larry Vogel
 Advisors: Harris Coulter, Ph.D.
 Jane Heimlich
 Robert G. Houston
 Jack O. Taylor, MS, DC
 Charlotte Christie
 Marie Dallman
 Gar Hildenbrand
 Lynn Davis
 Bill Asenjo

Options is published by
 People Against Cancer
 604 East St
 P.O. Box 10
 Otho, Iowa 50569
 Phone: 515-972-4444
 Fax: 515-972-4415

E-mail: info@PeopleAgainstCancer.com
 WEB: www.PeopleAgainstCancer.com

Options is for educational purposes only. It does not advocate any treatment modality. Each reader is strongly urged to consult a qualified health professional for medical problems.

EDITORS NOTE: A few Readers called regarding the story we ran in the September issue on Al Gore and his program Fighting Cancer in the 21st Century. We would like to make it clear that the article did not constitute an endorsement of Al Gore for president. Representatives of People Against Cancer have met with many political candidates to explore their views on alternative medicine. We were simply reporting that VP Al Gore had issued the first, and as yet only, detailed plan and gave us his personal commitment to support the Access to Medical Treatments Act (AMTA). ☐

Green Tea Effective Against Cancer

"Green tea is one of the best things you can put in your body," says Dr Michael Gaynor, a cancer specialist at Cornell University.

Gaynor, who drinks four to five cups of green tea each day, is one of the growing number of doctors and nutritionists who are promoting green tea's ability to protect us from cancer, heart disease and stroke.

The research started coming out about 1992. Epidemiological studies of cultures where people drank the most green tea had the lowest incidence of cancer. And research even showed that those who smoked could lower their cancer risk by up to 45% by drinking more green tea.

Green tea contains a wide variety of antioxidants. Antioxidants neutralize free radicals. Free radicals are charged particles in the human body which are the underlying fundamental cause of disease and the degeneration in aging.

Green tea contains an ingredient that may be useful in fighting malignant tumors, according to a recent study reported in the April 1, 1999, issue of *Nature* magazine.

Swedish researchers found that the compound epigallocatechin-3-gallate (EGCG) in green tea inhibited angio-

genesis—the process whereby blood vessel growth is stimulated—in laboratory mice.

Researchers suggest that the findings could help explain the previously documented preven-

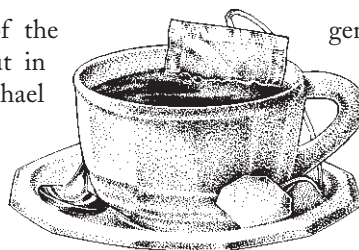
tive effects that drinking green tea has on cancers in humans, as tumors need to form new blood vessels to grow and metastasize.

The findings also hold implications for the prevention of other angiogenesis-dependent diseases, such as diabetic retinopathy, a common cause of blindness.

In fact, recent research indicates that a 16 oz bottle of Lipton Iced Tea, without sugar or flavoring, contained about the same level of antioxidants as a serving of vegetables.

EGCG and the antioxidants are also found in lower amounts in black tea and oolong tea.

Researchers recommend drinking two to three cups of green tea every day over a long period of time as the best way for humans to realize the benefits of EGCG, according to an article on the study by Reuters Health Information. However, researchers warn that large amounts of the tea should not be consumed by pregnant women and patients with wounds because angiogenesis is important in these circumstances. ☐



P.O. Box 10
 Otho, Iowa 50569

ADDRESS SERVICE REQUESTED



*New Directions
 in the War on Cancer*