

# OPTIONS

*Revolutionary Ideas in the War on Cancer*



THE NEWSLETTER OF PEOPLE AGAINST CANCER

Volume 1, Number 2, December 1994

## War on Cancer: A Failure and a Fraud

### Editorial

Last month the US Congress and the American people heard the dismal news. We are losing the "war on cancer."

A select government committee reports that cancer incidence is up, cancer mortality is up, yet they see "unprecedented opportunities for scientific research."

This is a grotesque joke. Who are we trying to kid.

The nation's war is not only a failure but a fraud. Since 1962, cancer death is up nearly 100%!

In 1962 278,562 Americans died of cancer, this year nearly 550,000 will die.

How long must we endure the grotesque charade of "the cure is just around the corner - if you just give us more money?"

How long must we endure the spectre of loyal American citizens being forced to go outside of the law and outside our country for therapy to save their lives?

How long must we see our friends and family members dying of illnesses unaffected by treatments feared more than the disease itself?

Today we declare our own war. A war for truth and justice.

Today we demand a complete restructuring of the national cancer program with a real comprehensive prevention program. Today we demand a major effort be launched to study alternatives. As a nation, we can not afford to overlook any alternatives for any reason. ☐

## OPTIONS SECOND ISSUE

This month we publish the second issue of our new bi-monthly newsletter OPTIONS: *Revolutionary Ideas in the War on Cancer*. We hope you find it provocative and informative.



Berkley Bedell, a medicine man in New Guinea and Elinor Bedell. Berkley has declared his own "war on cancer" by spanning the globe to find alternative medicine. See story on page 2.

## Report to Congress "Cancer at a Crossroads"

On September 29, 1994, a government panel finally admitted that cancer incidence is up nearly 20% and cancer mortality is up nearly 10% since the nation's war on cancer was declared over twenty years ago. The National Cancer Advisory Board (NCAB) presented the Report entitled "*Cancer at a Crossroads: A Report to Congress for the Nation*," and recommended a sweeping overhaul of the nation's "war on cancer." The Report predicted that cancer will overtake heart disease within the next five years. The group said that the program suffers from a lack of coordination and a shortage of money to pursue "unprecedented

opportunities" in scientific research. It called for tougher federal policies against tobacco, including elimination of tobacco subsidies and tax deductions for tobacco product advertising, prohibiting tobacco exports and an end to all federal funding of cancer research organizations that accept tobacco industry support. The panel said that cancer care for the poor, elderly and uninsured is inadequate and health care reform would make it worse. We are not taking full advantage of prevention" said panel chairman Dr Paul Calabresi, "Patients' quality of life can be improved. Most importantly, the advances we have made...are not available equally to all the people."

The 15 member panel was asked by Congress to evaluate why cancer was  
*Crossroads* continued on page 2

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## Crossroads (continued)

still on the rise after \$23 billion in federal spending since 1971.

In 1993, a Congressional Committee wrote, "The Committee must express its impatience with the lack of overall progress."

Interestingly, Congress made it clear in 1993 that they wanted the National Cancer Institute (NCI) to look outside the cancer establishment for new ideas, writing, "The Committee encourages the director to look beyond the current cancer establishment as part of a fundamental review of the research program." However, no mention of alternative cancer therapies was made in the report.

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*"The Committee must express its impatience with the lack of overall progress."*

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Critics such as Samuel Epstein, MD, author of *The Politics of Cancer*, have long argued that the failure of the war on cancer stems from the cancer establishment's fixation on treatment and lack of focus on prevention. In 1991 Congressional testimony, NCI director David Broder admitted that prevention amounted to only \$295 million - about 16 % of NCI's budget request of \$1.8 billion.

Additionally, critics charge that the NCI has misappropriated the term "prevention." "It is an outrage," says activist Frank Wiewel, "NCI now wants to call detection, screening and drug treatment 'prevention.' First NCI's NCAB buries the Women's Health Study: Dietary Fat and Cancer, then they undertake a massive Tamoxifen Trial to treat 16,000 American women who have no cancer with a dangerous toxic drug which causes cancer and call it *"chemo-prevention."* My God people - what are we doing here?" ☹

## Former Congressman Berkley Bedell Declares His Own "War on Cancer"

When Berkley Bedell was 15 years old he took \$50 which he had saved from his paper route and started a fishing tackle manufacturing business. That business, Berkley and Company is now one of the world's largest fishing tackle manufacturing companies. In 1964, he was named the nation's first Small Business Person of the Year. When he became concerned about some of nation's problems, he ran for the US Congress, and in 1974 he was elected as a Democrat from a highly Republican Northwest Iowa district. He served in Congress for 12 years until Lyme Disease forced him to retire. He fought Lyme Disease for 3 years without success using conventional treatments. He finally turned to an unconventional treatment and was cured.

He also came down with prostate cancer, and again after failing to respond to conventional treatments, turned to an alternative therapy and all of his tests show he is now free of cancer.

Because of his own personal experience he began investigating alternative medicine. He told Options "I am absolutely amazed at the number of treatments that report success in treating degenerative diseases including cancer, which conventional treatment is of limited success."

Because of his experience, Berkley became involved with Senator Tom Harkin (D-IA) to set up the Office of Alternative Medicine (OAM) in the National Institutes of Health (NIH). He has been an active member of the National Advisory Council for the last several years.

Berkley felt his effort in business was successful because he constantly monitored the research department and held them accountable. Additionally, he said he insisted on a constant effort to find out what was going on in the world out side of the laboratory. He told Options, "As a business person, I evaluate our nation's progress in the war on

cancer as a failure." He blames the failure on our unwillingness to get out into the world and evaluate successful alternative therapies. He said, "In 1962 cancer claimed 278,562 Americans. In 1982, 433,795 died of the disease. That is a 56% increase in just 20 years. Cancer incidence is up. Cancer Mortality is up. The NCI is getting \$2 billion of the taxpayer's money every year and we call this progress."

"I believe that NCI's attitude needs to change. They need to work anyone who can improve our progress." In my investigation I discovered Gaston Naessens, a cancer researcher in Sherbrook Quebec who developed a new microscope that can identify an organism thought to cause cancer and other degenerative diseases up to 18 months before symptoms appear. And he has developed a cancer treatment which helped me and may be able to help others.

I also discovered a Russian immunologist named 2 Govallo who treats cancer with placental tissue extracts. He has documented that 13 out of 18 of his breast cancer patients are alive over 10 years, 8 out of 9 lung cancer patients were alive 5 years and 4 out of 6 were alive 10 years or more."

He believes that Congress set up the OAM to evaluate and validate these kinds of things. He feels some people in NIH are not happy about the office. He has challenged the new director of NIH, Harold Varmus MD, to usher in a "new attitude and willingness to investigate and learn what is happening in the field."

Not one to wait around for NIH to do this on their own, Bedell has declared his own "war on cancer" by introducing the "Access to Medical Treatments Act" in Congress (See Options Vol 1 No 1 "Action Alert") and is developing the Field Investigations Program at OAM to evaluate and validate alternatives. ☹

# Americans Win Nobel For Describing The Theory – Burzynski Harassed For Treating Patients With The Therapy

A Dallas researcher who described the theory of how cells receive information was one of two Americans named last month as winner of the 1994 Nobel Prize. But Stanislaw Burzynski MD, who is curing people with terminal cancer with a therapy based on the same "information theory" is under non-stop harassment from the Texas State Board of Medical Examiners (TSBME).

The Nobel was awarded to Drs Alfred Gillman and Martin Rodbell for the discovery of G-proteins. These ubiquitous proteins are chemical messengers that transmit signals in every cell of the body. They are the gate-keepers for signals from the exterior to the interior of cells.

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*Burzynski's heresy is to have developed a remarkably effective cancer drug, before researchers described how it works.*

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Gillman said, "The ultimate dream is to design drugs that will prevent aberrant G-protein action."

But this is precisely what Houston based cancer researcher Stanislaw Burzynski has done with his antineoplastons. He has designed a drug, called AS2-1, based upon a natural substance found in the human body called phenylacetate, which turns off the *ras*-oncogene thought to cause many types of cancer.

It appears Burzynski's heresy, is to have developed a remarkably effective cancer drug, before researchers described how it works.

"Burzynski has been on the leading edge of cancer research for decades," said cancer activist Frank Wiewel. "As a result, he has suffered the slings and

arrows of outrageous fortune." This week Burzynski won another small victory when a Texas judge granted him an injunction against the TSBME.

Every day my colleagues and I are reminded of the quotation, "As I stood at the crossroads 10,000 men stood to guard the past," said Wiewel, founder of the non-profit public interest group People Against Cancer. "I continue to face massive legal bills for standing up for the scientific evaluation of alternatives and the rights of people with cancer." Wiewel, long the target of hardliners who call themselves "quackbusters," told the Boston Globe "it comes with the territory, despite continued attacks, I consider it an honor and a privilege to champion the rights of people with cancer."

Another Iowan, former Congressman Berkley Bedell says "Burzynski's problem is that he is 20 years ahead of his time and they don't know what to do about him."

In pointed testimony before the National Cancer Advisory Board of the NCI, Bedell suggested, "new and different treatments should be eagerly investigated and approached with an open mind. Rightly or wrongly, that is not the perception today. Take the Burzynski trials with which I am somewhat familiar. Surely, the first step would be to determine whether Dr Burzynski can really effectively treat brain cancer, as is claimed, then have some other establishment try to duplicate his work under his supervision. Under current policies when Sloan Kettering tries to duplicate his work they could be unsuccessful, whether intentional or not, they did not do things exactly the same as he did. The report would then be negative, and the treatment would be discredited, even though performed as he [Burzynski] did it, it might be a real breakthrough."

In an exclusive interview, Burzynski told Options, "The awarding of the Nobel Prize coincides with the rejection by the New England Journal of Medicine of my letter to the editor

describing the cure of the first patient with anaplastic astrocytoma who received treatments with antineoplastons AS2-1 and A10. I think that this would make an excellent confirmation that the theory of G-proteins already has practical application."

Apparently researchers at NCI also think that Burzynski's discovery is an excellent model for practical application because they are currently relying heavily on research first given them by Burzynski. A brochure from the Drug Development Clinic of the NCI outlines ten clinical projects which are sponsored by NCI. Ninety percent of them are based on induction of differentiation which was pioneered by Burzynski and shared with NCI. Incredibly, eighty percent concern active ingredients of Antineoplastons.

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*NCI's stated policy regarding Burzynski is "to separate the man from his medicine."*

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In the September Issue, *Options* reported that Dr Samuel Broder, director of NCI, had published a paper indicating that phenylacetate, which is contained in Antineoplastons, could in fact, inhibit the *ras*-oncogene, which is thought to cause many kinds of cancer. However, Broder neglected to credit Burzynski's pioneering work.

On November 25, 1994, in a letter to colleagues on the National Advisory Council of the Office of Alternative Medicine, Frank Wiewel warned, "NCI's stated policy regarding Burzynski is to 'separate the man from his medicine.'"

Wiewel also pointed out "Mayo Clinic and Memorial Sloan Kettering, long perceived as the enemies of alternative medicine, were selected by NCI to evaluate Burzynski." ¶



## OAM Gives \$1.8 To University Centers – Advisory Board Shocked!

In a move that shocked the advisory board, NIH officials presented a program to give University Centers nearly \$10 million of funds from the OAM 1994 - 1998 budgets.

The plans for this program were made in the absence of OAM advisory council approval and were presented to the National Advisory Council in September as the only viable option because funds for fiscal year 94 had to be spent by September 30th, and this was the only option they had.

The controversy centered on the fact that Congress had specifically mandated OAM to establish a National Advisory Council to "design a research plan to evaluate and validate" alternative medicine. However, despite the fact that the National Advisory had been chosen in February, because of government delays, the first Advisory Council meeting did not take place until September.

At the center of the controversy, is the fact that Senator Tom Harkin and activists on the Council want research to be preformed in the Field Investigation Program where OAM would scientifically evaluate the existing body of evidence collected by alternative practitioners.

"I am convinced that there is a substantial body of existing evidence on alternative medicine that warrants immediate scientific evaluation" Council member Frank Wiewel told NIH and OAM officials in the September meeting. Wiewel a supporter of the Field Investigation Program pointed out that there was a clear congressional mandate to establish an Advisory Council to establish the research program. He asked how the "whole process" could be stopped, citing a "deep level of mistrust and frustration building up in the council members over the last three years."

Science Magazine agreed and stated, "Advisory council members attacked NIH for setting an agenda for OAM without their consent."

Science went on to say "activists like Ralph Moss, publisher of the anti-establishment Cancer Chronicles, saw it as a scheme to fund big name universities."

Citing concerns over the long approval process, Advisory Council member and former Congressman Berkley Bedell told Science, "the field investigations can be done quickly and easily...most patients don't care how a remedy works they only want to know whether it works."

But the question over whether to do things the old NIH way (Centers) or the innovative way (Field Investigations) supported by Congress and the Activists, was not the only bone of contention at the September meeting. Other members of the council expressed serious concerns at the NIH process for approving the proposed Centers, noting NIH had used an establishment medicine's peer-review committee in the NIH Department of Research Grants to review the OAM Centers Program.

University of Maryland researcher, Dr Brian Berman, raised the issue of the type of person assigned for peer-review asking, "Who are they? Are they sympathetic to - or do they have experience with alternative medicine?"

Harvard physician, David Eisenberg, the originator of the concept of University Centers, stated flatly, "I don't think this has been an appropriate review. This involves the largest portion of the OAM budget for years into the future."

Jennifer Jacobs expressed her concern that the review committee did not consist of people knowledgeable in the various fields of review, stating "There were no reviewers from the field of homeopathic medicine." Researcher Gar Hildenbrand suggested, "We should file a protest with the Division of Research that the NIH peer-review committee didn't meet the Council's need." He later wrote in a letter to Harkin, "Dr Kirschstein had stiff-armed her way through with a scheme to divert

the lion's share of OAM's discretionary budget to the universities."

Frank Wiewel proposed halting the entire project pending review by the Advisory Committee and joined activists Moss, Bedell, and Upledger suggested the possibility of returning the money to the treasury.

When it became clear that the entire Centers Program was in danger of collapsing, an OAM Official admitted that the Centers Program was an NIH idea and that Dr Kirschstein in the Office of the Director didn't support the Field Investigations." Another OAM official then went so far as to describe the Centers as a way to get Field Investigations done.

Realizing that returning the money to the treasury wouldn't help the cause, in an attempt to make the best of a bad situation, the majority of Council members voted for reduced funding of only two pilot Centers for a limited period of time. Upledger, Wiewel and Moss abstained.

After Dr Joe Jacobs, who was not a supporter of Field Investigations, resigned as the director of OAM in September, Dr Alan Trachtenberg assumed the position of Acting Director and quickly tried to mend fences, stating "Field Investigations remain a high priority of the OAM...as a clinical epidemiologist, who has specialized in the analysis of observational data, it is my professional opinion that such field investigations can be conducted consistent with scientific standards."

Council member Wiewel, long a critic of the established system, told Options "Through the old system only 10-20% of American medicine has been shown safe and effective. It is time to dismantle the failed policies of the past and begin the process of building the new system for the future. Millions of American citizens with heart disease, cancer, AIDS and other incurable diseases are depending upon us. Despite whatever adversity, we must rise to the occasion." ☸

# THE ALTERNATIVE THERAPY PROGRAM FOR PEOPLE WITH CANCER

People Against Cancer, a non-profit public interest group, has developed a revolutionary new program for people with cancer called the Alternative Therapy Program. The goal of this program is to provide options for people with cancer. Our aim is to answer the complex questions about treatment alternatives. What therapy might be best? What approach might offer the best chances for survival and quality of life. We feel it is important to understand all options from conventional to alternatives in order for people to make truly informed decisions about treatment. We believe people with cancer have very fundamental rights - the right to know and the right to choose.

We offer a wide variety of information on both conventional and alternative non-toxic methods of cancer therapy. We have developed the International Physicians Network to provide treatment options. Through the Network, we put all vital medical information from people with cancer directly into the hands of physicians and researchers, in the United States and throughout the world, for their recommendations. Additionally, we offer a wide range of educational materials including books, journal articles, audio and video tapes on a wide range of issues of interest to people with cancer.

People Against Cancer has no vested interest in any therapy. We are not financially affiliated with any physician or clinic. We receive no funds or referral fees from anyone treating cancer. We are completely independent and act as the advocate of people with cancer. We do not diagnose, prescribe or make treatment recommendations - we provide options. We educate with unbiased information toward informed choice.

To access the Alternative Therapy Program, we ask that individuals first join People Against Cancer as Sustaining Members. We ask that individuals then fill out a copy of our Medical History Questionnaire and provide us with photocopies of all medical records from the diagnosis to the present time. We require two standard blood tests taken within the last 14 days, these include: 1) a Complete Blood Count (CBC with differential); and a Blood Chemistry (SMAC with 22 determinations or more).

The Medical History Questionnaire and the medical records are then faxed to select physicians and researchers in the Network. Those who feel they can help will generally describe their treatment protocol, entrance criteria, past results with the particular type of cancer, cost of the therapy and potential insurance coverage. In some cases they may be able to provide the name and phone number of someone who has been treated with a similar cancer in a similar stage. After five working days, we ask the person with cancer to call People Against Cancer and schedule an appointment for a telephone consultation to get the results of our search. After our telephone consultation, we will provide a written summary of our search and where you can obtain additional information about the options. As follow-up, people may call for guidance and questions.

The cost of Sustaining Membership is \$250. This helps us to cover the cost of the Alternative Therapy Program. In addition to our Alternative Therapy Program, Sustaining Members will receive a copy of the book *Options: The Alternative Cancer Therapy Book* by Richard Walters, the book *Repression And Reform In The Evaluation Of Alternative Cancer Therapies*, by Robert G Houston, and a year subscription to our Newsletter entitled, *Options: Revolutionary Ideas In The War On Cancer*.

As a non-profit, charitable, public benefit organization, we expend all our funds in services to people with cancer. For you convenience we accept Visa, Mastercard, and personal checks. We are registered with the IRS under a 501 (c) (3) designation, (ID #3000289). All donations are tax-deductible.

For your convenience, on the next page, we have provided a copy of our Medical History Questionnaire.

To participate in the Program call 515-972-4444 between 9AM-5PM Central Time, Monday - Friday.



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P.O. Box 10 • Otho, IA 50569-0010 • Phone: 515-972-4444 • Fax: 515-972-4415



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# Medical History Questionnaire

P.O. Box 10 • Otho, Iowa 50569 • Phone: 515-972-4444 • Fax: 515-972-4415

PLEASE PRINT CLEARLY OR TYPE!

Date \_\_\_\_\_

Patient Name \_\_\_\_\_

Caller \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Referred By \_\_\_\_\_

Received People Against Cancer Information ☐ Yes ☐ No

Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Height \_\_\_\_\_ Normal Weight \_\_\_\_\_ Present Weight \_\_\_\_\_

## Section 1 Original Cancer Diagnosis

Original Cancer Type \_\_\_\_\_ Date \_\_\_\_\_ Type/Grade \_\_\_\_\_ Stage \_\_\_\_\_

Original Diagnosis Site \_\_\_\_\_ Hospital/Clinic/Office \_\_\_\_\_

Metastases (recurrence) Site \_\_\_\_\_ Date \_\_\_\_\_ Details \_\_\_\_\_

## Section 2 Surgery

Surgery Yes \_\_\_\_\_ No \_\_\_\_\_ Date \_\_\_\_\_

Surgeon \_\_\_\_\_ Hospital/Clinic/Office \_\_\_\_\_

## Section 3 Chemotherapy

Chemotherapy Yes \_\_\_\_\_ No \_\_\_\_\_ Date Initiated \_\_\_\_\_

Oncologist \_\_\_\_\_ Hospital/Clinic/Office \_\_\_\_\_

Type of Chemotherapy \_\_\_\_\_ Number of Treatments \_\_\_\_\_ Date Completed \_\_\_\_\_

## Section 4 Radiation

Radiation Yes \_\_\_\_\_ No \_\_\_\_\_ Date Initiated \_\_\_\_\_ Radiation Absorbed Dose (RADS) \_\_\_\_\_

Radiologist \_\_\_\_\_ Hospital/Clinic/Office \_\_\_\_\_

## Section 5 Other Therapies

Other Therapies/Drugs (past) \_\_\_\_\_

Other Therapies/Drugs (current) \_\_\_\_\_

Physician \_\_\_\_\_ Hospital/Clinic/Office \_\_\_\_\_

Vitamins Yes \_\_\_\_\_ No \_\_\_\_\_ Details \_\_\_\_\_

## Section 6 Present Condition

Ambulatory Yes \_\_\_\_\_ No \_\_\_\_\_ Karnofsky Rating (see below) \_\_\_\_\_ Appetite \_\_\_\_\_ Constipated \_\_\_\_\_ Jaundiced \_\_\_\_\_

Pain \_\_\_\_\_ Bleeding \_\_\_\_\_ Fluid \_\_\_\_\_ Anemia \_\_\_\_\_ Patient Attitude \_\_\_\_\_

Comments \_\_\_\_\_

### Alternative Therapy Requirements Check List:

- 1 ☐ Completed copy of Questionnaire
- 2 ☐ Photocopy of Complete Blood Count (CBC) (with Differential)
- 3 ☐ Photocopy of Blood Chemistry (SMAC – 22 or more)
- 4 ☐ Photocopy of complete Medical Records (Diagnosis – present)
- 5 ☐ **IT IS THE PATIENT'S RESPONSIBILITY TO CALL FOR RESULTS OF THE PROGRAM**

DO NOT WRITE IN THIS SPACE – FOR OFFICE USE ONLY

### Karnofsky Rating Scale:

Score Criteria (circle and insert above)

- 100 Normal; no complaints; no evidence of disease
- 90 Able to carry on normal activity; minor symptoms of disease
- 80 Normal activity with effort; some symptoms of disease
- 70 Cares for self; unable to carry on normal activity or active work
- 60 Requires occasional assistance but is able to care for needs
- 50 Requires considerable assistance and frequent medical care
- 40 Disabled; requires special care and assistance
- 30 Severely disabled; hospitalization is indicated death not imminent
- 20 Very sick; hospitalization necessary; active treatment is necessary
- 10 Moribund, fatal processes progressing rapidly
- 0 Dead

## OAM Announces Exploratory Centers for Alternative Medical Research

The new acting director of OAM, Alan Trachtenberg, MD, announced the awards for two Centers for alternative medical research. The first went to Bastyr University for the study of HIV/AIDS and the second to Minneapolis Medical Research for the study of Addictions.

The selection of Bastyr University, the only accredited University dedicated solely to study alternative medicine in America, appeared a good choice to blunt criticism of the NIH who critics charged may have been involved in a "scheme to fund big named universities." Bastyr has a long history of scientific study into alternative medicine.

The Bastyr Center for Research in HIV/AIDS will describe forms and patterns of use of alternative medical therapies for the treatment of patients with HIV infection and acquired immune deficiency (AIDS). They will screen and evaluate therapies for the treatment of HIV/AIDS from the field of alternative medicine and provide training to alternative medical practitioners in the scientific evaluation of their therapies. Additionally they will educate the conventional scientific biomedical community in alternative medical treatment of HIV and AIDS.

The Bastyr Center operations will include The Clinical Data Section which will gather and analyze data at clinical sites using alternatives, provide technical assistance and monitor adverse reactions. The Education section will organize workshops and provide post training in research and the Bibliographic Section will catalogue and describe alternative practices and create a bibliography of published work on HIV/AIDS alternatives.

The Center to Evaluate Alternative Treatments For Addictions and Related disorders in Minneapolis will focus on the utilization, and effectiveness of selected Alternatives in the treatment of addiction and the health and psychological complications of substance abuse. The Center will be located at a major medical teaching center and will use a multi-disciplinary team with documented achievements in alternatives. They will attempt to link up alternative practitioners and treatment facilities.

It is hoped that Alternative medicine may be a safe, effective and cost effective solution to the tremendous problem of substance abuse in the US and the vast amount of human suffering and resulting crime. ☸

## CoQ<sub>10</sub>: An Anti-Cancer Nutrient

Researchers in Europe and America have announced research showing the benefits of a nutrient called Coenzyme Q<sub>10</sub> (CoQ<sub>10</sub>) in the treatment of cancer and heart disease.

In 1993, Dr Karl Folkers of the University of Texas reported that people with cancer had a lower levels of CoQ<sub>10</sub> and people with cancer of the lung, colon, and prostate lived longer when they took supplemental CoQ<sub>10</sub>. Additionally, the researchers demonstrated an improvement of heart function.

Now researchers in Denmark, have reported 6 of 32 patients given CoQ<sub>10</sub> at 90mg showed tumor regression and two patients taking about 300 mg per day reported complete elimination of their cancer.

In Japan 12 million (about 10% of the entire population) take from 100 to 300 mg of CoQ<sub>10</sub> per day. Researchers found that cholesterol lowering drugs may actually lower the levels of CoQ<sub>10</sub> by levels by 44-75% and urge those taking cholesterol lowering drugs like lovastatin (Mevacor) to take CoQ<sub>10</sub> starting at a low dose and working up slowly.

Those interested in CoQ<sub>10</sub> can contact Metabolic Health Products at 800-551-2577. ☸

## 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*.



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- ☐ \$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 \_\_\_\_\_



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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

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*Options* is for educational purposes only. It does not advocate any treatment modality, nor does it have any financial connection to the treatments, practitioners or sources it writes about. Each reader is strongly urged to consult a qualified health professional for medical problems.

### Special Note to Members:

As of September 1994, People Against Cancer is now publishing *OPTIONS: Revolutionary Ideas in the War on Cancer* as our bi-monthly newsletter. Members who wish to receive the Cancer Chronicles can write Equinox Press, 144 St. Johns Place, Brooklyn, NY 11217.

We apologize for inadvertently listing Ralph W. Moss, Ph.D., as an advisor to *Options* in our September issue.

## Clinton Signs Vitamin Bill

On October 25, 1994, President Clinton signed the Dietary Supplement Health and Education Act of 1994 into law.

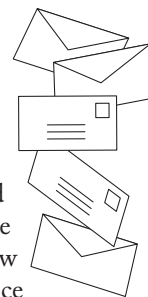
In his first public comments the new law Clinton said, the bill "balances the interests of the dietary supplement industry and the supplement advocates with the nations continued interest in guaranteeing the quality and safety of foods and products available to consumers."

Clinton went on to say, "It speaks to the diligence with which an unofficial army of nutritionally conscious people worked democratically to change the laws in an area deeply important to them."

Clinton continued by saying, "With perhaps the best of intentions, government agencies charged with protecting the food supply and consumer rights have paradoxically limited the information to make healthful choices in an area that means a great deal to 100 million people."

Clinton said, "In an era of greater consciousness about health and nutrition, it is appropriate that we have finally reformed the way government treats consumers and these supplements in a way that encourages good health." ☺

## Letters to the Editor



Dear Mr Wiewel,

Enclosed please find my \$25 donation to People Against Cancer. From now on, I will send monies once ear-marked for the American Cancer Society to your organization.

A month ago, shortly after my sister-in-law was determined to have a terminal cancer, I called the American Cancer Society for assistance with alternative forms of medicine. I was met with cold resistance. After other futile calls to NCI and NIH, I called People Against Cancer, and spoke with Marie, a compassionate and informative woman.

It is appalling that most people in this country are unaware of the varied organizations as well as treatments that are available. Like myself, many people never question the integrity or motivation of places like Memorial Sloan Kettering and the American Cancer Society.

I applaud your efforts and those of People Against Cancer and thank you for having the courage to challenge the established "wisdom" of the orthodox medical community.

My deepest appreciation for your help.

Warm regards,  
 Georgette Izen



PEOPLE  
 AGAINST  
 CANCER

P.O. Box 10  
 Otho, Iowa 50569

ADDRESS SERVICE REQUESTED

E-mail: [info@PeopleAgainstCancer.com](mailto:info@PeopleAgainstCancer.com) • WEB: [www.PeopleAgainstCancer.com](http://www.PeopleAgainstCancer.com)