

National Health Federation

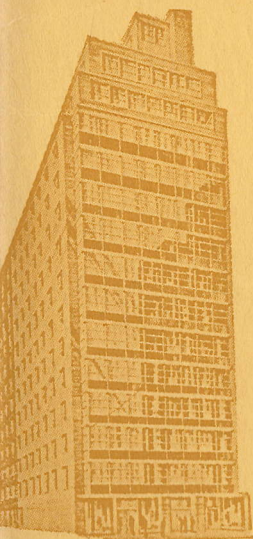


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AMERICANS CRUSADING FOR BETTER HEALTH



Site of our Washington Office
1012 - 14th St. N. W.

Volume IX—Number 10

October, 1963

BULLETIN

In Memory of

Most of our readers are aware that it has been our habit to publish in each issue of the National Health Federation "Bulletin" a memorial column in which we have listed those who have given donations in memory of departed loved ones or friends. In this connection we have also listed the names of those in whose memory the donation was made.

Our program has required so much of our time that we have not followed this practice since last October. We are now resuming the column. We beg the indulgence of those who have made donations during this period. To get caught up we are having to make the list very brief, but beginning with the November issue we will try to do a better job.

We think that making a donation to this great work is a very commendable way of paying honor to departed loved ones and friends.

Donor	In Memory of
October 1962	
Mr. and Mrs. John L. Bethel	Walter B. Strong
January 1963	
Roberta J. Morrison	William E. Haskell
February 1963	
American Legion Auxiliary, Alderpoint, Calif.	Mrs. Maude Adair McGill
San Gabriel Valley Organic Garden Club.	Mother of Mrs. Roberta Gill
J. C. Vann, D.D.S.	Mr. Charles H. Folette
Ripon, Wisconsin, Chapter, N.H.F.	Mrs. George Knispel
April 1963	
Alderpoint American Legion and Aux. Post 544.	Mr. Richard E. Coila
Alderpoint American Legion and Aux. Post 544.	Mr. Jack Jewett
Alderpoint American Legion and Aux. Post 544.	Mr. Wilson Wood
Mrs. Anna Williamson	Mr. Jack Jewett
Anita Fahs	Mr. Ralph Merritt
Gen. Sales Div., Dept. of Water & Power, L.A.	Mrs. Bessie Cuendet
Lois Kistler	Mr. Howard C. Landis
Mrs. Virginia Schlemmer	Mr. Lester Sachren
Mr. and Mrs. C. Crecelius	Mrs. Roby Day
Don Wedge	Mrs. Bessie Cuendet
May 1963	
Genesee County Organic Farm & Garden Club.	Mrs. Anna L. Shipley
June 1963	
Mr. and Mrs. J. M. Schlemmer and	
Mrs. Olive Olson	Mr. Wayne B. Cable
Mr. and Mrs. A. H. Schmidt	Mrs. Frank Bliefernicht
August 1963	
Atascadero Chapter, N.H.F.	Mrs. Mary Trace
Betty Lee Morales	Mr. Edward H. Grant
Clara Niemeyer	Miss Laura Lee Johnson

The NATIONAL HEALTH FEDERATION BULLETIN

VOLUME IX

NUMBER 10

Adventures on Health Frontiers
Published Monthly

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1963

EDITORIAL

This issue of the **Bulletin** is given over to articles about the present and past operations of the Food and Drug Administration. In reading the articles please have in mind that the only reason for the existence of the Food and Drug Administration is to protect the public in a reasonable, fair and efficient manner. Please also bear in mind that it is much easier to say how a thing should be done than it is to do it.

"By Their Fruits Ye Shall Know Them"

We have chosen the October issue to bring you this information for the following six reasons:

1. On page 4 of this issue you will find a news release in which it is stated that the Food and Drug Administration is to again co-operate with the AMA, which is but one segment of the healing art, to destroy all other segments of this art. We make this bold statement because of the wording of the news release and because two years ago they did likewise, the record of which speaks for itself.

The Food and Drug Administration is a department of the Federal Government, supported by taxpayers' dollars, and given great authority by Congress to use them only for the good of humanity. Certain it is that Congress never intended that it should use that authority

to destroy any approach to the healing of the sick, or to prevent the development of ways and means to bring health to the sick folk of America, or approaches to early diagnosis or prevention of disease, even though such ways and means or natural approaches may be at variance with the thinking of the AMA or the drug industry.

2. The date of this so-called "Congress on Quackery" is scheduled for the last part of October—the 25th and 26th, to be exact.

3. It is our hope that, by bringing this information to you, we will inspire you to write to your Senators and Congressmen protesting this misuse of taxpayers' funds, **unless and until such a Congress if held shall be open to all branches of the healing art.**

4. If the pattern followed in this so-called "Quackery Congress" is the same as that followed in the one held two years ago, you can expect great tirades of ridicule and abuse, spoken and published, with the aim of destroying the confidence of the public in all approaches to healing other than the drug approach. That our members may have in one book facts and opinions with which to withstand this onslaught of slander by innuendo or otherwise, we present for

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NATIONAL HEALTH FEDERATION BULLETIN

your consideration and use this Food and Drug issue.

5. The National Health Federation, as the recognized voice of the people in matters of health and freedom of choice therein, is waging a great crusade to change the policy of the Food and Drug Administration from that of leaning over backward to protect the drug interests to one of leaning over backward to protect the public, as the act intended it to be. For this reason and because of a project not yet announced in detail, officials of the National Health Federation will be viciously attacked, that is if the policy followed in the last Quackery Congress and during the past two years is followed.

6. We think we have noticed, because of an aroused public opinion, a decided shift in Food and Drug policy in the right direction. We must keep up the pressure. Be sure to write to your Senators and your Congressman, protesting the Food and Drug Administration's acting as co-sponsor of the upcoming event, unless and until all branches of the healing art are participants.

IT IS OUR DESIRE THAT THOSE WHO READ this issue of the **Bulletin** do not take anything in it as a blanket indictment of all those who are employees of the Food and Drug Administration. It is the feeling of the writer of this editorial that at least 90 per cent of all employees of this department are loyal Americans, honest and conscientious public servants, and if the policies of the Administration were correct, would be very happy to administer the law in the manner intended by Congress

when the Food and Drug Act was passed. **It is the present policy we are attacking and not the individuals who administer that policy. An aroused public opinion will change the present policy to what it should be, so let us, by working together, arouse the public to that end.**

Second Quackery Congress Scheduled

The Second National Congress on Medical Quackery, sponsored jointly by the American Medical Association and the Food and Drug Administration, will be held Oct. 25-26 at the Sheraton-Park Hotel in Washington, D.C.

The First National Congress was sponsored in 1961 by the AMA and FDA. Objective of the Second National Congress will be to bring together again all major American groups concerned with efforts to safeguard the public against useless cures, mechanical gadgets, food fads and other quack devices and worthless treatment.

Half-Day Sessions: Three half-day sessions will be held. The first will include progress reports from the organizations concerned with quackery. The second will center on preventive aspects, particularly seeking the answer to the question of why people are such ready targets for quacks. The final half-day will concern the responsibilities of the communications media in protecting the public.

Interest in combating quackery was generated by the First National Congress and is being translated into action at the state and community level, said

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a joint AMA-FDA announcement. Quackery conferences have been held in Connecticut, Wisconsin, California, Pennsylvania, Texas and Missouri, and more are planned soon in other states.

Continuing Campaign: "The Second National Congress on Medical Quackery will be another phase of the continuing campaign," said the AMA-FDA statement.

"Both official and voluntary agencies, such as the AMA, the American Cancer Society, the Arthritis and Rheumatism Foundation, FDA, the Federal Trade Commission and the Post Office Dept., as well as state departments of public health, have cracked down hard for many years on the medical quacks, and progress in this area is constant.

"But the quacks—put down in one area—keep showing up somewhere else with a new gadget or product, and there can be no let-up in the campaign against them."

From **The AMA News**, June 24, 1963.

FDA Plans Ban on "Cold Cures"

WASHINGTON (UPI)—The Food and Drug Administration yesterday proposed banning more than 50 "cold cure" prescription drugs after a team of leading medical scientists found that the antibiotics have no effect whatsoever on the common cold.

The proposed order would prevent the certification of prescriptions which include antibiotics in conjunction with analgesics, antihistamines, decongestants, and caffeine.

It would affect only prescription drugs taken by mouth.

The order also would initiate regulatory action, if necessary, to remove from the market analgesics, decongestants, caffeine and antihistamines when mixed

with any other anti-microbial agents, primarily the sulfa family.

An FDA spokesman described the action as "major" and said it would affect 50 or more products manufactured by about 50 firms. He said that most of the products contain antibiotics and a few other anti-microbial agents.

Under the order it would be illegal to manufacture the drugs specified and they would be unavailable to doctors. But the order would not affect popular cold remedies sold without prescription.

The FDA said it found:

There is no acceptable evidence that any antibiotic or other anti-microbial agent is of any value in the treatment of the common cold or any other upper respiratory viral infection.

Antibiotics and other anti-microbial agents are of no value in preventing bacterial complications in patients with common colds who are otherwise healthy, and therefore should not be used.

They may have some value in patients with underlying chronic pulmonary disease. But when preventative treatment of respiratory infection is justified, the anti-microbial agents that may be used must be relatively free of inherent toxicity.

The antibiotic in a drug which includes analgesics, antihistamines, and possibly decongestants would have no effect on the cold itself and there is insufficient chemical evidence to show that it would be of value in the prevention of complicating infections of a cold.

The relief that may be provided by the other ingredients (other than the antibiotic) is no justification for any such product to contain an anti-microbial agent.

From **Honolulu Star-Bulletin & Advertiser**, Sunday, August 18, 1963.

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Family Circle

By Fred Hart

TIME TO 'FESS UP On Sunday, September the first, through the kindness and leadership of an all-wise Providence and in direct answer to prayer, I had the good fortune to acquire as my wife, companion and helpmate, a wonderful Christian lady who for the past 40 years has been a resident of our neighboring city, Watsonville. The name of this lady, prior to 4:30 p.m., September 1st, was Mrs. Dorothy Bobby. It is now Mrs. Fred J. Hart of Salinas. Dorothy, as we hope all our friends and members of the Federation will come to call her, will be a great help to me in this great work of the Federation. It is our hope that our members will pray for us that we may, in an intelligent and unbiased manner, continue to be of service to our great organization. We do appreciate all the congratulatory messages we have received from those who found out in advance about the occasion.

On October 31st we will sail on a belated honeymoon in the Hawaiian Islands. The ship, the **Matsonia**, will arrive in Honolulu on the morning of November fifth. We will return on the same ship, arriving in San Francisco the morning of November 21st.

A TREMENDOUS EVENT IS IN THE OFFING—The Federation is working overtime, arranging the details of an event which will take place this year, but about which we cannot tell anyone, as of this date, as timing is essential to the accomplishing of the results we hope to obtain. We can say, however, that this event will serve to cancel out the lies and innuendos that will, in all probability, be spawned at the AMA and Food and Drug Administration jointly sponsored program on

“Medical Quackery.” When the devil seeks to accomplish an evil purpose, he always ties it to a worthy cause or slogan. So it is with this so-called Congress on Quackery. Please note above that I have unconsciously written “Medical Quackery.” In all probability, the name may be fitting, for the accepted meaning of a quack is one who professes merits for something, which, while he believes it to be true, may eventually be proved to have little or no value. As science moves forward, more and more our much advertised drugs are not only being proved to have no value, but to be extremely harmful.

PREPARE NOW FOR THE NINTH ANNUAL MEETING The Annual Meeting and Convention which will be held at the Sheraton-Biltmore Hotel in Los Angeles, California on January 1, 2, 3, and 4 could well go down in history as the most important meeting of this decade. At this meeting will be launched a program which, if successful, could well be the end of the medical monopoly which now is preying upon the sick folk of America.

The speakers who will address the convention will all be authorities in their respective fields. More information about this great program will be set forth in the November issue. The December issue of the **Bulletin** will carry the complete program.

THANKS TO ALL OF YOU WHO ARE SENDING IN YOUR DUES AND DONATIONS The program which we are working on and which we cannot tell you about at this time is costing considerable money and a lot of extra work, but once we can tell you about it in de-

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Vitamins and Their Value

By H. C. LONG, Executive Secretary, N.H.F.

PART ONE

In every one of hundreds of books and magazines on nutrition you will find reference to vitamins, balanced diet, etc. The often contradictory information is most confusing to the layman, quite naturally. To the average physician it is confusing, also, considering that their total education in nutrition is practically nil, and further, after entering practice their schedule is such that they cannot pursue the subject. An additional impediment to the physician is the fact that nutritional therapy is so rare as to be considered unorthodox in the professions. We must also consider that the “detailing” the average physician receives is colorful, well-financed promotion from the drug manufacturers. Not one manufacturer of “health foods” or natural vitamins calls upon the physician. The end result is that nutritional aid to the average patient through nutrition is practically nonexistent, unpopular and unavailable. Readers of the **Bulletin** are aware that the osteopath, naturopath, chiropractor, and others are our best source of aid when it comes to nutrition or preventative medicine, but their “unorthodox” principles have all but alienated them from acceptance by the AMA and the FDA. This is a very unfortunate, inexcusable situation developed through our own apathy and lack of cohesion in the healing professions.

Regarding “balanced diet”—what is it? Nobody can tell you accurately, as our daily needs change constantly and each individual is different. The rebuttal from the “experts” to a statement encouraging “health foods” or “natural”

vitamins is—all you need is a balanced diet. Who is kidding whom? Why don’t these “experts” tell us what their mysterious “balanced diet” is? Could they possibly be trying to keep the public-at-large away from natural healing methods, natural foods or a health food store? We need to evaluate statements more closely!

The Truth Is and Has Been Available

For years, excellent texts have been available which have been compiled by the true experts—those who are not economic prostitutes—those who don’t have an axe to grind—those not working under controlled “grants”—those not subject to economic pressures or politics. These gentlemen are the mainstay of the professions and are to be admired. They represent the truth and good in serving humanity—not too often obvious any more. Among the texts prepared by the true experts is ***The Vitamins in Medicine** by Bicknell and Prescott. Some of the discussions in one chapter of this book are the result of the findings reported in over 1,500 papers. Now if 1,500 true experts tell us that a certain vitamin is good for a certain condition and one tells us (in a newspaper or magazine) that it is not, who would you believe? The answer being obvious, I can only suggest that you make sure who the “expert” is when he makes a statement. Remember this when talking with your “disbelieving” neighbor, also. Perhaps you could even refer him to this series of articles for facts—and get him interested in the National Health Federation. Remember that the N.H.F. is the

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only organization of its kind in the world! Remembering that, remember also that we are the **only** ones fighting for the rights of the average citizen in matters of health.

Organic and Inorganic

Nutrition is the act or process of nourishing or being nourished; the act or process by which a plant or animal takes in and utilizes food substances. Now that we know what nutrition is, let us consider organic and inorganic. While the experts tell us there is no difference, a brilliant doctor from Europe was hired by the Government and was on the staff of Columbia University. He proved the difference and the additional values (which sustained and furthered life) of organic as opposed to inorganic. Now that we know what nutrition is and that organic (natural—unsprayed—not chemically grown, etc.) is better than inorganic, let us mention chemical versus natural. If you have a disbeliever, simply ask him, if there were two apples side by side and one had arsenic residue on it and one did not, which he would prefer. A normal person would prefer one without poison. It is that simple. There is absolutely **no reason** why we should ingest poison when we have any choice at all. Get your nutrition **through organic foods and natural vitamins** when and if at all possible! Avoid poison and chemicals!

Vitamins and Their Value

I should now like to discuss the vitamins one by one. There might be a few strange words for you. If there are, check your medical dictionary in the local library or drop us a line. Do keep the article for future reference. You might even want to show it to your physician and have him check his medical library and then use nutritional therapy instead of drugs. Papers are available to him on any vitamin and

therapy—if he wants the information!

My remarks on the vitamins in this article are based upon research in **The Vitamins in Medicine, United States Dispensatory, The Merck Index**, and the works of accredited medical doctors and scientists. Remember that the one text alone has references often numbering over one thousand to substantiate their findings on a single vitamin!

Vitamin A

Vitamin A is a nutritional factor necessary to all persons in amounts from 5,000 to 200,000 units per day. For use in treatment of acne, night blindness, bronchiectasis (dilation of bronchia), chronic infections, renal lithiasis (calcium deposits in kidney), local treatment of burns, wounds, skin ulcers, and for prevention of respiratory infections, etc. It also promotes tissue growth, increases blood platelets, promotes growth, and aids in digestion. This vitamin is available in some fruits and vegetables, but is **poorly** absorbed from such sources. It is also found in fish liver oils (cod and shark). Vitamin A can be toxic, but unless you have a diet rich in Vitamin A and have no specific need other than to maintain health, toxicity is rare unless 100,000 units per day is given for extended periods of time.

Natural tablets of Vitamin A are available from cod liver oil concentrates, shark liver oil concentrates, carotene oil (carrots) concentrate, and lemon grass (herbal), among others.

End of Part One

See Part Two in November issue.

*The book, **The Vitamins in Medicine**, can be obtained from Lee Foundation for Nutritional Research, 2030 West Wisconsin Avenue, Milwaukee, Wisconsin, for \$12.00 less 20% to members of National Health Federation.

How the AMA Prevents a Free Choice of Remedies by Member Doctors

(Only "accepted" products can be used—meaning advertising censorship which stops the advertiser from telling the truth where the shortcomings of counterfeit foods are involved.)

Stammer v. Board of Regents of University of State of New York,
29 N.Y.S. 2d 38 (Appellate Division); and 287 N.Y. 359, 39 N. E. 2d 913
(Supreme Court, January 22, 1942).

The following is an abridgment of the statement of facts which appears in the latter decision:

The patient, Rose Brower, suffering desperately from an open, huge and foul-smelling cancerous growth on the side of her face and neck, beyond orthodox surgical and medical aid and given only a few weeks to live, was discharged from Queens General Hospital on August 31, 1938 as beyond cure but was advised to continue radiation treatments which, however, on September 22, 1938, had shown no beneficial results.

The patient was then taken to the home of one Blakeney where she was shown photographs of cures effected through the use of a salve, the formula for which was in Blakeney's possession. Blakeney told the patient that he was not a physician. In the arrangements

for this visit, representatives of the hospital were invited to attend but did not do so. Upon other occasions, a Doctor Gilbert of the hospital staff had previously attended cases where the formula and treatment had been used. Doctor Stammer subsequently undertook to administer the treatment.

After ten days of treatment, the growth fell out and, with further treatment, the patient was completely cured in January, 1939.

Complaint against Doctor Stammer was made to the Board of Regents upon two grounds:

1. Fraud and deceit in the practice of medicine; and
2. Offering, undertaking and agreeing to cure and treat a disease by a secret method (which was an offense under a New York statute).

The Medical Grievance Committee of the Board of Regents found Doctor Stammer guilty on both charges and suspended him from practice for one year.

The suspension upon appeal was annulled by the Appellate Division of the Supreme Court, 262 App. Div. 372, 29 N.Y.S. 2d 38, by a three to two vote, with the following comments:

"(1, 2) At least one member of the subcommittee which conducted the hearing evidenced a wholly unfair and partial attitude. This subcommittee had the duty to conduct the hearing and weigh

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We Must Have Funds

The 15th of September is three days away and we do not have the funds in the bank to meet the payroll. We will have to meet the payroll with borrowed funds. This will be made possible because a few of us are sure the members will respond and the borrowed funds can be repaid. The work of the Federation is the most important work to be done in America today. Please do what you can to help out in this situation.

Sincerely, Fred J. Hart.

the testimony in a manner which should have been at least quasi-judicial. Such attitude was entirely lacking in at least one member. This doctor effected a cure when the so-called orthodox methods of treatment had failed and now he has been punished for it. It is not fraud or deceit for one already skilled in the medical art, with the consent of the patient, to attempt new methods when all other known methods of treatment had proved futile and least of all when the patient's very life had been despaired of. Initiative and originality should not be thus effectively stifled, especially when undertaken with the patient's full knowledge and consent, and as a last resort. Under the circumstances, we find no fraud or deceit on the part of the petitioner or that he undertook to treat or cure disease by a secret treatment and the determination is against the weight of the evidence."

Upon the Board's appeal to the Supreme Court (287 N.Y. 359, 39 N.E. 2d 913), the Court, by a five to two vote, rendered the following decision:

"Within the commonly accepted meaning of the term 'secret' and as used in the statute under consideration, we find no sufficient evidence in the case that the physician offered, undertook or agreed to cure or treat Rose Brower by any secret method, treatment or medicine. There was nothing secret about the medicine used or the method, treatment or procedure adopted. Indeed, the evidence is to the exact contrary. Neither did he studiously conceal the method, procedure or treatment which he adopted or the medicine which he used. Some years before he treated Rose Brower with the salve, Blakeney had divulged the formula to him and had explained to him the method of its use. There was evidence that Doctor Gilbert had previously attended cases where the formula

and treatment had been used. Before undertaking treatment of Mrs. Brower the procedure and treatment were fully explained. It was disclosed that a salve was to be used, the results to be expected were discussed, and consent of the patient and of her relatives to the use of the salve and to the treatment to be given were obtained. The mere fact that the details of the formula were not known to the patient or to some other particular person did not make it secret. The affirmative and uncontradicted evidence in the case is that Doctor Stammer had proposed to disclose to the medical society both the formula and treatment if it had merit and that he divulged upon demand to the Committee on Grievances the method, procedure and treatment adopted and used by him. The attempt to help Rose Brower by treatment outside of electrotherapy was known to and approved by physicians connected with the hospital in whose clinic she was under treatment. The evidence is conclusive that the defendant made no promise or representation that the treatment would cure the patient. Even had he done so, in the absence of fraud and deceit it would have been merely an expression of opinion and he would have committed no offense under the statute."

See **The Cancer Blackout** by Maurice Natenberg for more information on how cancer remedies are being suppressed by organized medicine. \$4.00 from Regent House, 4554 Broadway, Chicago 40, Illinois. 20% discount to members of N.H.F. who attach a 1963 N.H.F. book stamp to their order. Send order direct to Regent House or to Lee Foundation for Nutritional Research, 2030 Wisconsin Ave., Milwaukee, Wisconsin.

The world is crying, not for men who know what to do, but men who know how to do it.—**SAE Journal**.

FDA-Protector of the Drug Industry

From June, 1963 issue of **Prevention** magazine

"The more we have examined the handling of the new drugs by the Food and Drug Administration, the more we have been surprised, shocked, and disappointed."

These words of Senator Hubert Humphrey, spoken last October, summarize the feelings of the U.S. Senate Subcommittee on Reorganization and International Organizations, which is taking a good look at FDA practices. What they found was shocking, indeed—shocking enough to reinforce the Kefauver-Harris drug-reform bill, which gave drug-withdrawing powers to an authority higher than the FDA, forced the drug companies into truthful advertising, and protected doctors' patients from becoming unwitting guinea pigs for new drugs.

This tighter control on what seems to be an FDA-pharmaceutical alliance, although a step in the right direction, was no more than a minor dent struck in the side of a powerful government agency in desperate need of a major shake-up at its highest levels. Actually, the greatest good accomplished by those Senate hearings of 1962 was to bring to the public a basic truth long known to readers of **Prevention**: that the Food and Drug Administration, sworn to protect the American public, gives more protection to the interests of the huge drug companies, which have been reaping tremendous profits while knowingly endangering the public safety. As one ex-FDA medical officer testified before the hearings, in some of its activities the FDA has become "merely a service bureau" for the drug industry.

Shocking Truths

Before the investigation, attacks upon

the FDA were dismissed as coming either from medical quacks, food faddists, or outright communists seeking to undermine the government—all convenient terms which were supposed to discredit any accusation by assassinating the character of the accuser. Now, however, at least a part of the truth has been dragged from beneath the carpet, and there is every indication that the worst truths are yet to come. In the past year, honest reporters and forthright FDA medical experts—some of whom had to resign their positions to speak the truth—have established these points:

1. New drugs have been routinely passed for marketing by the FDA before being tested on human beings—even before being tested sufficiently on laboratory animals.

2. The devastating injuries,cripplings, and deaths caused by these drugs have often gone unreported to the FDA. When they were reported, FDA officials sometimes waited for months at a time before finally withdrawing the offending drug from the market.

3. FDA physicians who tested drugs were put under tremendous pressure to pass them quickly and without close inspection—not only by the drug manufacturers, but by top-level FDA executives.

4. In the FDA, a new and untested drug can be passed by a medical officer without review by any of his colleagues. But in order to deny approval of a new drug, that officer must have the unanimous support of the Chief of the New Drug Division, the Director of the Bureau of Medicine, the Commissioner, and

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usually also the Director of the Bureau of Enforcement and the General Counsel's office.

5. Government agencies have been paying drug companies hundreds of thousands of dollars for the "privilege" of testing new drugs, which are then passed back to the drug companies, approved quickly by the FDA, and sold to the public under medical prescription at tremendous profits. In other words, the government has been doing the work of the drug companies, paying heavily for the opportunity, then closing its eye to the exorbitant prices which the pharmaceutical firms charge the public for these drugs.

6. Lastly, in an unholy alliance with the AMA, the FDA has used its image as the "protector of the people" to launch a vicious attack on beneficial vitamins and food supplements, and has used every legal trick possible to stall public trial of successful but unapproved treatments of killing and crippling diseases, such as the Gerson cancer treatment, Krebiozen, the Coca dietary pulse technique, and the Turkel treatment for mongolism.

If these facts are difficult for you to believe about your Food and Drug Administration—which you are supporting with your tax dollars—you won't be in doubt for very long after reading this evidence, on Senate record, testified by Senator Humphrey and by ex-FDA medical officers:

Senator Hubert Humphrey: "Often, testing has been going on in a manner which should have sent shivers down the spine of the medical profession . . . drugs intended for use by victims of chronic diseases—day after day, year after year—were released by FDA even before—I repeat—before—chronic toxicity tests had been completed on animals . . . shocking reports of injuries and deaths to test

patients, as received by drug companies, have often gone unreported to FDA, or have been downgraded by skillfully contrived half-truths, or have been reported accurately to FDA, but virtually ignored. . . . Drugs have been approved which FDA now admits should never have been approved. Drugs have been kept on the market long after FDA admits they should have been eliminated."

Dr. Louis Lasagna, Johns Hopkins University: "I have been approached to start human testing of a drug with the only information available being the amount of drug necessary to kill 50 per cent of mice receiving the drug in one intravenous dose."

Dr. Barbara Moulton, Ex-FDA Medical Officer: Orders came "from above" for medical officers to certify drugs about which they had doubts, the justification being that the manufacturers should "be in a much better position to judge their safety." (*The Reporter*, March 28, 1963)

Dr. John O. Nestor, FDA Medical Officer: The Food and Drug Administration has permitted sale of new drugs "immediately hazardous to the public health" and left them on the market months after they showed signs of dangerous side effects. In doing this, superiors overruled expert medical opinion. (*Associated Press*, March 21, 1963)

The result of the shocking handling of new drugs by the FDA has been told and untold suffering, known and unknown deaths. Were this just the result of inefficiency, of shoddy examining processes, or of sheer official ignorance, it could be at least partially understood, although not excused. But it is not. This suffering and death has apparently been allowed to happen through FDA's effort to cooperate fully with pharmaceutical firms seeking to market new drugs as

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quickly as possible for maximum financial gain. Public welfare seems to get little consideration when it conflicts with the welfare of a big industry.

Here are some of the harmful drugs which have been allowed to fall into public usage, either on the pharmaceutical prescription market, or on an experimental basis that led to their being administered to hundreds or thousands of patients by individual physicians:

Delvex: Product of Eli Lilly & Co. A drug for treatment of certain parasitic infestations of the intestines; caused a high incidence of gastrointestinal and other symptoms and was strongly suspected of causing as many as six deaths. Withdrawn from the market.

Kevadon: Chemical name, thalidomide. Product of William S. Merrell Co. First tested by Smith, Kline & French Laboratories in 1956-57, which reported no deformities among 875 patients; FDA was ignorant of SK&F tests. Merrell filed NDA (new drug application) September 1960, distributed 2½ million tablets to 1,267 physicians for experimental use. Merrell learned on November 11, 1961 that the drug was associated with birth deformities in West Germany. FDA, learning of danger, did nothing. Merrell, in early December 1961, sent warning letter to physicians who had received the drug and who had reported results using it; physicians who had not reported (90%) were not warned, still had the tablets. **Three months later**, Merrell wrote to this 90%, with warning to destroy thalidomide tablets. More than 21,000 persons in U.S. received thalidomide from domestic or foreign sources; at least nine women bore children without arms and legs because of it. Credit to Dr. Frances Kelsey who had refused to pass on thalidomide NDA for more than a year, while doing intensive research, thus averting a national tragedy.

MER/29: Product of William S. Merrell Co. A drug intended for reducing blood cholesterol. NDA filed July 1959. Merrell immediately contacted FDA medical officer assigned to case. Officer judged application "incomplete" in March 28, 1960, because of "incomplete clinical studies in full details." April 19, 1960 MER/29 was passed as safe by same officer. Afterwards, reports filtered in to FDA, stating that MER/29 caused cataracts, baldness, changes in hair and skin color, and caused formation of desmosterol—a cholesterol-like substance—in blood vessels. Nineteen months later, November 16, 1961, FDA scientists recommended that MER/29 be withdrawn, but FDA top officials still refused to withdraw drug. On market for two years, taken by more than 300,000 people. March 1962, Humphrey subcommittee was told that Merrell's initial safety reports "had been falsified." In April, Merrell recalled the drug. In May, FDA Commissioner Larrick suspended the application.

The case histories of harmful drugs passed by the FDA, or allowed to be used experimentally on unknowing doctors' patients, could go on and on. **Ilosone**, an Eli Lilly product, and **Tao** (J. B. Roerig) are two antibiotics which can cause liver injury when taken for longer than 10 days. **Altafur** (Norwich Pharmacal Co.) an antibacterial agent used to fight staphylococcus infection, was withdrawn from the market after causing serious side-effects, as were **Dornwal** (Maltbie Labs), a tranquilizer; **Entoquel** (White Labs) an atropine-like drug used to control diarrhea in children and infants; **Flexin** (McNeil Labs) a drug used to treat chronic gouty arthritis; **Monase** (Upjohn), which was claimed to relieve mental depression, and others.

Some of these drugs were allowed to

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be placed upon drugstore shelves, while samples of all were mailed to thousands of doctors, supported by promotional literature and medical journal advertising. The physicians, who had no way of knowing any of the drugs were harmful, prescribed them to patients in the hopes of relieving assorted ills. The patients, placing full faith in their family doctors, naturally had no question about the drugs. Usually, in fact, when the new drugs were used on an experimental basis by the doctor, the patient was not aware that he was entering into a medical experiment.

It is not, then, very difficult to lay the blame. The patient knows little or nothing, although he is the one who suffers, both in health and financial loss, and even in life. The doctor can assume part of the blame, for dispensing untested drugs to patients without their knowledge or consent. The drug companies, of course, must assume a large share of the burden for improper testing, slanted and falsified reports, and pressuring FDA medical officers. One thing in their favor, however, is a basic honesty—they are in business solely for profit, and are not keeping it a secret.

The lion's share of the blame rests squarely upon the FDA and, more precisely, upon the high-ranking officers of that organization. Working in a structure which in itself heavily favors the interests of the drug industry, FDA officials have been shown to tip the scales even further by bending their own rules to pass new drugs, and by making very uncomfortable the lives of any medical officers who do not cooperate with their wishes and with those of the drug firms. They have allowed representatives of the drug firms to camp in the offices of the medical officers while waiting for approval of new drug applications, arguing every step of the

way with FDA researchers. They have failed to recall drugs even when their harmfulness has been indicated without doubt. Clearly, they have failed in their sworn duty to safeguard the American public from unsafe drugs.

How Close the Tie

The results of the relationship between the FDA and the drug industry rouses a natural degree of curiosity about the exact nature of that relationship. There has been little evidence of any direct "payoffs." However, when we trace the careers of men in the drug industry, we find their paths weaving in and out of government and public health agencies with amazing regularity. We find many instances of conflicting interests among government health personnel.

One physician, for example, who worked on the application for Marsilid, a drug later found to lead to hepatitis, was shortly afterward hired by Marsilid's maker, Hoffmann-La Roche.

The former head of FDA's Division of Antibiotics, Henry Welch, was writing articles for professional journals—usually a noble and scholarly endeavor, except that Mr. Welch was found to have earned a profit of approximately \$228,000 in this sideline, paid to him by the very firms he was supposed to be regulating.

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In Numbers There Is Strength

Join the National Health Federation and Make Your Voice Effective

P.O. Box 686, Monrovia, California

From a very fine article in the periodical, **The Minority of One** (February 1962), we find these instances of the happy family relationships enjoyed by the FDA, the drug industry, the American Cancer Society, the American Medical Association, and other public health agencies:

"Former Surgeon General Leonard Scheele is now president of Warner-Lambert (a drug manufacturer)... James Adams, an international investment banker (also named by **Medical World News** as one of the few in medical research control), is on the Board of Directors of the American Cancer Society as well as on the board of Warner-Lambert; Matthew Rosenhaus, president of Pharmaceuticals, Inc., is the prime mover of the newer Eleanor Roosevelt Cancer Research Foundation; the present chairman of the AMA Council on Foods and Drugs, Dr. William C. Spring, Jr., is a recent employee of Pfizer (a leading drug manufacturer); Dr. Austin Smith, president of the Pharmaceutical Manufacturers Association, is a former editor of the **Journal of the American Medical Association**; Dr. Richard S. Schreiber, a vice president of the Upjohn Company, is a member of the National Advisory Cancer Council; Dr. Alexander M. Moore of the Parke-Davis Co. is a member of the Chemistry Panel of the National Cancer Institute; Dr. Andrew C. Bratton, Jr. of Parke-Davis is a member of the Drug Evaluation Panel of the National Cancer Institute, as is Dr. Karl A. Folkes of Merck, Sharpe and Dohme" (another drug manufacturer).

From this list—hardly all-inclusive—we can get an idea of the cordial relationships enjoyed by men of medical research, of government health agencies, and of the drug industry. But perhaps the most amazing sign of fraternal

brotherhood is the recent news that, this May, FDA Commissioner George P. Larrick is to receive an honorary membership into the American Pharmaceutical Association. Seldom have we seen such a warm display of affection and gratitude as that shown by the drug industry to its supposed "regulator," the FDA.

Squelching the Independent

While the FDA has been fraternizing with the drug companies on one hand, on the other it has been using its judicial and enforcement powers to squelch small vitamin manufacturers and independent medical researchers not approved by both the drug firms and the American Medical Association. The AMA, of course, wields tremendous influence upon the policies of the FDA, many of whose personnel are physicians. If the AMA wants to ruin the reputation of any ethical physician, it can do so. If one of its drug advertisers wants a drug on the market, the AMA is suspected of cooperating to get that drug on. Thus, the AMA, the drug industry, and the FDA work with interlocking arms—under the propaganda leadership of the AMA—to protect their mutual interests.

One broad result of this health monopoly is that the FDA can reinforce its image as a public protector warring against "health quackery," while protecting favored private interests. The other result is that the American public is a three-time loser: (1) it is being deprived of vital nutritional knowledge, and perhaps even of the right to choose which vitamins to buy, (2) it is contributing, through tax dollars, to the profits of the drug companies, and (3) it is being deprived of access to independent medical research and aid which might well lead to significant decline or elimination of some major diseases such as cancer, diabetes, and mongolism.

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The Turkel Story

One example of a legitimate medical research suppressed by the health monopoly is the Gerson treatment for cancer.

Another example is that of Henry Turkel, M.D., of Detroit, Michigan, who has never been able to persuade the AMA to give his mongolism treatment a fair trial, even though his experience in treating more than 60 mongoloid patients has met with gratifying success. Dr. Turkel, it seems, has not shown proper respect for the AMA, and is now being punished for such heresy.

Dr. Turkel has been engaged in mongolism research for 17 years, during which time he has evolved a medical treatment which has apparently met with a significant degree of success. In the past, mongolism was viewed fatalistically, and parents of mongoloid children were told to learn to live with their tragedy. Unfortunately, most physicians still think of mongolism in these terms, either because they do not know of Dr. Turkel's treatment, or because they have been led by the AMA to view it with doubt and suspicion.

Dr. Turkel's approach is to return the mongoloid patient to as near normal a life as possible, through a series of treatments with what he has termed the "U" series of drugs. The treatments are said to gradually alter the mongoloid abnormalities and change the various abnormal organs until each approaches normality. Through this treatment of the whole system, the brain tends to return to normality also, enabling the patient to be capable of learning and functioning in society at a relatively normal level.

Dr. Turkel's "U" series of drugs are five combinations, each administered to relieve a specific physical disability that is part of the general condition

presented by mongolism. (Readers may obtain a reprint discussing the Turkel treatment at no cost. Address **Prevention** and enclose a stamped, self-addressed envelope.) Each of the drugs and vitamins of the "U" series has been used previously in medicine, and has been accepted as safe. Yet, despite the safety and seeming effectiveness of the "U" series, the AMA has refused to recognize the treatment, and the FDA refused to clear the "U" series combinations for standard medical usage for more than two years, finally relenting this year to permit the drugs to be used only on an experimental basis. Unlike the large drug firms, however, the individual researching physician cannot hope to afford to give away free the drugs in the quantities necessary to establish a large-scale test of his treatment. And, under FDA regulations, Dr. Turkel cannot charge patients for the drugs he administers to them. This is a bureaucratic spiderweb making it impossible for a doctor to experiment with a new treatment except through a wealthy pharmaceutical company. If the profits don't look big enough to the drug company the doctor is stymied.

This is a clear-cut case where both AMA and the FDA consciously are using their powers to prevent further trial and possible acceptance of the first medical treatment ever claimed effective against mongolism. Why would these organizations purposely try to stymie this new treatment? Why would they refuse to make the proper tests to judge the treatment's effectiveness? And why would the FDA use its powers to block use of the "U" series of drugs—all of which had been used previously and were proven safe—in light of repeated instances of FDA's passing dangerous drugs which were never even fully

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tested for safety on animals? The answer is that Dr. Turkel has acted independently of the AMA, and is developing a treatment that cannot be patented and consequently holds no promise of big profits for anyone. For this he has felt the wrath of the health monopoly.

Other Independents

There have been other instances of experimental drugs being suppressed by the FDA for no apparent or logical reason. Laetrile, a cancer-treating drug, has been turned down by the FDA even though, according to a UPI release of March 10, 1963, "no one at FDA challenges the safety of the drug." The FDA's wrath, it appears, stems from a personal vendetta against Laetrile's sponsors, Ernest T. Krebs, Jr. and the John Beard Memorial Foundation. These sponsors were fined in San Francisco for violating new drug provisions of the FDA in connection with an entirely different drug. Krebs was thus prohibited from making interstate shipments of any new drugs — which included Laetrile. Krebs' fatal error was to permit information about Laetrile to be published in a national Sunday supplement magazine. This practice of publicizing medical information in the public press — when not cleared by the AMA — is frowned upon most heavily at the AMA, and thus also at the FDA. Following form, FDA officials denounced the article as "what amounts to practicing medicine in print." If done with AMA approval, as frequently happens, there would have been no comment.

The Fish Flour Front

Perhaps the most ludicrous of all FDA actions in the recent past has been its campaign against fish flour. Fish flour, a rich nutritional supplement, has caught the imaginations of many officials of the

Kennedy administration, because it shows great promise as an inexpensive and rich supplement to the impoverished diets of peoples in underdeveloped nations. With the inexpensive fish flour, deficiency diseases the world over could be arrested to a great degree. The FDA, however, has put its foot down on a certification request from the VioBin Corporation of Monticello, Illinois, because it considers fish flour offensive to the senses. Because the supplement contains the whole fish (although it is a tasteless white powder), the FDA believes it is not suitable for the squeamish American housewife. And for this reason, VioBin cannot distribute fish flour.

Could anything be more ludicrous? While the FDA has been pressuring its own medical officers to send dangerous drugs untested onto the market, it has been halting the use of a natural food supplement for esthetic reasons! **Science** magazine commented upon the fish flour situation in its March 8, 1963, issue, saying, "In quiet and informal ways, various administration officials, including Secretary of the Interior Udall and the President's Science Adviser, Jerome Wiesner, have tried to persuade FDA to change its stand, but the agency is quite independent **when it chooses to be**, (emphasis is ours) and it has stood its ground."

The FDA, in our opinion, has conducted itself repeatedly in direct opposition to its intended government function. Supposed to regulate the drug industry, it has been the industry's close friend and confederate, while at the same time denying the public the possible fruits of legitimate individual medical research and treatment, and attempting to destroy the natural food supplement industry. We believe it is the solemn duty of every

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thoughtful American to write to his Congressman, expressing his opinion about the actions of Mr. Larrick and the FDA, and also to write to the Honorable Hubert Humphrey, United States Senate, Washington 25, D.C., to give him moral support in his current investigation of FDA practices.

From **Prevention**, June, 1963.

Nothing stated in the above publication shall be construed as a claim or representation concerning any product whatsoever.

N.H.F. Note: The editors of **Prevention** are doing an outstanding job in the health field. All interested in true health should be subscribers.

Family Circle

(Continued from page 6)

tail, you will say it is the most worthwhile and courageous undertaking in the Federation's history. We need funds to carry on the regular program itself, to say nothing of this new project. **Do what you can, please, to help in this regard.**

MEMBERSHIP HAS DOUBLED IN SPEED Now that the National Health Federation has been accorded national leadership as the unbiased voice of the people, new memberships are coming in more than twice as fast as they have before in the organization's history, except during the first year. We must double our membership at the very least if we would adequately carry forward our present program. We appreciate all who are now boosting the Federation and in public and in private urging their friends and associates to join this great and worth-while organization.

PRAY FOR YOUR EMPLOYEES AND LEADERS The more the program of the Federation moves forward, the

more pressure your employees and leaders will have to withstand if they would remain true to you folk for whom they work. Your President and all those associated with him in the work of the Federation are in need of your prayers that they may have courage, wisdom, humility, tolerance, and an unbiased viewpoint.

Fluoridation: A Connecticut Superior Court ruled invalid ordinances adopted by New Haven and Hamden to compel the New Haven Water Co. to fluoridate the public water supply. Although Judge Frank Covello agreed with the cities' argument that fluoridation would improve health, he ruled that they lacked the authority to compel fluoridation and enjoined them from enforcing the ordinances.

From **The AMA News**, August 19, 1963.

Progress

Since science came upon the scene, The ranch is just an old has-been. The cattle, hogs and poultry too, Have T.B., Bangs and what-have-you.

With chemicals we drench the soil. We spray the noxious weeds with oil, With D.D.T. we dust the fields, The reason? Why! For greater yields.

Old Mother Nature's hands are tied, Since all the little bugs have died. They used to help her feed the land, Just as the great Creator planned.

With sprays we kill the honey bees That pollenize our apple trees, Then eat the poisoned fruit to boot. Our precious health? Who gives a hoot!

— Irene Schauer

Peril on Your Food Shelf

By James J. Delaney

U.S. Representative from New York

The author was chairman of the nonpartisan House Select Committee to Investigate the Use of Chemicals in Food Products. This body held hearings for nearly a year to determine the effect of such chemicals on the nation's health.

(Reprinted from **American Magazine**, July, 1951)

Not long ago a frozen-food packer was told that his new shipment of peaches would stay bright and fresh-looking if he added a touch of thiourea. He tried it. The chemical worked a miracle of freshness and coloring. The shipment went out.

Another frozen-peach firm did the same thing. Before shipping out its product, however, it invited the local Food and Drug Administration inspectors to test the food. Samples were fed to experimental rats. Within a few hours they all died.

By merest chance the inspectors then learned of the first packer's shipment. From that moment on, there took place as exciting and dramatic a chase as ever thrilled a Hollywood film audience. And this time the stakes were more than the price of an admission. They were the lives of thousands of men, women, and children.

Fortunately, the episode had a happy ending. All of the peaches—still bright and still deadly—were intercepted before they could be eaten by unsuspecting American families.

Other episodes have not ended so happily.

Several years ago a salt substitute was put on the market for use by people on a low-salt diet. It contained lithium chloride, a chemical whose effect had been only superficially tested. Three persons died before the "salt" could be withdrawn from the market.

These instances point up a blunt fact: Our food supply is being doctored by hundreds of new chemicals whose safety has not yet been established.

Many of these chemicals were developed during and after the war. Most of them may prove harmless, but enough have been proved dangerous and even deadly to make us wonder if our health is threatened.

In the year that the House committee has been investigating this problem, scores of noted scientists have testified that the rapid rate at which substances, heretofore foreign to the body, are being introduced directly or indirectly into our food is alarming and may have a serious effect on the health of all of us, especially our children.

Nothing is more important to the American family. It is axiomatic to say that the survival of the country, as well as its democracy, depends on the health of its citizens. The shocking number of our young men who cannot meet the relatively modest physical requirements of our armed services must make each of us ask the reasons for this reservoir of ill-health in the midst of such a varied and abundant food supply.

The growing number of mental diseases makes one wonder if there is not some connection between that problem and the many new chemicals used in our foods. In New York State alone, mental hospitals now care for 117,000 patients

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—almost one patient to be supported by every 100 citizens.

Why then, one asks, are new chemicals added at all?

The answer is easy. They are relatively cheap, easy, and work “wonders” as preservers, blenders, softeners, bleachers, emulsifiers, insect and fungus killers, and crop stimulators.

In one product, for example—bread—testimony has revealed that many bakers have been able to reduce the amount of shortening in the last several years by about 50 per cent. This they have done by chemical emulsifiers first put on the market in 1947.

Here is the over-all scoreboard at the present time. The Food and Drug Administration has listed 704 chemicals which are being used in our regular food supply, of which only 428 are known to be safe. In other words, 276 chemicals are unknown and untested quantities and some of them may be slowly poisoning us!

This potentially lethal situation is due to a curious loophole in our present laws—a tragic legal joker that permits us to become a nation of 150,000,000 guinea pigs guilelessly testing out chemicals that should **have been tested adequately before they reached our kitchen shelves.**

Doctors testifying before the House committee have stated that there may be some connection between these new chemicals and the increase of such diseases as cancer, polio, and the mysterious virus X.

It must be said emphatically that no reputable food manufacturer would knowingly use any substance known to be harmful. Indeed, most of the big processors of nationally advertised products—companies like Swift, General Foods, Quaker Oats—maintain elaborate laboratories where tests are constantly being made to safeguard the public. An organi-

zation like the A & P has several thousand people continually engaged in laboratory and field inspection of its products. They, as consumers themselves and as honest businessmen, are as anxious as anybody to ensure a pure and wholesome food supply.

But here is the rub: There is absolutely no law to prevent a small, unscrupulous manufacturer from turning a quick dollar by using a substitute which is untested or, at best, inadequately tested.

And most important of all, there is also no law to compel testing new chemicals to determine what the cumulative effect would be **over a period of time.** On the whole, scientists are not so much concerned with the acutely toxic chemicals whose deadliness can be readily detected. They are more concerned with the small and insidious effects of substances which do harm only after being fed to people for months or years.

Under the present setup, the Food and Drug Administration can act legally only **after** the food product has been put on the market.

It is important to contrast this situation in regard to food with the situation in regard to drugs. In the latter, no such peril exists. The public is adequately protected. An amendment to the Food and Drug Act, passed in 1938, requires that a manufacturer submit evidence to show that a new chemical is noninjurious before he introduces it—**even if the tests take 10 years to complete.**

Since no similar safeguard exists with food, many chemicals are used with no real knowledge of what they will do to the human system. Certain ones which cannot be bought in a drugstore without a prescription, for example, can be bought indiscriminately in a feed store

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to be fed to livestock or sprayed on crops, often ending up on our table.

A decade or so ago this situation was relatively innocuous. But since the war, during which new agents were discovered almost daily, the use of chemicals in foodstuffs has blossomed and spread like the proverbial green bay tree.

In Massachusetts, to cite a case, a big brewery not long ago got the idea of using hydrofluoric acid in its beer. It made unnecessary the sterilization of beer, a tedious process. The acid, however, is a serious poison. Before the Government was able to step in and stop the practice, the beer had been sold all over the country.

In Indiana, a manufacturer took to using a mineral oil in his popcorn instead of butter and other fats. He treated the oil with butter color, labeled it “edible fat,” and sold it all over the United States. Mineral oil will not only wash out the fat-soluble vitamins in the food it is used in, but, by lining the stomach, will prevent the absorption of necessary vitamins from other foods eaten, leading to a dangerous vitamin deficiency. The fact that the popcorn was sold largely to children made the case more tragic.

There are hundreds of other cases—perhaps not so dramatic but potentially just as serious.

There is nothing wrong with chemicals in themselves. Some, like common salt, have been used a long time in food products to enhance both taste and nutritive value. The introduction of vitamin D, another chemical, into milk has undoubtedly proved beneficial, and reflects a desire on the part of manufacturers to give consumers better and richer products. The enrichment of hominy grits with a component of the vitamin B complex has worked wonders in wiping out the disease of pellagra in certain poorer sections of the South, where that food is a staple.

In general, nutritionists agree that no new chemical should be added, however, unless it is definitely proved safe, serves a useful purpose, and is not a substitution in whole or in part for a natural food element.

Such is not the case at present. Here are a few foods in which chemicals are playing a questionable role:

POULTRY: Chicken producers, especially in the East, have found that by inserting a synthetic hormone called stilbestrol in the necks of male chickens they can add weight quickly and increase the market value of their products. The chemical pellet causes the fowl to assume female characteristics. He becomes tender, develops greater deposits of fat, and grows faster.

Recently, it has been alleged that the residue of these chickens, sold to mink farms, caused the minks to become sterile and stop reproducing. As a matter of fact, there is a bill in the House of Representatives now to compensate the mink growers, who say they followed the advice of Department of Agriculture bulletins in feeding these chickens to their minks and thereby made the animals incapable of reproducing.

Canadian authorities have outlawed the use of stilbestrol, fearing it might cause sterility among people.

The product is still widely used in this country. It is spreading to sheep, pigs, and cattle. There is no legal way to prevent the amount used per animal being stepped up at any time to hasten the fattening process.

There is no evidence that the chemical is injurious to human beings. The point is, we don't know. Meanwhile, it continues to be used.

BREAD: Because of the demand of the housewife for ever-softer, ever-whiter bread, chemical ingenuity has flourished in this field.

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For at least 25 years, agene (nitrogen-trichloride) was widely used to give an artificial, quick-aging effect to flour. Three years ago an English chemist found that bread made from this flour caused epileptic fits in dogs. Although there was no evidence that it had a deleterious effect on humans, millers and bakers voluntarily agreed to abandon its use. The point is that no adequate tests had ever been made on agene.

Bread softeners are now almost universally used. Some companies urge the consumer to "feel how soft the bread is" on the package. They do not explain that this extra softness is arranged chemically. Polyoxyethylene-monostearate-type softeners were first introduced in 1947, when the price of shortening was high. Testimony has shown that many bakers have reduced their shortening about 50 per cent since they started to use this surface-active agent.

In 1949, two companies alone sold 30,000 bakers 10,000,000 pounds of chemicals. These chemicals are used as substitutes for fluid milk, butter, eggs, essential oils, and organic materials.

Although again there is no conclusive evidence that these new chemicals are harmful, there is plenty of evidence that they have reduced the nutritive content.

Dr. Anton J. Carlson, Chicago University's eminent physiologist and one of the world's greatest nutritionists, testified before the House committee that the insistence on white bread is a snob factor that comes down to us from the days of the Roman Empire 2,000 years ago, when the wealthy classes had white bread and the slaves dark bread.

Testimony concerning bread has also revealed that it costs a bakery only one half cent more to produce a loaf of the highest quality than it does to produce one of the lowest quality. There would be little or no surplus of milk or wheat

in this country if all bread products contained milk and flour in quantities found desirable by nutritionists. Such a policy would be a boon not only to the consumer but to the farmer as well.

SOFT DRINKS: The phosphoric acid used to blend soft drinks should not be used, experts have testified, without more testing. Experiments at the Naval Medical Research Institute showed that a human tooth put in soft drinks containing this chemical lost its enamel and became soft in 24 hours.

On rats it was shown that their molar teeth dissolved down to the gum line if the rats were well fed for a period of six months but were given nothing to drink but this beverage. Dr. Clive McCay, Cornell University nutritionist, has stated that the acid may account for this deleterious effect, not the sugar.

"Since soft drinks are playing an increasingly important part in the American diet and tend to displace such good foods as milk, they deserve very careful consideration," he says.

MEAT: Some of the new chemicals reach our food indirectly through the use of insecticides and fungicides. The use of DDT, for example, has been widespread in dusting crops. It has been widely hailed as a wonder chemical in keeping the insect army under control.

Although, several years ago, it was shown that there was no immediately discernible toxic effect when it got into the human system in small quantities, it was not realized until recently that DDT will store itself in the body fat and can, eventually, have a cumulative and serious effect on the liver. It is also interesting to note that people suffering this last winter from virus X exhibited the same set of symptoms as people suffering from DDT poisoning.

The Texas Research Foundation, an independent, nonprofit organization fi-

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nanced entirely by private business interests, recently analyzed ordinary meat products bought at random in local meat stores and found that the degree of DDT contamination in fat meat ran as high as 69 parts per million. The Food and Drug Administration has set five parts per million as a safe maximum. Toxicity tests have shown that even as little as five parts per million of DDT will produce slight but definite liver injuries in rats.

FRUITS AND VEGETABLES: Chlordane, first introduced commercially in 1947, has been used as an insecticide on a large variety of fruit and vegetable crops. In the first nine months more than 1,000,000 pounds were sold. Since then its use has become even more widespread. The director of the Food and Drug Administration's pharmacology division, Dr. A. J. Lehman, recently testified that chlordane is four or five times more poisonous than DDT and that he would hesitate to eat any food that had any chlordane residue on it at all.

As a result of testimony developed by Vincent A. Kleinfeld, chief counsel of the House committee, Dr. Charles S. Cameron, medical and scientific director of the American Cancer Society, revealed that we are by no means sure whether the residue of arsenic sprays on foodstuffs does not cause cancer, and that such a possibility could be determined only by further studies, and for this reason the American Cancer Society was vigorously backing additional legislation.

Another dangerous new insecticide is selenium. Animal experimentation has shown that three parts per million in the diet will produce cirrhosis of the liver and that animals may eventually develop cancer of the liver.

Many other pesticides have been used or proposed for use. Their safety has in

no way been established. So far as is known, no immediate deaths have resulted from their use. But there likewise is no evidence of what they will eventually do.

The above are only a few examples of groups of food in which new chemicals, introduced by irresponsible manufacturers, are playing an unknown role.

The public must be given the same sort of protection in its food that it gets in its drugs. Actually, foods are more important. Drugs are used only when someone is sick, and then generally only under a physician's direction. Foods are eaten promiscuously.

Just what legislation will be recommended to Congress as a result of the hearings now being held before the House committee is as yet undecided. And just what Congress will do about such recommended legislation is equally uncertain.

The committee feels, however, that just as no honest person worries about the penalties for burglary, no honest food processor need worry about any changes in the food and drug laws.

All of the testimony given before the committee, of course, leads to one obvious question: What can the average housewife do to protect herself against a growing use of chemicals which eminent nutritionists have called "alarming"?

In the opinion of most, the solution is not for the housewife to become an amateur chemist but to insist that Congress give the Food and Drug Administration adequate legislation to handle the problem before the product gets on the market.

Women played a prominent part in pushing through the legislation which guaranteed the pre-testing of drugs. The

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General Federation of Women's Clubs was solidly behind the amendment and exerted enormous pressure. It is not too much to expect that the same thing will happen with food. Individuals, of course, can write their Congressmen, but organized groups of individuals are much more effective.

Housewives can also help by not asking for extra-soft, extra-white, extra-smooth food products. There is a temptation on the part of some manufacturers to supply them by using cheap and easy chemical additives rather than expensive shortenings and blenders. In general, housewives should demand as many enriched foods but as few preservatives as possible. They should also learn to read labels carefully, especially when buying a new product. They should demand not only complete and exact labeling, but the proportions of each ingredient. At the moment there is a proposal to fix the minimum amount of natural ingredients in various products; for example, the minimum amount of milk solids to be used in bread products. At present the average quantity is only 1½ per cent.

The last time the Food and Drug Law was amended it took five years to get it through. Open opposition to such legislation is rare. It's like coming out in favor of sin. But the danger is that undercover opposition might persuade Congress to let the legislation die, or at least emasculate it.

The pre-testing-of-drugs amendment was pushed through only at the last moment, when 100 people died as a result of drinking an "elixir of sulfanilamide" into which a solvent, previously used only in car radiators as an anti-freeze, had been introduced. The drug had been thrown on the market without adequate testing.

There is no legal way—at this moment

—to prevent this happening again in food!

Far from a groundless scare, this has a terrifying basis of reality. It almost happened when thiourea was put in those frozen peaches.

For the safety of all Americans, it is vital that adequate legislation be passed. Especially before we have another tragedy to pin-point the need.

Editor's Note: The foregoing article was printed in 1951 and was the result of a long congressional investigation. Since then an adequate law has been passed (1958 to be exact), and yet the story is true today, because the Food and Drug Administration has failed to act, or evaded the issue with tolerance, grants or other evasive devices.

Use of Generic Names in Prescribing Urged

Sen. Ernest Gruening (D-Alaska) said yesterday America's physicians "should help save their patients millions upon millions of dollars" by prescribing drugs, wherever possible, by their generic rather than their trade name.

Gruening urged the American Medical Association to take the lead in this field. He used prednisone, a drug used for arthritis, as one example of the price spread. He said the same amount sold to retailers under its generic name for \$20.95 is priced at \$170 under its trade name.

The new drug control law passed by Congress last year, providing for tightening quality controls and simplified generic names, has demolished arguments for prescribing drugs by their trade names, Gruening said.

From *The Washington Post*, July 19, 1963.

Senator Kefauver Dies

By Clinton R. Miller



Senator Philip A. Hart

With the death of Senator Kefauver, there was a real attempt on the part of monopoly drug interests to maneuver a friendly Senator into his vacated position as chairman of the Senate Monopoly and Antitrust Committee. While it is not possible to get a man to come out openly for monopoly as such, there are certainly those in Congress who look with a sympathetic eye toward a monopoly control of our country, and who have accepted large campaign contributions from drug monopoly interests.

Senator Philip A. Hart (D., Michigan) Succeeds Senator Kefauver

The ranking democrat on the subcommittee was Senator Philip A. Hart (D., Michigan). He was vitally interested in the drug hearings, presided several times in Senator Kefauver's absence and voted with the late Tennessee Senator on al-

most all occasions. The Senate Monopoly and Antitrust Committee has had the biggest appropriation and the largest staff of any in Congress. This is proper. Medical and drug monopolies are strangling America.

Senator Hart's committee was formed by Congress and functions solely to restrain monopolies. Monopoly lobbies try to weaken the subcommittee by reducing its budget and weakening its chairmanship and staff. N.H.F. members should encourage the chairman to be a militant trust-buster, fight for sufficient appropriations and encourage and educate the staff to keep as their target the major present monopoly menace in America which is the medical and drug monopoly.

N.H.F. Approves Appointment of Senator Hart

Senator Eastland should be sent letters of congratulation for his appointment of Senator Hart. Senator Philip A. Hart should be congratulated upon his new appointment and encouraged to carry on vigorously in investigation of monopolies in the drug field and encouraged to extend it to the healing arts. There is every indication that Senator Hart will not be sidetracked from his investigation of the most dangerous monopoly in America. When you write to Senator Hart, inform him that you are a member of the N.H.F. and encourage him to work with the Washington Office to protect your rights to choose your own diet, doctor or drug.

The new chairman, Philip A. Hart, has his staff currently working on pricing practices in the proprietary drug industry. He said recently that he felt the subcommittee "certainly should pursue the investigation in the drug field as Senator Kefauver had the committee directed." He has already indicated that there might be hearings later this fall on some phases of the drug monopoly. The only other areas that might divert the subcommittee's interest are professional boxing and some antitrust aspects of organized baseball.

The Despotic Misuse of Our Federal Pure Food Law

By Royal Lee

Governmental agencies often are taken over by persons who, posing as honest officials, under cover of their authority, proceed to betray the people they are paid to protect.

The administrators of our Federal Pure Food Law seem to be doing this very thing.

To get the past history of their irregular activities I recommend your study of two books. The first, **The History of a Crime Against the Pure Food Law**, is Dr. Harvey W. Wiley's report of 1930 of how his own efforts to honestly administer the 1906 Federal Pure Food Law were completely nullified by food racketeers, and how he himself was forced to resign after being stripped of all power to enforce the law.

The other book is a recent review of the work of Dr. Wiley and how the matter stands today—**The Legacy of Dr. Wiley** by M. Natenberg. (Both available from Lee Foundation for Nutritional Research, Milwaukee 3, Wisconsin.)

To show exactly how the despotism operates, let me quote from a recent press release of the present Food and Drug Commissioner, George P. Larrick.

"Washington (NEA)—FDA Commissioner Geo. P. Larrick declares there are many people with unusual ideas about how to obtain wholesome food. He warns: 'Unscrupulous promoters spread these ideas and then cash in by offering vitamin and mineral products as cure-alls for every kind of human ailment. Salesmen use a scare campaign promoting the fake idea that food has lost its nutritional value. The reasons they list

contain a grain of truth exaggerated to the ridiculous. First they point to the fact that farm land contains poor soil. Then they twist this into meaning that any food raised on it lacks needed vitamins. Also, they convince customers that fertilizer poisons crops.

"Another sales pitch harps on the idea that preparing food for market robs it of nutrition. Although some processes do reduce vitamin content, canning and freezing keep food at its peak of good nutrition.

"Then there is the myth that all disease is caused by chemical imbalance in the body due to faulty diet. Salesmen convince their customers that their run-down feeling is due to a lack of vitamins. Since food has lost its health value, the only solution is to start swallowing vitamin pills..."

"The FDA emphasizes that it is not against all vitamins or door-to-door salesmen. Many are legitimate. But when a salesman starts pushing pills because food is no good, an FDA spokesman warns, 'BEWARE. IT'S BUNK!'" Unquote.

In another release in the Minneapolis **Star** of April 10, after repeating the above, the local FDA official, Maurice Kerr, warns, "Misleading sales promotions of food supplements are violations of Federal Law, and will be prosecuted."

As a matter of fact, the FDA has actually jailed and fined vitamin salesmen for simply claiming that "Nearly everyone in this country is suffering from malnutrition or is in danger of such

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suffering because of demineralization of soils and the refining and processing of foods." (See **Drug Trade News**, June 3, 1957, page 8.)

Here we have a governmental bureaucracy contradicting both its own bureaucrats, and contradicting the best scientific opinion, and successfully using the Federal Courts to enforce its dictatorial misstatements.

Let us take a very careful look at the evidence:

1. Are our soils wearing out to a dangerous point?
2. Is the refining and processing of food a really dangerous practice?
3. Is it true that chemical fertilizers are poisonous to the degree that we need to beware?
4. Is it really a "myth" that chemical imbalances in the human body can result from faulty diet, with serious disease as a result?

As to No. 1, the Department of Agriculture yearbooks warn us about the mineral deficiencies of soils that cause disease in farm animals, and stunt growth. See the 1938 **Yearbook**, pages 164 and 737, and the 1939 **Yearbook**, pages 962 and 291. **Mineral supplements for farm animals are recommended by these references** to avoid trouble due to soil depletion.

An entire chapter in the 1939 **Yearbook** is devoted to a discussion of the extent of mineral element deficiency in soils, and 11 states are shown where serious phosphorus deficiency in soils was reported. Thirteen states reported serious iodine deficiency in the soil. But the author also reports that "an appalling lack of definite information prevails in most sections" (page 1057). Page 1053 is devoted to comments of animal husbandry experts who ask for more information as to deficiency disease in animals such as: "Horsemen are continually making inquiry as to how they can

produce horses with the quality of bone that is found in horses produced in our better bluegrass states." (That the soil in not over five per cent of the country is capable of producing healthy horses by reason of mineral deficiencies is admitted by those who are informed.)

The conclusive evidence of the soil depletion in this country is the protein content of our cereal grains. As soils wear out, the protein content of the grain drops. Wheat today averages only **one half** the protein it had 30 years ago, and it is dropping about **one half per cent** a year. The wheat from Deaf Smith County, Texas, that absolutely prevents tooth decay if properly used, is now down to 15 per cent where it was 22 per cent 20 years ago. The value of this wheat, by the way, is attributed to its trace mineral content for its ability to create healthy bone and tooth structures, the bone density of Deaf Smith residents being about 50 per cent more than average (a 50 per cent higher mineral content), according to Dr. Barnett's report in the **Journal of Applied Nutrition**, 1954, pages 318.

As to No. 2—Is refining and processing a dangerous practice?

First, why not use the dental health of the nation as an index, for it is the consensus of opinion among experts that dental disease is the result of food refining? ("The nutrients which may be responsible for optimum resistance to tooth decay are not known. Both laboratory animals and primitive man show a low caries susceptibility when consuming diets of 'natural' foods. When the diet is changed to one of refined foods, susceptibility to dental decay increases, even in those whose teeth were fully formed before the change in diet occurred." **Dairy Council Digest**, Vol. 24, No. 5, May, 1953; National Dairy Council)

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cil.) ("It has been amply demonstrated that the prevalence of caries is due to the habitual consumption of 'artificial' as opposed to 'natural' articles of diet." H. P. Pickerill, M.D., **The Prevention of Dental Caries and Oral Sepsis**, second edition, Balliere, Tyndall & Cox, London; p. 360.) ("Caries, as we understand it today, is a disease of civilized man and all others who partake of his diet. Primitive peoples do not have caries to any extent as long as they stay on their native diets. . . . In that pits, fissures, enamel defects . . . are as common in races that have no dental decay as they are among civilized races with a high incidence of caries, we are forced to conclude that tooth structure . . . is not by itself an exciting agent. This leads to the inescapable conclusion that the diet of civilization is in some as yet undetermined manner directly related to the etiology of dental caries." **Dental Caries**, P. H. Belding, D.D.S., J. L. Belding, M.D., page 412—Dental Items of Interest—1938.)

I might digress here to call attention to the promotion of fluorides as a quack remedy for dental caries. I could use a very harsh term for this promotion, for since Dr. Clive McCay's conclusive proof that it actually increases dental disease as well as destroys kidney cells in doses of one part per million in water in tests on rats, we can see why the promoters of flour bleach have backed the introduction of fluorides into drinking water to divert attention from the real cause of dental disease—the bleached white flour characteristic of civilization, and the refined sugar we eat in foods, candy and soft drinks.

The power of the commercial interests that have practically taken over the control of our Federal FDA and are using its facilities for unlawful purposes is no better exemplified than in the vast water fluoridation campaign, based upon a

false premise that fluorides are "nutritional trace minerals."

Dr. McCay's report in the January issue of the **Journal of Gerontology** conclusively destroys that illusion.

To get back to our discussion of the effects of refined food, besides dental caries and its consequences, refined foods have lost most of their mineral content, and other than the bone minerals we might observe the effect of the potassium loss. Potassium is the main mineral element lost in sugar refining and in white flour milling.

Just how important is potassium in the food pattern? Here is some recent evidence. In **Nutrition Reviews** for October, 1957, page 298, you will find a very illuminating article on how potassium deficiency causes attacks of paralysis. The acute attack is precipitated by **refined sugar**. "... often a child who has this disorder may induce an attack of paralysis by overeating candy." It would obviously be impossible to cause such an attack of paralysis by eating **natural raw sugar** or **molasses** with its high potassium content. "Death by suffocation may occur should the paralysis extend to the respiratory muscles." Just how often is such paralysis interpreted as polio, and just how much is polio brought on by refined carbohydrates? Dr. Sandler, in his book, **Diet Prevents Polio**, believes that there would be **no polio** if we had no excess of refined carbohydrates. This new report certainly confirms Dr. Sandler's hypothesis.

Further information on the importance of potassium is to be found in the **Journal of Applied Nutrition**, Vol. 7, page 324. It is stated, "Potassium is important in preventing insulin-fast conditions in the diabetic, where insulin fails to lower the blood sugar. Potassium immediately releases the insulin effect. Potassium is important in both

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protein and fat metabolism." Apparently, potassium deficiency can upset all the functions of the body.

We might elaborate indefinitely on this refined food situation, but here I only wish to prove my point.

Now, how about poisonous fertilizers? We may refer to the **Journal of the American Medical Association**, June 3, 1950, page 476. In one report of the Minnesota Health Department, 139 cases of infant poisoning, with 14 deaths, occurred from chemical fertilizers leaking into well water and getting into baby formulas. We might cite the case, not too uncommon, of fatal poisoning from eating watermelon too freely fertilized with similar poison chemicals. Or of farmers dying from nitrite gases in silo contents from excess nitrate fertilizers, a frequently reported accident in recent years. No informed person can disregard these facts unless he is dedicated to the spread of misinformation, a party to the well-organized propaganda campaign to promote refined foods, synthetic counterfeit foods, and fluorides to cover up for the damage, and the quack chemical fertilizers that create bulk without nutrition, quantity without quality.

Now, lastly, what about the biochemical unbalances that undermine health after the victim has tried to live on phony food substitutes?

May we quote that top authority of American medicine, Dr. Tom Spies:

"If we only knew enough, all diseases could be prevented, and could be cured, through proper nutrition. . . . As tissues become damaged because they lack the chemical of good nutrition, they tend to become old. They lack what I call 'tissue integrity.' There are people of 40 whose brains and arteries are senile. If we can help the tissues repair themselves by correcting nutritional deficiencies, old age can wait." (Dr. Tom Douglas Spies at the 1957 Annual Meeting of the AMA)

And we might add here this quote from Dr. Edward J. Ryan, editor of **Dental Digest**:

"Anyone who speaks up against food adulteration in any of the many forms is subject to 'name calling.' The most common epithets are 'food faddist' or 'food fakir.' If you object to spraying foods with poisonous chemicals, picking fruits green and then applying a dye, to injecting or administering antibiotics to poultry and dairy herds, to removing minerals and vitamins from natural foods, to adding chemical adulterants to preserve foods from normal chemical changes, you are offending . . . some of our largest and most influential corporations. . . . We can be certain that the public relations counselors will go to work to change the situation—even if that requires a bit of character assassination directed against those who are in the opposition.

"... Every time a natural substance is removed from a food, every time an adulterant is added to a food, the balance in nature is disturbed. . . . The chemical and cellular processes within the body cells cannot react to the passing whims of chemists without disturbance in function. It took thousands of years for the body to adjust itself to changing environmental conditions. When these conditions are suddenly altered by the actions of men, the cells cannot make the adjustment—disease is the result."

I may close with this quote from the September, 1957 **Consumer Bulletin**, page 18:

"One distinguished medical pathologist recently informed his scientific colleagues that several widely-used food dyes caused cancer when injected under the skin of rats used as test animals. Certain dyes that are used in coloring margarine and butter were so toxic that

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the test animals died before there was opportunity to see whether cancers would develop in due time. It was noted that the harmful dyes had not been prohibited by governmental order to prevent their use in future, and there was no indication that such a step was under consideration."

You need to carefully study the two books mentioned about Dr. Wiley's work in order to realize the magnitude of the conspiracy to sell the American public health down the river, by which all of us lose 20 years of useful life in order to protect the commercial interests that make these counterfeit food substitutes. The statistics of disease are twisted to try to prove that we are living longer when actually our life expectancy at 50 is greatly reduced. May I call attention to the recently published article in **U.S. News & World Report** which showed that American children when tested for muscular fitness had a 57.9 per cent failure, while comparable children in Europe showed only 8.7 per cent failures. (Page 67, August 2, 1957.)

That is the harvest of **counterfeit food**, the refined sugar, soft drinks, candy, white flour and glucose so thoroughly promoted that it is almost impossible to even buy peanut butter that is not adulterated with synthetic fat and synthetic sugar. (Hydrogenated Fat and Dextrose or Sugar on the label.)

Later in life the harvest is cancer, diabetes, arthritis, poliomyelitis, rheumatic fever, heart disease, and cardiovascular disease. **You have the intelligence to protect yourself. Be sure to use it. Beware of the epithet, "food faddist."** That is what you will be called if you are not gullibly accepting what is offered as food by these counterfeiters. **When that term is used, look behind the name caller. You will soon detect the hidden**

conspirator who "rules by ridicule" and cashes in on your indifference by converting your health to his dollars.

(Price: 25¢ each, 15¢ each in lots of 10 or more. Reprints may be secured from National Health Federation, P.O. Box 686, Monrovia, California.)

Caution Urged in Fluoride Use

Physicians should check the fluoride content of drinking water used by their patients before prescribing dietary fluoride supplements, the American Medical Association said.

Use of such supplements is justified only when the community water supply contains an insufficient amount of the compound, the AMA explained. A fluoride content of 0.7 part per million in the South or 1.0 part per million in the North is considered sufficient. Such information can be obtained from the local or state health department or the local water department.

The AMA statement noted that the usual fluoride supplement is 0.5 mg per day for children up to the age of three years, and 1.0 mg per day for those from 3 to 14. Supplements should not exceed these amounts, the statement said, "in order to insure that mottling of the teeth does not occur."

From **The AMA News**, August 19, 1963.

Editor's note: Mottling of teeth is but an indication of what is happening to the bony structure of the body. It is also a known fact that fluoride accumulates in the body and interferes with the enzymatic functions, which are so essential to good health.

It too, is a known fact that at certain

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times an individual will drink more than at other times and that during hot weather will as a rule drink twice the regular amount. At such times the fluoride intake is a great deal more than 1.0 mg per million parts of water, etc.

You will note from the above news item that the southern limit is set at 0.7 part per million, due to the fact that the climate is warmer and folk then drink a greater quantity of water. It is also a known fact that the distribution of fluoride in a water system is not equal. Some sections will provide several times the designated amounts and others lesser amounts. With the above AMA statement in mind, **HOW CAN ANYONE BE SO STUPID AS TO ADVOCATE PUTTING THIS FLUORIDE POISON INTO THE PUBLIC'S DRINKING WATER?**

Health Officials Predict Pesticide Likely to Poison More Peach Pickers

BERKELEY (UPI)—California health officials conceded yesterday they were virtually helpless to prevent a further spread of pesticide poisoning that has already stricken 60 peach pickers in the San Joaquin Valley.

No fatalities have been recorded among the 60 poisoning victims so far, but several of the victims have become seriously ill with symptoms resembling influenza, the State Health Department reported.

The department warned that the 7,500 workers harvesting the peach crop in the area between the Merced and Tuolumne rivers face possible contamination during the remainder of the peach harvest season.

Dr. Malcolm H. Merrill, state health director, blamed the poison danger on a

heavy accumulation of parathion, a lethal organic phosphate insecticide, on the leaves of peach trees.

The pesticide is absorbed into the body through the skin and clothing and gloves offer little protection.

Intensive spraying of the peach crop with parathion was conducted during the spring to combat an oriental fruit moth. Tests conducted by the State Department of Agriculture showed that the insecticide residue on the peaches was well within human tolerance, Merrill said.

But, he added, the tests failed to consider the residue on the leaves, which harvesters must separate to get to the peaches.

"You can see the dust puff off as they pick," one health department official said.

Extensive investigation of the 60 poisoning cases reported so far has convinced health officials that the only certain method of preventing further contamination would be to curtail further harvesting of peaches in the area.

But, since 60 per cent of the peach crop remains unharvested, officials call such a step "unwarranted."

The health department has recommended certain steps for the peach pickers to take to minimize the health hazard from the pesticide.

The steps included washing their hands before smoking and eating, and cleaning up thoroughly and changing clothes after work.

"It's about all that can be done," one official said.

From Riverside, Calif., **Press-Enterprise**, August 25, 1963.

Editor's note: According to the Health Department, the economic health of the peach grower is more important than

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the health of the harvester or the people who buy and handle the peaches. Of course, the peaches were smaller when the trees were sprayed, but as the article above states, you can see the dust in the air when the leaves are stirred, so we ask what is to prevent it settling on the ripe peaches? And also, as the wind has blown from day to day during the growing season, why would not this dust have already settled on the peaches? **When will the Department of Public Health begin to take the people's side of these issues and worry more about the public welfare than the economic welfare of those who use the poison spray etc?** This would seem to be an appropriate question.

Stars Join Scientists to Create Foundation

New York.—Gloria Swanson, Peegen Fitzgerald, Yehudi Menuhin, among others of TV, movie and radio fame who happen to be in New York City at the time, are expected to help the doctors, chemists and professors to establish a nonprofit Certified Natural Foods Center and Foundation in New York. They meet Friday, November 1, 7:45 p.m. in the Assembly Hall at Hunter College, 68th Street and Park Avenue (Lexington Avenue subway).

This is the first eastern major city rally to implement the President's Science Advisory Board's caution on avoiding pesticides in the foods we all eat. Among the foundation's aims is the inspection and testing of all foods. Only those farmers who comply to approved standards will be allowed to use the certified seal of approval on their produce. Contracts and financial aid will be extended to selected growers who follow rigid controls and who shun the use of synthetic fertilizers, questionable chemicals, additives, waxes, etc. In addition to the planned New York City center from which weekly truck deliveries to all the boroughs and suburbs will be made, including Long Island, Westchester and New Jersey, it is expected that inde-

pendent grocers and supermarkets will be attracted to handle these certified tested foods. Once regular food retailers are aware that the informed consumer prefers to avoid chemically treated and preserved foods, it is anticipated that they will be eager to stock tested produce which will be distributed by the pilot certified natural foods center. This will help lower prices to the consumer.

Among the scientific advisory board and board of directors are:

Prof. Clive McCay, nutritionist, Cornell University, retired, Honorary Chairman

Prof. James Jay, D.D.S., formerly Columbia University, research agriculturist, Chairman

*H. H. Koepf, Ph.D., soil scientist, Dir., Biochemistry Research Labs., Spring Valley, N.Y.

*Peter A. Escher, agricultural specialist, 3-Fold Farm, Spring Valley, N.Y.

*Lawrence Mitchell, food technologist Erling Week, chemist, President, Collett-Week Corporation

Frank Sevigne, chemist, Technical Director, Collett-Week Corporation

*Edmund Handwerker, D.D.S., research, Judson Health Center

Joseph Kaplowe, M.D., New Haven and New York

Harry A. Stone, M.D., New York City

Harry Sackren, M.D., New York City

*William Gutman, M.D., New York City, author of "Prolongation of Life"

*Prof. Winston Bostick, Physicist, Stevens Institute of Technology, N.J.

*Dr. Eden Gray, D.D., WNCN-FM, radio commentator

*Mr. Ian F. Rose, author of "Faith, Love and Seaweed," father of three-time Olympic swim champion, Murray Rose

Prof. Kurt Weil, Head, Engineering Department, Stevens Institute of Technology, N.J.

Peegen Fitzgerald

Yehudi Menuhin

*Gloria Swanson

*Those marked will be available for some TV, radio and interviews.

Please contact: Eden Gray, 129 W. 56th Street, New York, CI 7-1785.

After October 1: Wadler—JU 6-7777

The Man Who Beat the Bugs

By Guy Wright

Dead fish float to the surface by thousands. Peach-pickers sicken from the bug-spray. Songbirds eat the poisoned blackberries along the roadside and drop lifeless to the ground.

The priests of the pesticide cult assure me there's nothing to worry about, and I try to believe them. But it's hard.

Farming once was considered the human endeavor most in harmony with nature. We have turned it into an unnatural act.

Now we produce foodstuffs in the same distorted way that Dr. Frankenstein produced his monster, and I cannot believe that an activity so at odds with the natural order won't exact its own penalties.

Maybe what we need is another Charles Valentine Riley to put us back on the track.

You never heard of Riley? Neither had I until the Council of California Growers came across his exploits in some dusty old records.

Riley was a nut. He was also chief entomologist—boss bug man—for the U.S. Dept. of Agriculture back in the 1880's.

But mainly he was a nut. He believed in the balance of nature.

He believed that every plant, animal and insect has its natural enemy, and he believed we should use these God-given agents to control pests and protect our crops.

Poisoning nature into submission with pesticides would have struck him as an affront to nature and to science.

He was a nut all right. But he got results. One time Riley saved the California citrus industry from destruction

—even though he had to hoodwink the whole U.S. government to do it.

California orange groves had become infested with cottony-cushion scale insects. By 1887 shipments had dropped to 700 carloads.

Riley was summoned and true to form he suggested finding a natural enemy of the bugs. But where?

"Australia, most likely," said Riley, dreamily.

He asked Congress for \$1,500 to send an entomologist (preferably Riley) to Australia. Congress refused—penny-wise and pound-foolish then as now.

But it did appropriate a hefty sum to send an exhibit to the Australian International Exposition in Melbourne. Riley's shrewd old mind went to work.

Through friends he planted one of his entomologists in the delegation. Officially the fellow represented the State Dept., but he had orders from Riley to search for an insect that would kill the cottony-cushion scale.

This bug-spy—Albert Koebele was his name—hit upon the vedalia beetle, a kind of ladybug, as a likely candidate. He was right.

The vedalia thrived like sin in California orchards. Within two years the orange trees were healthy again, and it is still the vedalia that protects our \$150 million citrus industry from cottony-cushion scale.

We could use a man like Riley today—but we'd probably squirt him with pesticide.

From San Francisco **News Call-Bulletin**, September 4, 1963.

Food and Drug Nonsense

In an interview with Mr. Brandenburg and Mr. Byerley of the FDA at their Washington Office Monday, June 18, 1962, the following statements were made:

1. In determining the question of what may be false and misleading labeling, the truth is established not by the consensus of opinion of medical experts, but by their considered judgment of what is fact, and what is false.

2. The consensus of medical opinion may be established in Federal Court procedures by the statement of a qualified expert.

Two such experts of equal qualification may each make statements that the consensus of medical opinion is diametrically opposed to the opinion of the other. One such expert may one day say one thing, and the next say the opposite, as the consensus of medical opinion is subject to change at any time.

3. Any food becomes a drug, if it is sold with the intent to prevent disease or improve health. As such it becomes necessary to label it adequately by providing instructions for its use for every disease that it may prevent or favorably affect. All such diseases must be listed in the labeling. Such a drug may not be dispensed or prescribed by doctors operating under a drugless license. (That, of course, precludes its sale in a health food store.)

4. People consume foods for their pleasure rather than for preventing disease, and a food may not need to have any ability to prevent a deficiency disease.

5. Dessicated glandular products or fractions thereof have no drug value,

are inert as drugs. If they are sold for a specific nutritional effect such as for their specific protein values in providing nutritional support to the corresponding human organ, they become drugs and as such are still classed as inert and cannot be sold. There is no legal way to label and sell such a product for food or drug use. If the attempt were to be made to get new drug permits for their sale, the FDA still would look on them with disfavor.

6. There is no difference between synthetic and natural products when used as foods or drugs.

7. Chiropractors or other drugless practitioners are not qualified to use any food product to treat a deficiency disease, since such a remedy becomes a drug, if it is recommended or prescribed to prevent or relieve any disease, and only medical doctors have the right to use a drug for this purpose.

Editor's Note: The foregoing statement was made to Clinton Miller (N.H.F. Washington Representative) and three other gentlemen whose names we are withholding lest they be picked upon by FDA. Can you think of anything more absurd than the above statements?

A Battle Ahead

You Can Help Win It by Getting

a New Member Now

NATIONAL HEALTH FEDERATION BULLETIN

Funds Needed in Cancer Case Appeal

Dear Federation Members:

In the February, 1963 issue of the Federation **Bulletin**, the entire story of the cancer case in which I was involved was told. The appeal brief, which has taken 12 months of preparation by Mr. Melvin Belli, my attorney, will be finished and filed with the court this month. The District Attorney's office will then file an answer to the brief after which time a date will be set for a review and a hearing of the case by the Appellate Court.

I wish it were possible to meet and thank each of you, personally, who sent in a donation in behalf of my case. The response was very enthusiastic. We are, however, \$1,500 short of the necessary funds to appeal the case. I therefore humbly appeal to all of you to contribute as generously as you can again, so that we can carry this case to a successful conclusion.

The concerted effort to chip away the freedom of those doctors and laymen who "dare to differ with the consensus of medical opinion" is very vicious as all of you well know. The good Lord never intended that people should be subjected to dictatorship of any sort. Individual freedom of choice is our rightful heritage. We therefore have the right to the health method of our choice without interference from anyone attempting to dictate the type of health care we must have or restricting the sale of food supplements if we wish to buy them.

Let us briefly review my case and its ramifications if the verdict is not overturned: I was convicted of second-degree murder because a little girl died of cancer 4½ months after she left my care. I had given her spinal adjustments and dietary supplements. The parents had refused to submit the girl to surgery prior to placing her under my care.

There is no legal precedent for this case anywhere in the world. This means that there has never been a case like it in the world. If the guilty verdict should stand, this would set a precedent whereby any doctor can be charged and convicted of murder if a patient dies months after he last treated him. This is indeed a test case which must and will be won for the good of all the healing professions and the people who desire drugless care.

Mr. Melvin Belli, my attorney, stated in a letter to me recently: "If this appeal is unsuccessful, every chiropractor in the United States had better take down his shingle. It will be too hazardous for him to practice his profession. Every act he commits can be construed as a crime, and every unsuccessful treatment can result either in assault and battery, mayhem, or murder."

Please send all donations to: The Chiropractic Committee for Justice, 2622 Clarendon St., Huntington Park, California.

Yours Very Truly,
Marvin Phillips, D.C.

Editor's Note: We are once again mentioning this case in the **Bulletin** because it has nationwide importance, not only to the drugless profession, but also to the medical profession. If the decision made in this case is not reversed, no doctor of any classification is safe when treating the sick.

OCTOBER, 1963

NATIONAL HEALTH FEDERATION

P.O. Box 686

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THIS IS A CALL TO ARMS

1. The enemy is moving in, and to offset this moving, the Federation has doubled its efforts at Washington and at the home office.
2. The Federation has been getting so much favorable publicity and its program has moved forward so fast:
3. It seems that many of our members think that means the Federation does not need money to care for this extra load.
4. What I am trying to say is that many of our members who made donations over and above their dues, for the support of the Washington Office, have not done so this year.
5. The result: because of lack of available funds we have notified the Washington Office that it will have to get along without a secretary until funds are available. Clinton needs a secretary and the work is handicapped without one.
6. The home office is also having to curtail much needed work.
7. If you cannot make a donation, you can help a great deal by immediately sending in your dues for 1964. We must keep moving forward.
8. Last, but not least, the Ninth Annual Meeting and Convention of the Federation will be held in Los Angeles, California, January 1, 2, 3, and 4, 1964. Mark your calendar. More about this convention later.

☐ I wish to become a REGULAR MEMBER of the National Health Federation and am enclosing \$5.00 as dues, \$1.50 of which is for a subscription to the BULLETIN for the current year.

☐ I wish to become an ACTIVE MEMBER of the National Health Federation and am enclosing \$5.00 as yearly dues, \$1.50 of which is for a subscription to the BULLETIN. I wish to form a local chapter, so please send me necessary literature and instructions.

☐ I wish to become a SUSTAINING MEMBER and am enclosing \$..... (minimum fee, \$25.00) as membership dues for the current year, \$1.50 of which is for a subscription to the BULLETIN.

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