

MARCH OF TRUTH ON CANCER

SEVENTH

EDITION

An informative handbook of the most urgently needed who-what-where information on 79 effective but often not widely known cancer treatments, including some of the doctors treating cancer with success. References are given concerning the opposition to good, inexpensive treatments discovered by independent researchers without benefit of funds from government or major cancer fund raising organizations. In spite of the continuing success of these treatments, they have neither admittedly been tested by the government nor by organized medicine, either singly or in combination.

"Facts do not cease to exist
because they are ignored."

—Aldous Huxley

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including the biochemical salts, are used in combination with sound diet, which must be brought back into balance, including acid-alkali balance, carbohydrate balance, protein balance, vitamin balance, and neither too much nor too little salt. He uses blood analysis, including crystalline patterns, and says that he can detect incipient cancer presence at the earliest stages.

The cost of the treatment is only \$15 (or 5 pounds) a month--air mail extra. Other disorders that have been solved are epileptic conditions, diabetes, dropsy and catarrh. The great factor, according to Mr. Hapier, is that he is able to assess the pH value of solid foods and liquids to a very exact degree.

Mr. Hapier says that one of his 2 patients from the U.S. who started on his treatment was doing very well, had gained weight, and his cancer was reduced by 60% in 3 months. Then he suddenly quit and went back to his old diet. Mr. Hapier said that he would have been clear of cancer in 2 more months. The other patient also made good progress, but would not keep to the diet.

Hapier claims that an excess of citrus fruits and excessive vitamin C can cause cancer. This is not to say that many cancer patients can not use a reasonable amount of natural vitamin C, if they need it.

Whether one takes more vitamin C or reduces it will depend on the individual case. This is one of the things Mr. Hapier determines, according to one's acid-alkaline balance.

8. Glyoxylide. A non-toxic injectable discovered by the late William F. Koch, M.D., Ph. D., in 1919 and part of the Koch treatment for cancer and most other diseases, including allergies and infections. Last address is Laboratório Koch de Brasil, Caixa Postal 86, Petropolis, Estado do Rio de Janeiro, Brasil (Phone 4058). The other address Koch gave was Av. João Luiz Alves, 314, Rio de Janeiro-G B, Brasil (Phone 26-3252). Glyoxylide (a patented trade name) is a catalyst which restores proper oxidation in body cells and converts toxins to anti-toxins in a chain reaction where dehydrogenation (removal of a hydrogen atom) initiates oxidation in the cell and destroys the pathogens integrated with the cell. The theory is that insufficient oxidation due to the accumulation of toxins in the body is a necessary factor in cancer and nearly every other disease. It was Koch's belief that the cancer germ or virus is originally harmless but becomes virulent when poisoned by the toxins in the system.

"The strongest and the sufficient proof that cancer is a response of protection against a definite toxin, however, rests with the fact that the removal of the toxin and destruction of the toxic sources is followed by complete involution of all cancer tissue, complete healing of the regions involved, return to health with absence of growth and pro-growth symptoms, and the absence of recurrence." Dr. Koch said that cancer cells have lost the capacity to conduct oxidation (and also the mechanisms that use the energy of oxidation) and therefore resort to the "Krebs" cycle of fermentation, a wasteful process in the production of energy, and this energy is transferred to the mitotic mechanism which forces cell division, and thus the cancer cell becomes parasitic upon the rest of the body as a whole.

Chemically, Glyoxylide is C_2O_2 , but apparently is used in polymer form in concentrations ranging from one part per billion to one part per trillion. Another excellent Koch remedy is parabenzquinone (#37) in a dilution of one part per million. Do not use in a stronger concentration than one part per hundred thousand.

In the booklet, "The Functional Carbonyl Group in Pathogenesis and Its Reversal," available for 50¢ from IACVF (section III, #1), Dr. Koch speaks of using high dilutions of glyoxal and methyl glyoxyl, and also the use of Rhodizonic acid, triquinoyl and diphenquinone in concentrations of preferably one part per billion to one part per trillion, all of which are described in his text, "The Survival Factor in Neoplastic and Viral Diseases," available for \$12 from IACVF (Section III, #1).

The California Medical Association claims that Glyoxylide at one time was labeled as "a one to a trillion aqueous dilution of partially oxidized inositol and the reaction product of acetaldehyde, ethyl alcohol, and sulphuric acid. Koch's U.S. Patent #2,382,425 mentions a procedure involving ethyl ether, sulphuric acid, phosphoric acid, ethyl alcohol and acetaldehyde.

Malonide is another of Koch's Anti-toxins. The American Cancer Society refers to it as "Malonide, Ketene Solution."

Recently, Szent-Gyorgyi (Nobel Prize winner), Egyud and McLaughlin published in the February, 1967 issue of "Science," (published by the American Association for the Advancement of Science), the article, "Keto-Aldehydes and Cell Division," subtitled, "Glyoxal derivatives may be regulators of cell division and open a new approach to cancer." A number of compounds, (including Koch's

methyglyoxal), were shown to inhibit proliferation of cells. Write to AAAS (Section V, #12) for reprints--about 15¢ each.

The Arlin J. Brown Information Center has not yet determined how to isolate or synthesize Glyoxylide. If someone could pass this information along to us, perhaps it could be picked up by someone else who could prepare more Glyoxylide to save the lives of more cancer patients. Two of Koch's U.S. Patents, # 7 and #2,382,425 (available for 50¢ each from the U.S. Patent Office, Washington, D.C.), may provide some useful information to chemists.

The Koch treatment is available from Institute de Regeneracion, Calle 9A - No. 334, (P.O. Box #1822), Ensenada, Baja Calif., Mexico (Area code 903, 398-1972). An appointment is necessary. If you desire an approximate estimate of what the treatment will cost you in advance, write to the Institute for a history form which is to be filled out and returned with a \$75 retainer fee (which includes follow-up urinalysis, complete blood chemistry, and your consultation appointment). A 4-ounce specimen of morning urine should be mailed to Apex Laboratories, P.O. Box 104, Gardena, Calif. 90247. Niehans' Cellular Therapy, the Hett cancer treatment, and other methods are also used. Cellular therapy steps up the eliminative processes, reduces the toxin load, etc.

A long time friend and collaborator of Dr. Koch, Wendell G. Hendricks, M.D., Box BH, Summerland, Calif. 92112 (805, 969-4000), told us that a doctor in Germany is using Glyoxylide. Perhaps it is still being used in South America, where Dr. Koch spent his later years.

Glyoxylide itself is given sparingly. One shot will clear up many conditions, but several booster shots may be given. As long as there is improvement or a reaction followed by improvement, a booster injection should not be repeated. Reactions characteristic of the Koch treatment often occur at the end of the 3rd, 6th, 9th and 12th weeks, or even later; or during the first 2 weeks. Frequent visits are not required. (Make appointment.) Some patients also go to Dr. Contreras (#24) for Laetrile.

Ambulatory patients who have not been previously treated by radiation are accepted, but not terminal cases. Cobalt and other methods of radiation should not be administered to any cancer patient, as these modalities destroy the blood vessels feeding the diseased areas.

The Koch catalysts used today are said to be

more effective than before, since new procedures are being used in their production and use. They are supposed to be 65% effective and up.

If indicated, a complementary treatment is also used, such as Rodakima, the Nicolini treatment, and Laetrile.

Any food which requires more oxygen to consume than it produces is eliminated. This includes animal proteins. According to Koch, other foods which contain a high acid content should be eliminated: asparagus, spinach, peas, citrus fruits, cranberries, lentils, persimmons, mustard, rhubarb, watercress, cucumbers, etc. Also avoid corn oils and salted foods. See Section II for further foods to avoid, many according to Koch. Scrub fruits and vegetables well with soap and water to remove all possible pesticides. Koch approved of castile soap, such as Conti; also Ivory and Sweetheart.

Dr. Hendricks recommends meat substitutes such as the Battle Creek brand, although they generally contain salt and seasonings. Soybean milk is recommended. It can also be sweetened with honey or blackstrap molasses. One lady who took the Koch treatment bought case after case of soy milk. Her cancer and her arthritis left her. Some researchers are against soy products for cancer patients because they weaken the thyroid secretions and contain too much organic cyanide and too much of the amino acid, arginine, which tends to inhibit oxidation. But Fere (#44) says that soy bean flour is the best of all proteins. (Millet is supposed to contain all of the necessary amino acids.) Perhaps the best course to take is middle-of-the-road and take soybean milk in moderation after the initial fasting and juice phases of treatment, if the patient cannot get sufficient protein from protein supplements and other sources, and if the patient takes sufficient iodide and vitamin C to overcome any weakening of the thyroid. It must be emphasized that a large number of cancer patients actually die of starvation, due to lack of appetite. But the patient, at a reasonably early stage of treatment (don't delay too long), must be fed well with good, properly balanced food to keep up his strength and supply needed nutrients to maintain good metabolism, especially if he is dangerously underweight. In one case of leukemia, a good psychic even recommended plenty of good lean red beef for a young man. We don't necessarily recommend this in all cases, but apparently it was one of the things he needed. But when high protein foods are taken, do not mix them with high carbohydrate foods, as the digestion of one will interfere with digestion of the

other, resulting in unwanted "debris" in the body. (See Section II.)

Koch recommends distilled water for drinking. He approved of vinegar, but Hoxsey (#17) disapproved. Avoid drugs, perfumes, colognes, ammonia products, or any other product which gives off an aroma. Twelve hours of sleep out of 24 is recommended. Rest and tranquility are very important adjuncts to recovery.

The blood sedimentation rate and crenation tests are good indexes to the degree of toxicity and improvement of a patient.

At a convention of the Christian Medical Research League in the Tuller Hotel at Detroit, September 25-27, 1951, 400 doctors reported a total of 17,000 cases of cancer cured with the Koch treatments. There have been 2000 doctors who were using this treatment.

One of the most documented books ever written about an unorthodox cancer treatment is "The Birth of a Science," by Wahl, Rehwinkel and Reilly, published by the Lutheran Research Society, Inc. This 433 page book contains much court testimony, cross examination, etc. from 20,000 pages of testimony from Koch's two lengthy court trials. (He was acquitted both times.) Before and after photographs and X-rays; photostats of diagnoses, reports on operations, biopsies from the Mayo Clinic and other respected clinics and hospitals, and other documentation is presented, as well as photostated articles from Detroit newspapers giving the testimony of patients and of doctors who stated that they were curing up to 45% of their patients. (The newspaper photostats may not be in the new edition.) The book also describes the intense persecution and attempted murder by the medical trust to destroy the Koch treatment. (Over the years at least 13 attempts were made on Koch's life.) Order from IACVF (Section III, #1). Price \$5 + 25¢ handling.

Among the many endorsers of the Koch method is Dr. Joseph Maisin of Belgium who was the leading Cancerologist of Europe. The most advanced cancer research was in progress under his direction at Louvain University.

Dr. Willard Dow, President of the Dow chemical industries and an expert in Free Radical Chemistry stated in 1946, "Koch is so far ahead of the thinking of his profession that he is not understood and they even ridicule him at times."

Dr. William J. Hale, chemist and pioneer chemurgist of the Dow Chemical Co. proclaimed:

"Dr. William Frederick Koch is the modern Pasteur."

Among the numerous Koch cures are a number of prominent people, including Sen. Everett Dirksen, whose eyesight was quickly restored by Dr. Koch, after he had resigned from the House in 1949 because he was going blind. As a result he ran successfully for the Senate a year later. When asked why he didn't use his mighty Senatorial influence to help Dr. Koch come back to his native U.S. and give American cancer victims a chance at life, he said: "Nothing doing. I'm afraid I'll make the doctors mad." This account is taken from the monthly, "American Capsule News," 939 North Kenmore St., Arlington, Virginia 22201. (\$7 a year). Sen. Dirksen related the story personally to its editor, Morris A. Bealle.

We don't want to single out Sen. Dirksen because many other prominent Americans are quite familiar with the persecution of doctors who offer a successful, non-toxic method of treating cancer.

We have reliable word that ex-Pres. Johnson is familiar with at least one of the successful, unorthodox cancer treatments. We also have information from 4 independent sources that Pres. Johnson has had metastasized cancer at least until recently and may still have it. At least three of these sources are very reliable. The best information we had said that the President would step down before the end of his term, due to his condition, and that his refusal to run was based on his poor physical condition, including a bad heart. One source who spoke with the President said that he had cancer of the kidney and larynx, which had spread to the shoulder and arm. He was treated at the Anderson Cancer Clinic in Houston, according to another source, whose name would be recognized by many Americans. Since orthodox methods cannot cure metastasized cancer, we would have to conclude that if Mr. Johnson recovers from cancer, the credit must go to unorthodox methods.

Some of the other prominent families, where at least one member was treated successfully by a doctor using an unorthodox treatment, include the family of the late Senator Robert Kennedy, whose son was cured of incurable Wilm's tumor and lung cancer with a treatment which, we are convinced, included hypotonic injections by Dr. Sidney Farber of the Children's Hospital in Boston, Mass., who claims 89% cures since 1960 with Wilm's tumor. Dr. Farber is considered the leading children's cancer specialist in the U.S. No orthodox doctor in the country can even begin to approach

such a cure rate with Wilm's tumor, which is considered to be incurable. The discoverer of the hypotonic therapy told us that he informed Dr. Farber of the hypotonic treatment by mail in 1958 and that Dr. Farber uses Actinomycin D in hypotonic form. Vice President Humphrey's son had deadly lymphosarcoma but is apparently in good health today. We know that Humphrey had knowledge at least of the hypotonic therapy (#9) and that orthodox methods do not cure lymphosarcoma. The press said that the young man had Hodgkin's Disease. However, upon questioning, the Vice President's right hand man admitted that it was lymphosarcoma.

In 1939 Dr. Koch received an urgent call from a member of the British peerage to come to London at once. The full details of the reason for this urgency was not made known to Dr. Koch, but since he knew that Lady "X," whose family was traditionally close to the Royal Family, had had a personal experience with the results of the Treatment, he left immediately. The personage involved necessitates anonymity. Let it merely be recorded here that the effects and results of the Koch treatment are known in such circles. More cannot be said without breaking confidences.

It would be wonderful if these people and all the other well known ones were to publicize the unorthodox methods which saved their lives or the lives of their loved ones, so that the lives of their constituents and all others might also be saved. Unfortunately, nearly all of them are afraid of organized medicine. They are afraid of losing the next election if they tell the country what unorthodox treatments saved lives in their families. To this we say there is safety in numbers. If several dozen of these high ranking personalities, even including the President, banded together to tell the country the truth, perhaps the A.M.A. could be defeated with minimum retaliation. These prominent individuals should try to get additional support from those sincere doctors, researchers and officials in the American Cancer Society, the National Cancer Institute, the FDA, AMA, etc., who know the truth but are afraid to speak out. We appreciate the moral support given by some of these individuals to unorthodox treatments.

9. Hypotonic Therapy. (The following text is presented intact as received from the proponents of this therapy in June, 1968.)

A very good method for treating cancer and many other ailments was discovered by John T. Stephens in 1957. The method consists of the regular intramuscular injections of pure, sterile

distilled water, although other non-toxic solutions of hypotonic concentration (i.e. of osmolarity less than that of body fluids which is equivalent to the osmolarity of a 0.9% saline solution) can be used. One part to 20 of 2% procaine hydrochloride (0.1% concentration) is added to prevent pain from osmotic injury from the injection. The basic threshold dosage is 1 cc of hypotonic fluid per 25 lbs. of body weight every 3 days. A 1/2 inch to 1 inch needle is adequate (5/8" or 3/4" being comfortable for average weight adults). Limit each injection to 2 to 2 1/2 cc per site, selecting sites at least an inch or more apart. Needle widths #25, 24, 23 and 22 are all good, #23 providing comfortable fineness without slowing injection excessively. Several manufacturers, including Cutter and Lilly, put out 30 cc multidose vials and 5 & 10 cc ampoules of sterile water for injection, either without any preservatives or with those of very reduced concentration. (Add 1 1/2 cc of 2% procaine hydrochloride ["Novacaine" is a common brand] to each 30 cc vial of water. Add 1/4 cc procaine to each 5 cc ampoule or 1/2 cc to each 10 cc ampoule). Water containing benzyl or propyl alcohol of approximately 0.9% concentration will not provide an adequate hypotonic medium and should not be used. Physicians and pharmacists may order water direct. (Vial quantities of 25, 50, etc. are suggested.) An individual may obtain smaller quantities from a pharmacy with a doctor's prescription.

The syringe and needle must not be sterilized with alcohol. Residual droplets will reduce or eliminate the hypotonic factor, (which depends entirely on final solution being between 99 and 100% pure water. At 99% purity the hypotonic factor and therapeutic effect can be nil. Use only boiling water or steam to sterilize. Inexpensive disposable syringes should be discarded after each use. Once started, the therapy should not be stopped except for the most grave reasons (extreme disintegration reaction) and then not for more than 10 days. Sudden termination of therapeutic disintegration of cancer leaves the remaining malignant cells without the retarding protection the body presents to growing tumors, allowing the remaining malignant cells to spread unchecked by the withdrawn therapy with greater rapidity and metastatic tendency than if no therapy had ever been started. Both patient and physician must consider the application of this therapy as one powerful attack, continuing uninterrupted to the complete destruction of the malignancy. It is better not to begin at all if probable continuity is doubtful. Injections should continue for 18 months when treating cancer, which allows an ample safety margin.