

PSYCHOSOMATIC JUDGMENT

by

William Frederick Koch, Ph.D., M.D.

In a long practice of medicine one meets with many disasterous errors in tissue functions, and the tendency is to look upon them as exclusively of physical and chemical causation. And while such forces play active roles in disease production, there is also a source of distress that has a psychic origin and even holds a primary place. Indeed, it was the initial experience consequent to the rupture of the Good-Will reciprocity between the Creator and man that brought on disease and unhappiness. With it was also lost the energy capacity that sustained physical life indefinitely.

When the principle of Good-Will was surrendered to its opposite, Ill-Will, psychic disease was the result, and it is my purpose to show how it may terminate in dire fatality. Though the subject is gruesome, it is also interesting, and also most instructive as an aid to a happy success in meeting the stresses and shocks of the present social milieu. The principles exposed here are illustrated by failures in the lives of those who had a great chance for success in serving the Good-Will Principle to their own betterment and for man's generally. These failures will be our examples of psychosomatic justice, and being people of high public responsibility at the expense of our tax dollars, they should be of real general interest. The interest will augment, moreover, when we see how the psychic structure of each of us is so arranged, that one's behavior to fellowman must be in line with the Good-Will Principle built into our souls. When it is contrary, the conflict between right and wrong results in psychosomatic disease. The mechanism of this phenomenon, as illustrated in the failures just mentioned, is one of the automatic provisions for the protection of life and offers a moral lesson that must be studied.

Psychiatry, our most recent medical science--whose roots were planted at the dawn of history, has no instruments to measure the soul, so it sometimes ignores it. But in our discussion, we must deal primarily with it and its fate as man's psychic make-up has determined. It is a physical, mental, spiritual complex, and their coordination and its direction determines a successful life or a failure in which there is no half-way, Heaven or Hell, as we shall see.

The relation of man to the Creator was meant to be by FAITH, a spiritual essence which we cannot understand fully. Yet by considering our origin as of the dust of the earth physical and of the Creator's Breath of Life, spiritual, we are made in His image, or pattern. This dual image, pattern, helps us to understand some of our psychiatric qualities. Physical things we know are limited in time and space. Hence there was a time when the universe did not exist, and it must have been made out of and by something pre-existing and not limited in time and space, but spiritual. Thus, when the spiritual became physical as well as remained spiritual, it became dual in pattern or image. And we as made by Him in His pattern or image have gained His spiritual

qualities, and with them the Good-Will Principle that he placed in our souls as standards and judges of Good-Will life. Our souls then become our judges and, as we shall see, our executioners as well, in maintaining the Creator's Justice, without which the universe could not continue eternally. We become part of the automatic continuance of the universe a'so, for when we are in conflict with the Good-Will Principle, we eliminate ourselves by the psychosomatic disease mechanism, as a conservation measure. The examples we will sketch demonstrate its precision inexorably.

The psychosomatic behaviors we are to exhibit should be expected just from rational considerations. Practically we see them operate as specific judgments. Many of the qualities of the subconscious are well chartered, but not all. We know, however, that it is not confined with the soul to the limits of the physical body always, as many extra-corporal phenomenon have been identified. The subconscious never forgets, and is a true record of every mental and physical experience, so it never alters, but carries on into the spiritual life the memories and concepts of the past, whether in harmony with or contrary to the Good-Will Principle. It sits in judgment, solves problems, and attempts to harmonize and put in order the entering thoughts and qualities that come to the mind. It reaches forward from the higher spiritual dimensions to put into the physical and mental executions of genius qualities as Bach's music, Edison's inventions, MacArthur's and Washington's generalships, etc. But mainly for the sake of the present discussion let us consider it as a judge of behaviors that we approve of, or disapprove mentally, and which must be placed in order in the subconscious. If they agree with the Good-Will Principle created in our make-up, there is no adverse problem. But if there is a conflict between them, then the Ill-Will behavior concept cannot be harmonized with the standard, and depending on the energy placed into the evil deed involved, psychosomatic disease will follow with comparable force.

If in addition the concept is obnoxious to one's mind, or fearful so that the mind wants to be away with it, he will forget it and suppress it consciously. But it is then submerged in the subconscious without the reasoning power of the conscious mind to deal with it, by correcting the evil deed, repenting and making amends, or when there is no longer a chance for that, to place it on the shoulders of one who does make amends, the Redeemer. Otherwise, the submerged concept, that cannot be resolved, is a thorn in his flesh, and may emerge as a second personality, or as some psychosomatic disease. And if not resolved, it goes down into eternity as his spiritual heritage, to continue without end. We will soon see such an example.

In the conflict between evil and the Good-Will Principle, the former carries a quality of fear in the subconscious, whether the conscious mind shares it or not. It is this primordial sense of fear that sets the defense mechanism of the sympathetic nervous system and its associated adrenal gland function into action, not as a coordinated defense mechanism, but as an irrational, uncontrolled mechanism, that can be explained as follows:

The sympathetic nervous system with its contingent adrenal secretion has the action of constricting the small blood vessels, and reducing the flow of blood to a part, so that the blood will have easier access to a part

of the body that is in need of a higher blood supply. Thus during digestion of food the stomach, intestine and liver receive an increased blood supply, and if one must run for survival the blood is shunted into the leg muscles, as the sympathetic nerves cut down the blood supply to other parts. At the same time, the autonomic nervous system dilates the blood vessels in the part that need the increased blood flow. This is physiological and a coordinated reaction. It goes with conscious natural survival fear, or normal functional uses.

On the other hand, if the fear is subconscious and associated with an abnormal unharmonizable deed, there is no coordinated reflex and the action on the sympathetic is not physiologically controlled, but responds to any irritation, injured area, or psychically identified area associated with guilt. Thus an area of vascular constriction can happen in the stomach, the uterus or brain, or any other place, for the sympathetic nerve fibers are distributed to all tissues. In such areas where the blood supply is reduced the oxygen supply can be so shortened that carcinogens, viruses or a bacterial poison can do their pathogenic damage freely, if only momentarily. Thus, any disease can be produced as a psychosomatic effect. And so long as the subconscious is under the influence of the conflict, the effect will persist even to fatality.

The more energy put into the evil deed, the less the chance to hold back the fear responsive element. And the more the energy put into the fear response through the sympathetic and adrenal activities, the quicker the train of deadly consequences. The relation is simple, it is mathematical. The Holy Scriptures cover it and offer the way of escape besides. This brings us to the subject of redemption with which we must deal a minute to understand the inevitable fates of the evil-doers we are going to use for examples.

Redemption was built into the Creation at the beginning, and reason understands it as a cause and effect principle. For with the investment of the Breath of Life, the eternal essence of the Creator into mankind, an economic factor was introduced, and its redemption became a part of the conservation principle that governs Nature universally, without which it is evident that Nature would have gone out of business long ago.

So here the Gospel of Jesus is truly the essential factor in man's progressive existence. Further, man sinned on the human level, and his redemption had to be done on the human level also. But man was too widely separated from the divine qualities to accomplish his redemption himself. Only the divine Creator could do that, and so as I see it in the Gospel of St. John, the Redeemer is introduced as "One with the Father" identified to us as the Son of God.

As the evil-doers we will use as examples had no use for repentance or the redemption and the sufferings of Christ for each individual penitent, one ordinarily asks how it would be possible for one Redeemer to pay the debt of each penitent who opened his heart to Him. The answer is that Jesus was not an ordinary man, but infinite in time and space, and in each and all who had opened their hearts to Him, and infinite enough to be in all, and to be infinitely present in each one individually. That is what INFINITY means. So that redemption is accomplished within the soul individually.

All submerged concepts need not be criminal or evil unto others. Most are not, but some are consequent to the stresses of every day's life. I will illustrate a few now. Then one can see the difference, in the evil sequelae.

The first simplest case is one that illustrates two factors in all innocent cases I have observed. The mechanism involves a toxic agent that makes certain nerve cells and fibers more irritable, that is more susceptible to being influenced by a nerve impulse than is normal. The other is a nervous shock, such as caused an innocent fright that localized the nerve tracts for increased irritability. (Details are given in the book, "THE SURVIVAL FACTOR IN NEOPLASTIC AND VIRAL DISEASES.")

The case in mind is a young woman who came to the Rhineolaryngologist because of spasms of the throat, that came on at any time of the day or night. The surgeon cleaned out her nasal passages to get rid of an old infection. But still the spasms came on. When she came under my observation, I noticed that the reflexes were definitely those of a severe fright. She grasped her throat with both hands, while taking a deep breath that she held with visible terror in her eyes. So I simply asked her if these spells came on in association with any daily occurrence, as a gun shot, fire engine siren, or any other strange sounds, odors or anything otherwise. She reported there were no such associated occurrences. So I asked if they came during the quiet of the night, and she answered yes. I asked if before they first started had she received a fright while at sleep during the night. And she told that one night she was awakened out of her sleep by her sister running into her room crying that her mother dropped dead and that a week later these spells started.

I explained to her that most likely at the time of the shock she grasped her throat with a breath she held with the terror look in her eyes, and that the spells were just a repetition of the same act and had no further significance. She never had any more thereafter. The concept came out of the subconscious and was solved in the conscious mind. However, there was the other element, the toxic condition of her nasal sinuses that were infected when the shock came and the toxins therefrom had integrated with her nerve tracts involved in the fright complex. They had also attacked other nerves too, but where the shock impulses followed these tracts, they were also susceptible to the habit repetitions even after the infection was cleaned away. So now with both factors removed she was cured.

The next case is also a case of innocent psychosomatic disease. This man, a clergyman of about 45 years of age, had been in a serious train wreck. He came to me, however, for an intractable upper respiratory sinus infection caused by a very virulent staphylococcus aureus hemolyticus strain that refused to yield to the best surgical and antibiotic care. I gave him one dose of the remedy that was under heavy attack by organized orthodoxy and its bureaucracies. Three months later he returned with his report that the infection was entirely cured and that he also left behind an embarrassing compulsion neurosis that the psychiatrists had failed to help in the least.

This case is sketched on page 207 of the Survival Book as an allergy of the cerebral centers, Case No. 63. He was preconditioned for nerve tract.

disturbance by the toxin elaborated in the nasal sinus, staphylococcus aureus infection that had done its damage before he was in a terrifying train wreck. This he submerged in the subconscious, and the train whistle with it. So, for years whenever he heard a train whistle, he let out a yell automatically and without control to the peak of his voice as he did during the train wreck. The train whistle, whenever heard, called forth the yell as the psychomatic response while the horrors of the wreck were forgotten--submerged in the subconscious. The yell sprung out of the subconscious that was "grooved" in certain nerve tracts by the intensity of the whistle's impulse together with the yell under the shock of the horror of the wreck. The "softness" toward being grooved was the effect of the staph infection poisoning on the nerve tracts. When the infection was cured, the nerve tracts were relieved of the poisoning and returned to their normal balanced impulse passage. The psychomatic effect was cured by curing the infection.

The next case, No. 64, showed hallucinations during the evolution of a toxin yielded by a focal infection as it polymerized to the stage where it could integrate with nerve tracts to "soften" them for "grooving" by an oft-repeated impulse, an obsession of having swallowed needles and pins. As the toxin polymerized further to the stage where it could produce cancer, the neurotoxic symptoms ceased showing and the stomach cancer developed. After the treatment of the text the neoplasm underwent digestion and absorption, and during this period she obtained nutrition from it and at the same time the carcinogen was being depolymerized back to the neurotoxic stage where it again produced hallucinations until the toxin was depolymerized further down to the original state where it was produced by the germ originally, and then burned away to complete harmlessness. This completed her cure. Eighteen years later at the time of my first trial she came to me and asked for the privilege of testifying for me. At the time she said, "Doctor, do you remember the crazy notions I had when I was sick? Well, the strange thing was that I knew all the time they were not true, still I could not help believing them." She thus showed her split personality, and it balanced into normalcy as all the effects of the germ poison were removed from her system. The schizophrenia was cured.

Another case that is a little more complicated in a woman of 50 years of age involved a split personality complicated with the development of cancer of the stomach. She had been diagnosed as a mild case of paranoid schizophrenia for four years before the cancer symptoms started to show up, but the schizophrenia disappeared while the growth was developing. When I saw her she was in a terminal state of cancer of the stomach, emaciated to skin and bones, not able to take food, with a massive cancer tumor of the stomach that was as large as a cantaloupe melon. No nerve trouble appeared then. I treated her in August 1942 expecting to never see her again, as she lived seventy miles away and she could have died any minute. However, three weeks later the family informed me that she was again having the hallucinations, was still unable to eat but was gaining strength.

However, where the concept is one of guilt and is not repeated, the neurological and psychosomatic sequelae may still be removed, and the cure obtained when the psychiatrist brings back to the conscious mind the suppressed concept so it can be analyzed, understood and repented. But if that is not

done the whole chain of disaster will follow. The case in mind will illustrate. However, to accomplish this the toxic agent must be removed. Only then can a true cure be had. The following case shows a failure as nothing was done in time, that is whereby the toxic agent could be removed. So the suppressed concept gave rise to the psychosomatic facility for the toxic agent to bring on the fatal uterine disease. It was cancer of the uterus. In this case, the sympathetic nervous system and adrenalin attacks on the point of guilt and brings on an anoxia in the uterine cervix that lays it open to the carcinogenic attack. I did not see her until she had been fatally burned by X-rays and radium, and there was no chance to even help her condition.

I saw her on her death bed, and with her husband at her side I watched her pass into eternity. Not only did the psychosomatic result of an unresolved concept bring on her physical death, but also it carried her soul into eternity as the unremitting break in harmony with the Good-Will Principle. Its infinite loss from what the following events revealed was the terror, horror and hideousness she had to face without reprieve. I watched her, as she stopped breathing. The heart had stopped, she was legally dead, and I said to her husband, "Now she is at least free of her terrible suffering," when suddenly she sat up straight in bed, and pointing a drooping finger into space, assumed such an expression of horror and terror that her eyes actually popped out of their sockets. After a few seconds she sank back dead for sure. It was the most terrifying experience I have ever had. It killed her husband. For weeks he could not sleep, and haunted by the scene, he passed on from the shock. What was the suppressed concept? It seems that from the case history that one or more abortions had not only injured the uterine tissues so that they were scarred, but the tissues were made ischemic thereby and thus a favorable site for the cancer virus to thrive. The suppressed concept of guilt she wanted to forget forever was deeply submerged into the subconscious mind as an unresolved conflict. It stayed with her not only to start the psychosomatic sympathetic adrenaline action on the cervix uteri tissues, but thereby caused the ischemia that further favored the carcinogens that roamed about, and it also went with her into eternity as an unforgiven breach with the Good-Will Principle. This is a serious matter to contemplate. The husband did not know the mechanism by which such things operate, but he knew as much as he needed to make him mourn himself to death.

One other thing is easy to explain, and that is the sitting up of this legally dead woman on her own power to point at something in space with an expression of terror. It is well known that nerve tissues and muscles, or the heart, can be made to respond to an electric shock for sometime after they are removed from the body. They contain vital energy for many minutes or hours. The nerve muscle systems were still active at her early stage of death, and all that was needed was a sufficiently potent stimulus to bring about the response she gave. This was not an electric shock that gives an uncoordinated response. This was a volitional, coordinated, purposeful response, carrying out an idea. What she saw was terrifying, invisible to sight, so her eyes did not see it any more than did her husband or I. It was invisible to us, so it came to her through her subconscious mind as its only possible source. What she saw was not in the physical, but in the spiritual realm, and what it was indeed was terrifying enough to elicit the terror response.

Since this experience was entirely unusual to me, I wished to learn if any other physician had encountered anything like it. I did not have to go far. On recounting it to a longtime friend and collaborator in whom I have full confidence, he spontaneously offered the answer thus, -- "Why I had a similar affair." He then told of being called to a man who was dying of heart failure. He arrived just too late. The man had just stopped breathing, the heart had stopped beating, and all the tests showed that he was legally dead. He drew the sheet over him and while spending a few minutes to comfort the widow, the man suddenly set up and with eyes wide open in great terror, let out a piercing shriek that chilled one to the bone." It lasted but a few moments, and he sank back in bed lifeless.

If we analyze these two terror incidences, comparing them with the previous innocent psychosis cases, and holding in mind the properties of the subconscious, that can receive impressions of concepts that we interpret or perceive with our senses, of vision, hearing, smell, etc., and that elicit functional responses purposely coordinated, we see that the innocent cases showed expressed fright to some mundane affair which was identified with it. On the other hand, the "post-mortem" responses were elicited by a stimulus that was invisible, that no one in the room could see, and could therefore enter the nervous system through the subconscious mind only. Both of these two latter cases, in simple words, had a glimpse of hell, as it seems to me. What else could it be? The psychological interest lies in the origin of the fear coming into full bloom at the sight of something spiritual. Fear must have already been there as part of man's makeup. We referred to it as the subconscious excitant of the uncoordinated sympathetic and adrenal responses of psychosomatic disease producing ischemia. Here it is fully uncovered as the essence of Evil-Will, unredeemed, and unhindered by the conscious mind that had ceased to exist.

Extra-corporal evidences of the Good-Will phase of eternity have also been recorded. These are experiences of the redeemed, and are reported in religion as well as in everyday life by those devoted to the service of the Creator.

Psychosomatic responses are not controllable by the will nor by reason. When they arise in deep-seated traits of heredity or character, they need only to be touched off by a fear complex to explode either (a) as a psychosomatic sympathetic-adrenal ischemic crisis, or (b) an uncontrollable expression of a deep-seated envy-greed fear complex.

An impressive example of the first response is seen in the crisis of a dermatologist who on observing two cases of his psoriasis failures making rapid recovery after our treatment, suddenly was blanched white as a sheet, unable to speak, his tongue frozen to his palate, rigid as a statue. The crisis also blanched his brain for he could not think and appreciate his chance to not only cure the unfortunates, but to gain handsomely in reward. Reason was a secondary matter depending on his recovery from the brain ischemis, which indeed was instantaneous, and a psychosomatic result that shut reason out.

The other case is not so dramatic, but it shows a quality of fear-envy-greed that could not be controlled by reason either. It sprung up from the

subconscious quicker than he could think. The occasion arose in his inability to deny the credit for curing the infant of cancer of the liver, detailed in the Survival Book on pages 94-100. Since he could not deny the diagnosis by biopsy and the terminal status of the patient when treated, nor the completeness of the cure, he shouted he would rather lose his reputation as a physician and deny the diagnosis than to give the Koch treatment credit for the cure. Reason could never have allowed such a response, only an Ill-Will control of his Soul.

Three elements are required for a psychosomatic response, (a) a threshold intensity of the intention and effort put into the act, (b) the Good-Will primordial guilt-fear essence in the subconscious, and (c) the absence of the guilt-fear concept in the conscious mind, and hence the absence of repentance.

PSYCHOSOMATIC VICTIMS OF THE 1919 OFFICIAL FALSELY REPORTED INVESTIGATION

I had refused to do business, more particularly surrender to the A.M.A. Boss in 1918, who ordered me to turn over my whole research to him, including processes, patents, secret methods, etc. I refused. And in the Fall of 1919 I was submitted to an investigation of my procedure before I had half a chance to develop the subject. This I welcomed, however, as I had been getting remarkable cures, even though I was much mystified as to many details.

The A.M.A. ordered the Wayne County Medical Society to which I belonged to appoint five official members of the committee that would oversee the affair, and arrange for the patients to be treated. They selected five undoubted terminal cases of cancer, and placed them in the contagious disease hospital for me to treat. This committee selected the patients as fit for such a test, that is terminal cases that had no chance to live in any event. This committee was required to sign their names to the examinations of the patients, each and every one before I could treat them. These patients were stretcher cases, bleeding, suffering and in danger of dying, and they were waiting in the ward three weeks more or less, waiting for treatment, while I was waiting for the patients to be recorded and duly signed by the members of the committee so that I could treat them. Finally their danger of dying was becoming imminent and so I appealed to the president of the Society to force his committee to do their duty so I could treat them. He was furious over the delay, and stormed, "I will allow no crooked work by this committee so long as I am president." He ordered them to be at the hospital the next morning at 10 A.M.

I was there sharp and early, anxious for my chance. At 10 A.M. two members of the committee showed up and made one examination of one patient, while another peeked in through the door and sneaked away. After this one patient was signed up by the two members, they decided it was getting too late and they must go. They left, and that was the end of the committee's signature. I treated them all with a prayer for the Lord's help, and I was not long waiting. In three weeks these patients were up and around, no more hemorrhages, no more pain, cheerful, gaining strength and joyfully encouraging each other.

But the committee did not fare so kindly. They became panicky, ordered the patients all back to their distant homes and forbade them any further care from me. Only after that happened did I figure out why the patients were selected from distances of hundreds of miles away, when any number of cases could be selected from any charity hospital ward right in Detroit. Certainly they were taking no chances on any of them getting cured. In fact, one patient up in the seventies riddled with thousands of metastatic sarcomas of the very virulent neurosarcoma made such a rapid improvement that one of the committee members warned him that he should hurry back home as fast as possible, for if I gave him another dose he would melt away like the tumors had done. He went in a hurry.

Then the committee closed the investigation on the grounds that I had neglected the patients. They gave out a report of no results. They had accomplished their purpose for all time to come. It was used in the Federal Trade Commission argument before the U. S. Appeal Court in 1946, and these few words, falsely stated that "nothing came of it" about the test, carried heavy weight in condemning me.

Of the five cases treated, three were completely cured that I myself found, as well as did their own doctors. The fourth, who was sent back home to 300 miles north while recovering from neurosarcomas, seems also to have recovered, as for five years and more, other patients came to me on the strength of the good results they observed in this case. And it is certain that this man would never survive more than a few months, were he not cured. That made at least three cures and most likely the fourth, which meant 60 percent or 80 percent cures in terminal cases of cancer treated under every disadvantage. Was that "nothing came of it"? Did anyone violate the Good-Will Principle where the judgment is recorded right in the hearts by their own acts? We shall see.

Of the five committee members there were three members that planned the downfall of the investigation with me dangling on. They were the active members. The other two were harmless, and wished no ill to anyone. They had no control and were as good as absent. These escaped psychosomatic consequences. The other three who were the leaders all died of cancer as fast as the disease could develop after they had given their "illustrious" report over for publication. They all had a chance to repent and correct their error. They had no such thing in mind. *Here is a controlled test of the operation of the subconscious mind, the soul, to secure the elimination of enemies of Good-Will.* The three that violated the Good-Will Principle died most miserably of cancer just as they had planned that cancer sufferers should die without help. The other two who had no Ill-Will conflicts in their hearts had no psychosomatic problems or fatalities. They escaped. Jesus said, "The soul that sinneth, it shall die." Correctly indeed, for it was in the soul that their sins worked out their own punishment in full measure. The other critical enemies of Good-Will who turned down the chance to serve the Good-Will Principle followed the same pattern of crime and self-disposal after they betrayed their opportunity. We shall see the same rule followed out in these.

The psychiatry of the events that followed showed the same pattern as those that characterized the 1919 investigation exhibition of Anti-Good-Will, Greed was the mainspring both ways, and a disregard for human welfare.

THE DRUG MONOPOLY TAKES OVER

I had made a vacation visit to Rio de Janeiro under the invitation of the distinguished professor of gastro-enterology of the University of Brazil. Our demonstrations are only partly recorded in the testimony of the 1942 Federal Court trial, which also established that terminal cases of liver, stomach and breast cancer, terminal status of rheumatoid arthritis, some far advanced leprosy cases and hopeless cavitary tuberculosis, were cured. The faculty was enthusiastic until the drug monopoly put on the pressure, and decided to eliminate me from what they feared would develop into great competition.

The crisis came when a man of about 35 years of age had been under months of treatment for a degenerative disease of the brain diagnosed as the incurable Huntington's Chorea by an eminent neurologist. The patient had taken \$1500 worth of medicine without the least help, as he deteriorated steadily. He was offered me for demonstration by the eminent Professor Roxo as a case that would not live more than a few weeks at best. I treated him and he was sent home as cured in five days. The excitement then reached the peak of drug monopoly endurance, and on my next visit to the asylum, a man rushed out from the door thrusting his fist in my face and yelling, "We will fix you. We will stop you from interfering down here any more, your doom is sealed, we will eliminate you." I asked if they taught the inmates English, and he replied, "I am not crazy, I am the Parke Davis Company representative. When the U. S. Government gets through with you, Dr. Koch, you will be all washed up and not be able to go anywhere."

Indeed the man was not crazy. Two weeks later I received notice to return to Washington to discuss my labels. I returned and thereupon started the "steam-roller" of crushing out my competition to the Drug Monopoly. This from all appearance had much more importance than the progress of Medicine or the health and welfare of the suffering public. It eventuated in psychosomatic fatalities through cancer in each Food and Drug and each Federal Trade Commission leader that carried the active roles of destruction against our service. We will use them as proofs of the deadly consequence of violating the Good-Will Principle established in every soul at the Creation. Each man's soul carries his judgment seat within. The mechanism will be illustrated as my thesis. The events that followed were simply that within two weeks I was ordered to return to Washington to discuss the labels I had placed on the ampoules I distributed to my collaborators. As fast as the Food and Drug Administration managed to get me indicted on fraudulent label charges by a Grand Jury, which took until April 1942, I was put in jail.

THE F.D.A. ATTACK, ITS PSYCHIATRY

The attack of the Food and Drug Administration had no basis, as the District Director of the Southeastern District, visiting my home in Florida, stated to me at the time of my arrest. He agreed that I was being attacked on a label charge even though there was nothing wrong with them, but they had

nothing on which to attack and that is a convenient way to cause their trouble. He advised me that I was fighting for my life, and I should not compromise. At my arrest on Good Friday after the Holy Hours of 1942, I was jailed in Miami, and the next morning at the setting of the bail, the intentions of the government were exactly stated, as the Parke Davis representative in Rio had stated. The District Attorney argued that my bail must be \$10,000. This the judge said was too much, and forced him to tell why he demanded such a ridiculous bail. He answered that right after the indictment was handed down in Detroit, the District Attorney there telephoned him to insist on a \$10,000 bail, as "Dr. Koch had started work in Brazil, and we do not want him to go back and finish it." This again confirms the intention of the Parke Davis representative, and the worries of the local Florida F.D.A. Administrator. So the initiating concept was to get rid of my work by getting me in prison. During the end of the first trial at the end of five months of daily sessions, the Attorney General from Washington sent to make a success of the conviction saw that he would lose the case, and in anger before many persons, he yelled out his venom, thus, -- "Koch, we went after you the wrong way this time, but we have ways that never fail and we will keep after you until you are dead or we have you in jail the rest of your life, and nothing can stop us."

So in his working concept there was no respect for the proofs that my treatment was of benefit and cured cancer and tuberculosis, paralytic polio, terminal cases of rheumatoid arthritis and leprosy, but to eliminate that service from humanity for the sake of Drug Monopoly profits, and the unkindly way they intended to do it was my destruction, by jail, unless death beat them to it.

So the concept of Ill-Will was double throughout. Then the secondary supportive concepts were the plan to carry their frauds forward as they had no honest leg to stand on. They did that by a famous old-time Chicago "Gold Brick Trick." Instead of testing my ampoules which they condemned, they tested a substitute and did not test my material I submitted to them as the law required. They claimed that our Glyoxylide was nothing but glyoxalic acid, and tested the latter instead, and showed it had no effect in countless expensive experiments, always showing it was ineffective. Moreover, as an excuse, they claimed that by adding water to my Glyoxylide it became glyoxalic acid. So we proved by the leading American chemists, the experts of the Dow Chemical Company, that my Glyoxylide, which is a polymere, can never be converted into glyoxalic acid by exposure to water, to boiling water, to steam under pressure or in any other way whatsoever, and it is a polymere of high molecular weight that can never be converted to an acid. So their fraud was exposed and they could not get anyone to rebutt the truth. However, they spread the same falsehood to discredit the work in spite of having to withdraw their charges of inefficacy, after two failures to try to make the fraud stick.

So here we see the supporting concepts of fraud in a number of categories, but never repenting and attempting to correct their deeds against the Good-Will Principle. The victims of the resulting psychosomatic shock must be described. It will be seen that those who suffered were those who actually carried the deeds forward, and the psychosomatic effects were commensurate with the intensity and energy they put into assaulting the Good-Will Principle.

THE F.D.A. PSYCHOSOMATIC VICTIMS

The first was the Assistant Attorney General from Washington. He is the one whom we just quoted a while ago. He had a load of conflicts that could not be harmonized with the primitive Principle of Good-Will. Sadly, after his job was finished at the close of the first trial he took sick, and it was reported that he was confined to an asylum, a raving maniac. We did not get the documents proving anything such as cancer of the brain or any data that cleared the picture. However, the Assistant Attorney General from Washington who supervised the second trial in 1946 was proven to die of cancer of the stomach that did not wait until the trial was over before it showed its first indications, for I saw one of the metastases developing on the back of his neck before the trial closed, and two months later he was dead of a most violent, painful cancer of the stomach. The speed and violence of this exhibition of psychosomatic effects was quite in proportion to the energy he put into the attack on the Good-Will Principle. His health was good at the start, and middle-aged, but was fuel to the fire of psychosomatic justice.

The next victim was the Director of the Food and Drug Administration of the Western Central District that included Detroit, where the trials were held. He conducted both trials also and was most energetic in putting up the false experiments with their elaborate charts planned to deceive the jury with their "Gold Brick Trick." He also died of a most painful cancer of the stomach soon after his job was one.

Only enough time was given each of them to repent and try to correct the harm they had done. They despised any such thought and only regretted that they had not succeeded in accomplishing the harm they had attempted. So there was no other fate for them but the inevitable psychosomatic effects they created.

The next victim was the Judge of the Federal Trade Commission who conducted the many trials nationwide where they attempted to deny the reports of my thesis given in medical journals. Since every report I had given was meticulously accurate, they had to resort to fraud. This one died soon after his false reports were prepared for the FTC to use on the U. S. Court of Appeals. He lived only long enough for a fatal cancer to develop before he died, but we failed to receive the official reports as to the autopsy findings. Still, he died in line with the psychosomatic pattern just like the others.

Then came the FTC attorney who accompanied the FTC judge on their nationwide trials. They were both equally active in trying to destroy our truths, and as the FTC is not bound by such rigid rules as the Federal Courts, they had plenty of opportunity to prevent our testimony to get in, and to put in any testimony that suited their purpose. They could decide if or not they were successfully proven false, and our testimony to prove their frauds could be and was excluded from entering the testimony and the records. It was the use of this chance to do violence to Truth and Good-Will that was the undoing of both. For the conflicts created in their subconscious between proven truth and destructive falsehood were of such violence that only the most violent self-destruction must result, and it did in both. The attorney died of a most terrible cancer of the

brain that went into action right after he had completed his "BRIEF TO THE SUPPORT OF THE COMPLAINT." It gave him plenty of misery for months until he entered eternity. I hope it allowed a chance for repentance.

Since the FTC Act allows the changes in the factual data and documents that suit the FTC convenience, we ran the same cases parallel with the FTC and the Federal Court trials, and the proven uncontradictable testimony of the Federal Court trials stand firm to contradict the fraudulent allegations and fraudulent changes in the factual evidence used on the Appeal Court by the FTC.

So let us examine the effect of the FTC testimony on the Appeal Court. The following statements from the Appeal Court on page 10, paragraph 2, of their Decision to Support the FTC Injunction, states, "---wherever petitioners represent that cancer has been cured after one injection of Glyoxylide, they made several simultaneous statements of fact. They state that the disease cured is true cancer. They represent by implication that the disease is permanently cured. They state that this result has been achieved by a Koch drug."

The Commission made finding upon all of these points. Its statement that the evidence of the petitioners was unconvincing because of faulty evaluation and inaccurate diagnosis was a finding of fact---."

Page 4, paragraph 3, states: "Petitioners urge and the record shows that the Commission's witnesses have had no clinical experience with their products. This objection goes to the weight but not to the competence of the testimony. The general medical and pharmaceutical knowledge of the doctors qualified them as to the lack of therapeutic value of the Koch products."

These Appeal Court statements were "statements of fact" which the commission had stated entirely unproven and were false as the testimony showed and we shall now demonstrate.

In the first place, the Commission's expert witnesses admitted they had no experience with the products clinically or scientifically. They were honest, and showed that they were not experts since the meaning of the word "EXPERT" in any dictionary says that an expert is one who has exceptional knowledge on a subject through exceptional experience and study. These had neither and to show how deeply the FTC agents fooled the Appeal Court about their "experts" we refer to only two instances among many. They admitted no experience with benzoquinone, which the purport of their testimony was that it had no value in the body. Dr. Koch and his witnesses had long experience with it, and testified as to its value in the body therapeutically for many decades. Today, just twenty years later, leading scientists world-wide are reporting on the benzoquinone nucleus as essential to every living cell, both plant and animal. Thus, the FTC testimony was false through ignorance, and they put over a big deception willfully as they knew as everyone does, that without experience there is no expertness. This is one of the conflicts recorded in the subconscious that carried deadly influence through the soul, as the FTC fatalities showed.

Another "expert" opinion witness, rated by the Appeal Court as an expert, that could through his great broad knowledge testify if or not the Koch products had therapeutic value, proved that the Appeal allegation was far off the track.

This "expert" testifying on a pathological subject, was asked on cross-examination to tell the difference between a spindle cell, sarcoma cell and a giant cell, and he admitted he could not tell the difference between these. These are the rudimentary kindergarten facts in pathology. This same much-used "expert" proved on cross-examination on another case that he could not feel if a spleen was hard or soft, and "expertly" ended up thinking it was hard when it was soft and soft when it was hard. Many of the "experts" proved to be of opposite opinions on the same subject, and contradicted each other. Thus, none of them were experts, for a fact is a fact, and must be known as a fact that it is, and not be a confusion of opposite notions in the opinion of "experts."

Now let us look at the Appeal Court JUDGMENTS quoted above from page 10 of their decision of my case. What they state in effect is that our cases were not accurately diagnosed, they lacked the confirming biopsy proofs, they were not cancer, they were not cured, and if they were benefited, some other treatment deserved the credit. This meaning is reiterated throughout the decision. So the best way to settle these points is from the facts of the Federal Court data and the factual established testimony of the FTC.

On page 4 of the Appeal Court Decision it is further stated that: "Moreover, the clinical data relied on by the petitioners were shown by cross-examination to be based upon insufficient diagnosis or to be inaccurate because of such circumstances as the use of conventional treatment along with the product." This statement is false, I can say on my own responsibility, and the consensus of experienced leaders such as the Editorial of the London Lancet of April 3, 1954, that always held the highest responsibility, holds that conventional treatment is not the cure for cancer. Moreover, our cases were on the contrary cured completely and permanently. So I will now demonstrate from the FTC testimony and Federal Court records that the quality of our cures was never observed before in all medicine. Therefore, this basis for condemnation of my work was false and smelled as if it was probably handed to the FTC by the Drug Monopoly that instituted the attacks.

Further on page 5 the Appeal Court states, second paragraph: "It is the weight of medical authority, as shown by this record, that while even in biopsies there is a margin of error, microscopic examination of the tissue of a tumor is the most accurate test known for malignancy." The purport of this statement is that unless a patient has biopsy examination (even if he is in a terminal state of cancer, as many of our patients were when they applied for treatment, and we treated them as they came, dying, half-dying, biopsied and not biopsied, when the facts were decisive as to malignancy) that these were not diagnosed as cancer cases. The error of the Appeal Court that they accepted from the FTC is that the well-established cancer state is not only diagnosable correctly without biopsy, but besides the gross findings cannot only give a perfect diagnosis of malignancy, but tell much more than the biopsy, even when made of a big piece of cancer tissue.

In the Federal Court 1942 trial is the record of the following case. I report just such a case where an obstructive cancer of the stomach caused pyloric obstruction. The surgeon removed the obstructive enlargement that bulged over the pyloric opening, and sent the specimen to the pathologist. The diagnosis

was complete so far as the biopsy could give. It diagnosed cancer, but did not carry the important prognostic information that was necessary, and which the gross diagnosis gave. Here is what the biopsy showed and how it failed. It showed that the surgeon through expediency did not cut away the basis of the growth which would be stupid to do, but would have given the same data as the gross data showed. The biopsy shows the limitations of biopsy and the superiority of the gross diagnosis when the disease is well developed, and every surgeon worth the name can make the gross diagnosis without the biopsy aid, as was testified in the Federal Court trial of 1942, where the Chief of Surgery of the University Hospital testified that he in 25 years made the diagnosis correctly every time from the gross findings; and that is the experience of the pathology professor of the same university with the other surgeons throughout, and never did a biopsy even contradict the gross diagnosis. Every student in my pathology training was required to make the diagnosis of *what the biopsy would show from the gross findings*. Therefore, the information given by the FTC was false either in origin from the FTC agents, or from the "so-called expert" advice they received. This again showed the unreliable allegations of the FTC when on a Drug Monopoly job.

The witnesses that the FTC by right and justice should have called in were those who had dealt with the cases in question, the experts of the various university hospitals, the Mayo Clinic and the Henry Ford Hospital. These men had them under care and could have given reliable testimony. The FTC refused, but took on such as were not competent, as I showed, that knew nothing about the cases, and were not experts in the subject in question at all. Their use, therefore, is a fraud, and their psychosomatic disasters can be traced in part to such conflicts with truth. Man's judgment throne is in his soul'. He cannot escape justice.

The diagnosis by biopsy referred to above states as follows.

Microscopic Examination:

Small alveoli combined with a diffuse growth of a typical proliferating epithelium form the structural picture of this neoplasm. The epithelial cells are generally polyhedral or round in shape, with large hyperchromatic nuclei. One portion is necrotic - a superficial ulceration. This may be classified as the diffuse type of gastric carcinoma. *I am unable to determine this point exactly as it is necessary to know something of the gross appearance. If there were extensive involvement of the wall, this would be the correct interpretation. If the growth were sharply defined, rounded and ulcerating, it could be placed with the circumscribed types of carcinoma simplex.*

This type is always infiltrating and early invades the lymph nodes with wide-spread metastases.

Diagnosis: Carcinoma of the stomach. (Type dependent upon the gross pathological anatomy.)

So the biopsy itself can prove the superiority of a well-studied gross examination, thus proving the Appeal Court was in error.

After this man recovered from the operation, the growth developed with increased virulence, and obstructed the stomach completely, so that he was turned down by the surgeons as hopeless, the involvement of the abdomen was too great. So he came to me without any collateral or conventional treatment and with his malignancy aggravated by the surgery. One dose of my condemned treatment was given, and he was soon passing his food through and became normal. His massive growth disappeared and he lived from the age of 69 years to over 93 years of age, and died of pneumonia without any return of his cancer. Was it cancer? Was it cured permanently? May the gross diagnosis be more valuable than the microscopic biopsy?

The psychosomatic disasters that followed the untrue statements given the Appeals Court were a matter of true justice, as the deception was a matter of Ill-Will.

In our presentation of facts to the FTC, we submitted patients that are the regular line of sufferers who come for help. Some are cancers, biopsied and not biopsied, but always the given-up cases, that were in terminal status. Such cases we have shown are diagnosable by men of experience, and when a man poses as expert for the FTC and criticizes a pathological diagnosis, he should at least be trained in the rudiments of pathology, and the big expert that the Appeal Court believed was such on FTC recommendation, was not at all. He proved on cross-examination more than once that he did not know the Kindergarten work of pathology. When such tell the Appeal Court that a diagnosis without biopsy is impossible, he proves he is no expert and it is a fraud to claim to the Appeal Court that such ignorance is expertness. Thereby our cases that were proven by America's greatest experts were discredited, and our work was condemned. We will now prove that this judgment is erroneous, and for humanity's sake should be changed. Especially when the reprehensible theft of a biopsy slide from a laboratory is used to get rid of the biopsy proofs to discredit a diagnosis. Such a case I will give now.

A CASE IN POINT

Mrs. T. was 31 years of age in August, 1923, when she was found to have a biopsy proven squamous cell cancer of the cervix uteri. The examining surgeon found her inoperable since the whole pelvis was involved, including the bladder wall and bowel wall so that the normal contours were destroyed, the pelvis was "frozen" and it extended into the abdomen one-third the way to the umbilicus a hard, fixed mass. When a squamous cell cancer of the cervix breaks through the pelvis into the abdomen in this way, it is the consensus that the longevity is not more than a year. The biopsy material was examined by the leading clinical pathologist of Detroit and also by several visiting pathologists, who all rated it as grade 4, the highest type of malignancy. The rapid rate of the disease progress conforms thereto.

Her greatest difficulty was pain and hemorrhages with a rapid wasting away of strength and weight, bladder incompetency and bowel obstruction. Her

recovery was steady with a few typical febrile recovery reactions on the third, twelfth and twenty-fourth weeks, after each of which her improvement was more rapid. She could never carry a baby to term until after her recovery and within a year conceived and after a normal gestation had a normal healthy delivery of a fine healthy boy. Every two years thereafter she gave birth to a normal child until four were born, and she remains well today 43 years after being treated. Was this cure permanent and complete?

The biopsy report was accepted at both of the Federal Court trials according to the firm rules of the Federal Court, and it became a part of the testimony in each Federal trial. The cure of this case could not be denied, so the only way of destroying the value of this case was to get rid of the biopsy specimen itself. Then with that out of the way, there would be no means of repeating the pathological examination to re-establish the diagnosis by biopsy. So they had to get rid of the biopsy slide itself, to throw out the biopsy diagnosis and they did it. My lawyer, Mr. Long, told me that he went to the Owen Clinical Laboratory, where the diagnosis report and the slide were on file in the safety cabinet. He asked Mrs. Owen, the director, to let him see the slide of the Mrs. T. case. She went to the file case, unlocked it and withdrew the Mrs. T. file and opened it to hand the biopsy slide over to Mr. Long. It was not there.

Mr. Long reported the incident to me as follows, - "On seeing that the slide was absent she stated: "It was there yesterday afternoon when the government inspectors identified themselves and asked to see the slide and the file on this case, just as you have done now, Mr. Long. I gave them the file and the slide with the warning not to break it. So it was in their hands last, for when they returned the file to me, I supposed that being government agents they were honest, so I did not open the file to see if the slide was inside, but put the closed folder in its place in the file cabinet, and locked the same. This cabinet remained locked to this minute, until I opened it for you. So the last people to have the slide in their hands were the government inspectors. There is no other possibility but that they made away with it!"

Now that the biopsy slide was out of the way, and the examination could never be repeated, the FTC had only to refuse to admit the biopsy report on any excuse they wished, because they had the latitude to admit or exclude any testimony they wished, arbitrarily. But to make it look not so raw, the FTC judge gave an excuse, namely that he was not satisfied that the report was made in the regular order of business of the laboratory. Not that the biopsy report was not legally admissible, but that he was not satisfied. Of course, the Appeal Court had no way of opposing him there. It was the judge himself that "goofed," for he knew from the admission of the report in the two Federal Courts that it was proven legally admissible, as well as from his own knowledge. His subconscious mind was the judge, as we see.

Then with the testimony of Dr. Wirth, who had never seen the sick patient and who was shown on cross-examination previously to not even know the rudiments of pathology, the FTC agents wiped out the scientific and practical value of this wonderful case. Wirth testified for the FTC that in his opinion it might have been a polypus, without the least evidence that it was such a thing. This is a demonstration of how the FTC can tyrannize any honest effort, as previous

Commissioner Lowell Mason exposed in his book: "IN THE LANGUAGE OF DISSENT." The psychosomatic importance of fraud on any insignificant matter as match boxes, is a very different matter from fraud in cheating God's children out of their health and happiness. These cases of the FDA and FTC show that the subconscious weighs values accurately, as we remarked previously, and their judgments are just, for so the Lord created man's soul when he breathed life into man. The fates of these FTC agents and the FDA agents who tampered with this fact demonstrate this inevitably and inexorably. Why did not the FTC call in the surgeon who had made the biopsy and knew the case from its start? He was available. Evidently they wanted to deceive the Appeal Court, and were not on a job of Fact Finding as Congress had created them to be. Yes, especially when they are out on drug monopoly business. These are matters that all citizens must act upon.

The following case demonstrates the shabby way in which the FTC can distort the facts to destroy truth, even though the Commission was created expressly to be a Fact Finding body. And to aid their fact finding, they were given exceptional latitudes to conduct their operations. This chance to serve truth honestly, or to oppose Good-Will in the most serious matters gave them a moral obligation, and the subconscious mind naturally would be the judge as to how they performed. The psychosomatic effects would show early or late according to the energy put into the act for good or for evil. The response to opportunity of the FTC agents is exhibited in the psychosomatic fatalities that followed.

METASTATIC CANCER OF THE COLON, TERMINAL STATUS

In this case, the pretreatment control period started when Mr. J.K. was still at work in the Ford plant in Detroit. A pain developed in the abdomen with some fever. He entered the Henry Ford Hospital of Detroit for observation on September 10, 1941, and stayed one month. The diagnosis was diverticulosis of the colon with ruptured abcess. He was admitted a few times more, each time in a worse condition. The obstruction of the bowel developed and the radiograph taken on February 3, 1942, showed a definite obstructive cancer of the splenic flexure of the colon with perforation. Because of the bowel obstruction, a colostomy was done on the ascending colon, that is as far away from the original growth as possible, for it was found to take in practically the entire abdomen. A biopsy was taken from the malignant extensions into the skin of the abdominal wall where it had perforated the anterior abdominal wall. The colostomy was made on February 4, 1942, when it was still possible to open the belly wall to make the colostomy. On February 24, the malignant process had extended so far and so rapidly that it had filled the whole abdomen and perforated the abdominal wall in a large area, forming a large cauliflower fistulous cancerous mass which showed an extensive necrosis and issuing the most putrid odorous material. The cancer cells were so malignant and multiplied so fast that they packed tightly together and destroyed the central circulation while pressing in all direction to invade the surrounding tissues. Thus the whole abdominal wall was infiltrated by cancer as it advanced from within. The fistulous cauliflowers opened into the colon.

An operation was attempted on February 27 to remove what necrotic material could be taken away from the surface to relieve the terrible odor, and to explore the situation generally. This operation is described in the photostatic document No. 1, which reads as follows:

"AS WE COMMENCED THE OPERATION WE DO CONSIDER THE POSSIBILITY OF RESECTION OF THE LEFT HALF OF THE TRANSVERSE COLON. WITH THE RADIO KNIFE WE THEREFORE CUT AROUND WELL BEYOND THE MARGIN OF THE FUNGATING MASS, AND STRIP BACK THE SKIN FLAP. AS WE ENCOUNTER THE LEFT RECTUS MUSCLE WE FIND THAT THE TUMOR MASS IS INFILTRATING THROUGHOUT, SO THAT RESECTION IS OUT OF THE QUESTION.

WITH THE ELECTRIC CAUTERY WE THEREFORE CUT OFF THE BULK OF THE TUMOR, AND COAGULATE ALL OF THE PROTRUDING MASS. THE SKIN FLAPS ARE THEN UNDERMINED AND BROUGHT TOGETHER WITH INTERRUPTED WIRE SUTURES. COPIOUS DRESSINGS ARE APPLIED, AND THE PATIENT IS RETURNED TO THE FLOOR IN GOOD CONDITION. THIS IS ENTIRELY A HOPELESS CASE.

Document No. 2 gives the surgical pathology memorandum, dated February 27, 1942, with the following data:

HENRY FORD HOSPITAL

K. John

Pathological Diagnosis: 101.62, Cutaneous systems Skin of Abdominal Wall.

METASTATIC ADENOCARCINOMA

Location of Lesion, Abdominal Wall. Operator, Dr. Fallis

Gross Pathology: The specimen consists of a piece of skin measuring 14 x 4.5 cms. The central portion is destroyed and partially filled by a friable grey tumor mass which involves the underlying structures, and HAS BEEN CUT THROUGH UPON REMOVAL. The tumor shows extensive necrosis. The edge of the specimen is cauterized.

Microscopis: Sections show a tumor mass invading the subcutaneous tissue.

The normal epithelium is absent over the mass. The cells of the tumor are large hypochromatic and show many mitotic figures. Poorly differentiated tubular glands are formed by these cells. A massive necrosis affects large areas of the tumor.

Diagnosis: Metastatic Carcinoma of the Colon.

After this operation, the odor improved for a while, but the cancer cells kept up their invasion with increased vigor and soon the rest of the belly wall was perforated with new cancerous fistulae, fungating, cauliflower masses with central necrotic openings. There were half a dozen when he was brought to the Koch Clinic, on his way home where he was sent to die with an unconquerable odor, due to the extensive destruction of tissue by neoplastic and bacterial invasion.

At this time he weighed much less than one hundred pounds, his normal weight being two hundred pounds, and the premortum cachexia was great. Document No. 3 tells some more of the pretreatment Control Period deterioration of this case and then much that is important of the reversal of the pathology after the Koch treatment, the post-treatment progress as observed by the Ford Hospital experts, but which the Commission was careful to keep dark. We copy from this Ford Hospital document testimony:

"Interval History," as recorded by Dr. Bohr, 8-28-42, four months after he had been sent home to die - Case No. 342016, John K.

"Patient left hospital April 1 of this year with a diagnosis of fungating Cancer of Colon and a terminal prognosis. On the way home that day he received one of Dr. Koch's "cancer cure shots." On July 1st he weighed 113 pounds, but from that time on he began feeling stronger and gained weight. By the middle of July his wound was healed completely. He weighed 175 pounds at the end of July and he has maintained his weight ever since then. He enters the hospital now, after being back to work for three weeks, for the first stage of colostomy closure."

In three months after Koch's treatment he could go back to work at heavy manual labor, and gained two pounds of muscle every day while the affected tissues healed and the bowel function returned, as the colostomy ceased to function. It was, therefore, closed a few months later. Moreover, at this operation no cancer could be found on careful exploration, and the skin was so perfectly healed that it showed no scar whatsoever, and no epithelial changes to indicate where the half-dozen cauliflowers varying in size from 4 to 6 cms. in diameter had penetrated and eaten away the belly wall. Thus no scar tissue, where so much infection had been present, meant that during the post-treatment recovery process, the survival chemistry was at such a high pitch that it not only corrected the malignant state, but also wiped out the terrible infection at the basis of the cachexia and the odor. In other words, a recovery process is revealed in this post-treatment period that has never before been observed in the entire history of medicine, and no ORTHODOX explanation is possible. The "experts" of the Commission should have said so, because the facts show his cure was complete and permanent.

In the "Brief in Support of the Complaint," page 81, the Commission stated this expanded falsehood to the Appeal Court contrary to the proven facts and documents, -- "On February 4, 1942, a colostomy was formed surgically in the right transverse colon. At another operation on February 27, 1942, THE BULK OF THE TUMOR MASS IN THE LEFT TRANSVERSE COLON WAS CUT OFF WITH THE ELECTRIC

CAUTERY AND ALL THE PROTRUDING MASS COAGULATED. HE WAS DISCHARGED APRIL 1, 1942, WITH NOTATIONS THAT A COLOSTOMY AND ELECTRO COAGULATION OF A FUNGATING CARCINOMA OF THE COLON WAS PERFORMED."

In this case the biopsy slide could not be stolen and the report of the biopsy stood. So the only recourse left to Ill-Will, was to steal the credit for the healing process that followed my treatment! This healing procedure was a God-given instance of Mercy, and an evidence of His boundless love to those who trust in Him. Therefore, the stealing of this recovery by the report given the Appeal Court by the FTC, *as instanced in their fraudulent allegations here quoted from the FTC Brief in Support of the Complaint, page 81*, is a most vicious falsehood. The operation was only the removal of a piece of skin used to clean up the superficial stench and get a biopsy. The transverse colon was inaccessible as the documents prove. The documents are here before one and prove the facts that no operation was done on the transverse colon or anywhere near it.

One important fact must be emphasized. It is that this patient was a practical Christian and his FAITH in the Redeemer's care permitted him to have a vision that he would recover. Now, then, let someone explain how it is that in the healing of the abdomen within and without with all the extensive involvement, no obstructive adhesions were formed within or outside where the massive putrid necrotic cauliflowers had eaten away a half or more of the abdominal wall, no scar tissue was found anywhere. The abdomen wall healed so perfectly and elastic that not one trace of the infection and cancerous destruction could be identified. The healing was as perfect as in a healthy normal baby.

Now compare this result with what would have taken place if he could have been cured under orthodox treatment. Of course that NEVER could have happened as before the case had progressed that far, the Ford experts stated on their documents "THIS IS AN ENTIRELY HOPELESS CASE." But let us picture the result of such extensive infection alone if he had survived. The belly wall would have been drawn to the spine by extensive adhesions that would have obstructed the intestines in a multitude of fatal ways. The belly wall itself would have been drawn together by a massive scarlike tissue, a keloid, that would have drawn his ribs toward the pelvic bone, and drawn his thighs up toward the pelvic bone, and drawn his thighs up toward the belly wall. Why did not the experts who posed for the FTC tell the truth? And why did not the FTC call the Ford Hospital surgeons to come in and testify? The reason is they did ask them to testify *against Dr. Koch*, but the answer was, "*If you want Koch to win, just call us in.*" These true experts knew the significance of this cure, its permanency and completeness never seen before in the whole lore of medicine. Good therapy had its part in the cure, but the power of the Redeemer probably played a more important role, as He Himself had predicted to the patient that he would get well.

Is there any wonder that the fraud of the FTC had such disastrous psychosomatic consequences?

FACT KILLING EXPERTNESS

Another soul-searing conflict was submerged by the use of utterly false testimony under the guise of an expert opinion. This is a frequent trick in FTC and FDA actions, for a man is put on the stand as an expert and he can give any opinion he wants, no matter how false, and no one can look into his head and prove if really that is his opinion or not. He does not directly testify on the fact, but on his opinion, and as the Appeal Court accepted their lousy opinions as facts, one sees how far such opinion testimony can go to deceive, because the witness poses to be an expert, even if he knows nothing about it, as we have shown. To show how false such testimony can be and can be used effectively in Ill-Will operations against the welfare of humanity, the following case will serve.

The case of Mrs. M. W. was presented as a far advanced cancer of the cervix uteri, with a grade 4 biopsy proven squamous cell type with a prognosis of less than a year to live. The biopsy slide was examined by the pathologist of a high grade hospital, and because of its exceptional evidences of the extremely high grade malignancy, was sent to Professor Hunter of the Pathology Department of the University of Oregon, one of the real leaders in pathology. He gave the same report as the hospital pathologist with remarks on its exceptional characteristics. Since this patient made a splendid recovery, the FTC was out to wipe the achievement off the slate, and to do that the opinion witness was put on to testify that the biopsy slide was not fit to use, that means a diagnosis made from it is useless. He stated it was not well stained, not well differentiated, that it was dried out and not fit to use, so to use it the specimen should be taken off and reprocessed, to make anything out of it. He testified that the specimen stuck out from under the cover slip, and was dried out. My lawyer asked him on cross-examination, if it is dried out, would there not be air under the cover slide? and the witness answered, yes, there would be. Then my lawyer asked if he found any air under the cover slide, and he answered NO, he did not. Thus he denied that it was dried out and unfit for use.

I then had several visiting physicians examine the slide after the slide was turned over to us for examination. They all found it a good slide and had no difficulty in making the same diagnosis as the other pathologists. I sent it to the Professor of Pathology at the University of Michigan, a noted expert, and he gave the same diagnosis in a minute as the others, and on asking if it was a good slide, he said yes, it is a good slide. I then had the slide microphotographed by the photographer at Detroit's leading hospital, and the microphotographs showed the details so well that one could readily make the diagnosis from the photographs alone. Thus the details were well produced in the specimen or they could not be so clearly photographed. Then we attempted to put on our testimony at the next session, and the judge on finding out that we were about to destroy his false testimony, called a halt and closed the court only a half-hour after it opened, and as soon as we started putting on our proofs that the slide was a perfect one and many doctors would show by diagnosing it, that it was fit for diagnostic use.

Thereupon we put in a request to place on the testimony, three times and each time the court refused us. We then went to the Commission itself and it

refused three times in the same way. Thus it was evident that the FTC wanted their false testimony instead of the truth. And in this way another perfectly biopsied, wonderfully cured terminal cancer case was wiped off the record by fraud. This case is given in detail with photographic data in the book, "THE SURVIVAL FACTOR IN NEOPLASIA AND VIRAL DISEASES," pages 63-69.

In all of these cases, as in the few we sketched so far and those that follow, every plan that was used to deceive entails a series of separate concepts of fraud, step by step--so the deception is systematically worked out and executed. In each case the agents worked themselves deeper and deeper into the fatal psychic conflict. Does not the fate of these two FTC agents illustrate the justice principle of the soul in action? Incidentally, this patient was given an exploratory operation to find out if she was fully cured five years after treatment and she was found cured. The body of the uterus was removed and sectioned carefully and examined thoroughly and not one cancer cell was found. This case is reported by her physician to have lived five years longer than she was demonstrated cured, that is, ten years after being treated, and died from a gangrenous condition of the lower bowel, no biopsy was made to identify its nature.

FTC BRASS

One more cancer case will be sketched to illustrate the "brass" with which the FTC denies out and out facts in the uncontrovertable documents. This was a case history established in two Federal Court trials and also, in the FTC testimony. It was also about the biopsy proofs of a case of cancer. This was a case worked up thoroughly by the University of Michigan Hospital, listed as incurable, and investigated from every standpoint, physical examination, X-ray studies, chemical analysis, two biopsies, and all that was needed to establish the diagnosis of endothelial cell cancer of the shoulder joint bones and the soft tissues in the back and shoulder muscles. The voluminous record includes the diagnosis in the pathological report and also in the case history clinical findings. So in two proper places of the history sheets, the pathological biopsy reports were made and anyone can see them. In this case it was recorded as incurable, that the whole shoulder, arm and scapular region could be removed but no cure would result, as is well established in such cases. There was no encouragement from any therapy. He came to me in September, 1934, for treatment. One treatment cured him and he lived at least twenty years and may still be well. This case was one that the FTC had to destroy. It could not steal the biopsy slide from the University Hospital, so they had no chance to make the maneuver of the Mrs. T case, and no amount of scheming to do a pretty job, so they out and out reported the following crude falsehood. "If the powers that were in this hospital were convinced that this man had a Spindle Cell Hemangio-Sarcoma, it seems very odd that this final notation did not say so." This is an open falsehood, for the final statement of both the pathological report, the biopsy diagnosis and the clinical diagnosis give the final biopsy diagnosis, right in their proper places, thus, - "Pathological Diagnosis. - After decalcification; Bone is in large part replaced by neoplasm showing the same general histological characteristics as in the soft material. THIS IS A SPINDLE CELL HEMANGIO-SARCOMA." - H. Gordon, Pathologist.

The denials of the biopsy diagnoses served the Appeal Court very well as one can see from their decision. And so we can go on and show the deep investment of the FTC in their Anti-Good-Will purposes. This is especially demonstrated by the FTC judge and lawyer, who fought Good-Will on every turn. The psychosomatic results we have seen. The investment to do evil and the return issuing from their own souls balanced perfectly. This proved out to be of the same order in the paralytic polio cases we demonstrated by testimony that stood firm in the Federal Courts. But now we shall see how the FTC boldly falsified the precious facts before the Appeal Court, which they could not gainsay in court. Only one case is needed to demonstrate that. But to let the reader get the ground-lay of the polio cases we will give two notes, to offer comparisons. These show different stages in the time the infection had established in each case.

Mr. L.A., age about ten, took sick with terrible headache and pains in back and legs, vomiting and then leg paralysis both from hips to toes on February 4, 1945 about 5 A.M. Next morning Spinal Fluid tests and the Standard neurological examinations established firmly the diagnosis of acute Anterior Polio Myelitis. He received the Koch treatment from Dr. Hendricks at 11 A.M. on February 5th. By 2 P.M. there was some relief from pain and nausea. They were all stopped by 6 P.M. and he could move his legs in bed and ate a light supper. During the night he walked to the bathroom. The next morning he was well and the cure was complete.

The recovery was slower in a case of an established chronic type, Miss M.R., age ten. Her paralysis was of the left leg from hip to toes, perfectly flaccid and terribly atrophied for three years, when Dr. B. saw her and gave the treatment on February 11, 1944. She had been at the famous Roosevelt Warm-spring Foundation Hospital three years previously, and was refused any treatment after giving the diagnosis and the decision that there was no chance to help her, and was sent home. Three months after her treatment, the withered leg that could not even support a brace at the time of treatment, had so perfectly developed and walked and ran so perfectly, that during the testimony before the FTC court, the lawyer watched her run and jump and asked the doctor, "Which leg was it?" The recovery was complete and she took up toe-dancing later.

Another case, where the results were so formidable that suppression became the big problem for the FTC and the fraudulent allegations they made to the Appeal Court deserve a little exposure, whereas the others just mentioned were only subject to silly insinuations. The case of interest is that of Mrs. V.N. Briefly stated, she was paralyzed completely in both legs from hip to toe, from the age of 1-1/2 years until the age of 20 years. When she was treated by Dr. Hendricks on February 11, 1944, she had a dozen operations to shorten tendons, and was fitted with steel braces and shoes to make a peg from hip to toe, to serve for a three point suspension with the crutches to swing herself about in the house; but when she went outside the door it was always in a wheelchair or was carried. She testified, mark note, that she was most of the time in bed or used the crutches with the braces, to swing about, as she was not able to walk but was supported by three point suspension. She was married to her ambulance driver in November, 1939, and thereafter, she testified, her legs were undergoing painful contractions, that made it impossible to wear

the braces and she stayed in bed or in the wheelchair. These contractions are crippling disfiguring fixations, where the muscle tissue having been absorbed and the tendons have no exercise or circulation, and undergo contraction and hardening. This is the finish of any long-standing paralyzed limb. So her legs were at the limit of degeneration.

When brought into Dr. Hendrick's office, the testimony showed that she was carried in by her husband, put in the chair, treated and carried out again. A few months later she walked in on her own steam, her own muscle power, without crutches, braces, steel support shoes, or any other contraptions. At six months after the treatment she had a febrile reaction, and her terrible continuous lifelong headaches then disappeared. These migraines were a part of the brain injury from the infection, and shared the recovery progress. She adopted a baby, and let her servant go as she was able to tend to her own work. In well less than a year she took a job, working in a Five and Ten Cents store, where she was on her feet all day, could run the stairs, drive her car, and live a normal life without any other help than her good muscle action. The atrophied muscles were restored and she was normal again, so to remain.

Before comparing the allegation of the FTC to the Appeal Court with the patient's testimony, a statement must be made about the judge and the lawyer's tricks, when a woman was on the witness stand. They took great pleasure or a fiendish delight in insulting the female witness. In this case, the judge insulted her so badly about adopting her baby that she cried, and this was done just before the mid-day recess. She was so affected by the insults that she refused to go back after the recess to complete her testimony. This, of course, was what the two Washington "gentlemen" wanted, and it was difficult to get her to go back to take the stand again. It was only our appeal for the unfortunate crippled children, as she had been one herself and for which we were struggling, that we succeeded to get her to finish the testimony. We made her realize that if we did not finish her testimony, the whole testimony would be thrown out and the value of her case, which was to serve the crippled children, would be lost, and it was only to accomplish this that these two Washington agents insulted her. She then returned to the stand as a trooper. Nothing was left to the FTC then except to falsify the evidences of this case.

To help one to compare the fraud of the FTC agents with the truth of the factual testimony, let us compare the allegations of the FTC to the Appeal Court with the witness's testimony. The lawyer-judge outfit gave this to the Appeal Court, as her physical condition before she received the treatment from Dr. Hendricks. (1) "So she could get around with braces; (2) and could walk; but not comfortably; (3) she wore braces for a while until her marriage in November, 1939; (4) and then used a cane part of the time; (5) she also learned to walk without her shoes; (6) she exercised herself, had massage, and (7) constantly tried to improve her ability to get around."

Her testimony was entirely contrary. She never walked at all, she was bedfast most of the time and used the three-point suspension with the steel peg serving braces and crutches to swing about in the house, but only went outside in the wheelchair, or had to be carried. She never was massaged, nor did she do exercise or learn to do them. She never walked and she never used a cane.

Here we see the depraved state of a most important commission that spends millions annually of our taxes, using our money to cheat the public of their most precious benefits, health and the wealth that goes with an earning, working power. These conspirators against Good-Will illustrate the words of the Lord Jesus when he said that what we do to injure others comes back to us, as an example, - "Who kills with the sword, dies with the sword." Our thesis is again illustrated here, - the judgment throne is within. It is "the soul that sinneth that shall die." The soul is the instrument that mediates justice. So was man created. The psychosomatic system is an automatic means of elimination.

So it turned out in each case of sinning against Good-Will, by both the FDA and the FTC, that as one after another had done his hatchet job, he passed off into eternity by cancer or its equivalent without delay. So impressive was this fact to the swivel-chair directors of the FDA, that when a friend asked the chief what they were going to do to Koch this year, he answered, "Absolutely nothing, there is a jinx on him." The interpretation should have been along the lines we have offered, a moral lesson that can readily be explained on a psychological basis.

In psychosomatic effects one can readily distinguish between an innocent result of concept submersion, and a sinful assault on the Good-Will Principle built into the soul's subconscious mind. For the innocent concept records simply an unpleasant or fearful experience one wishes to forget, and it holds it submerged only, because a toxic agent is present to make and hold the nerve tracts involved hyper-irritable to passage of the impulses, to which the submerged concept is related. This is what we illustrated with our explanation in a few cases among about two hundred.

In the innocent case there is no insult to the Good-Will Principle built in the basis of the soul, and when this insult registers against the Good-Will Principle, something more than a toxic injury is made on some nerve tracts. What happens is a spiritual effect, that cannot be interpreted entirely on a simple chemical basis, nor can it be corrected by such means either. Here is where the spiritual control of physical action is in command, and it involves volition, which is a mental or spiritual process. The effect on the body tissues involves the sympathetic nervous system and its aberrant behavior to produce localized irrational vessel constrictions and anoxia, which thus becomes the key to the action of carcinogens, viruses, etc. Death may come in the same way in both situations, but the spiritual stimulus is precipitous and commanding, so that there is no escape. Only a spiritual counterforce could block the progress of destruction. This must be a spiritual cure or correction primarily before any progress in the destructive processes can happen. These are repentance, that involves the effort to undo the injury done with equal or greater energy than by the wrong that was committed. By such repentance the Good-Will Principle is freed of injury and the evil concept is wiped out. However, the depraved man cannot of his own power bring on repentance of this order. That is demonstrated in the agents of the government that caused no halt in their attack in spite of the intellectual proofs that faced them boldly. Intelligence could not turn them away from Ill-Will toward Good-Will, so the element that incites repentance was absent. Here is where Christianity interprets the psychiatry involved, and the spiritual influence of redemption was required. These agents had no use for it, and lost their chances.

All know that it is by repetition that facts are learned, and also habits, fixed ideas, and compulsions. Each time a nerve path carries an impulse, it does so with greater facility. Enough repetition thus establishes a "groove" that gives preference to the passage of the impulse, and even to the exclusion of all others at times. Brain-washing is based on this principle. And what applies to the nerve path behaviors, and their mental counterparts, also applies in a sense to spiritual development both in the three physiological dimensions and in the higher dimensions of the soul. The genius of Bach, Wagner and Edison has materialized the higher dimension qualities of the Good-Will Principle.

On the other hand, one need not search far to encounter the evolution of habits, fixed ideas and compulsions of the Ill-Will Principle. For example, right here in our own episode one observes the expansion and growth of the idea to get my therapy out of Brazil to accommodate the Drug Monopoly quickly widened into a fixed idea of its destruction with myself included, as the U. S. Assistant Attorney General threatened my complete destruction by means that never fail. As an example of this Ill-Will progress, one recalls the well-documented attempt to murder Mrs. Worley by an FBI Agent with the intention that I was to be imprisoned for it. Failing at that, the next most effective destructive measure is character slaughter, and this is still in progress under FDA facilities.

By use of the show windows in important buildings and post office buildings, and by the FDA monthly releases, such false and deceptive statements have been systematically broadcasted nationwide, as (1) "The injunction prohibits the receipt and distribution of the Koch Treatment for cancer . . ." (2) "The FDA analysis showed it was nothing more than distilled water." (3) "The FDA first prosecuted Koch for dispensing the worthless drug, and litigation continued until 1946." It is well known that compulsions and fixed ideas constitute the most characteristic symptoms of insanity. In this case, it is the soul insanity that has reached to the very abyss of degradation. For the Koch facts can never be destroyed. All FDA releases are utterly false, No. 1, No. 2, No. 3 and the others. But the suffering cancer victims, who in anguish must leave their little ones to the cold cruel world, to satisfy that insatiable compulsion, identifies its origin as from the abyss of Ill-Will degeneracy. This episode is not yet closed and so the psychosomatic consequences will follow later.

If the psychosomatic judgment can be so deadly, is there not a judgment of reward and Good-Will quality to issue from the adherence to its principles? There are the accomplishments in art and science and in industry that are guided by its principles, during the temporal life, and then beyond as many who were passing over the brink gave evidence of what the apostle said in speaking of its grandeur, "Eyes have not seen nor ears have heard such great glory." And right along to men in devoted services when in difficult squeezes, the Redeemers Spirit of Good-Will has given evidence of itself with an "advice that saved the cause," and with it His Glory was with Him. More than one has seen it and knows not only that it exists, but is close at hand to protect and guide. Such persons, who are of the Good-Will Principle, are in Heaven already, and only need the curtain to be drawn as new fruits of Eternity. Whereas those of Ill-Will are its victims already, but they don't even know it. It is all told

in the parables of Jesus. To those who read of the five foolish virgins and of the talents and the final judgment, a most profitable super-psychiatry will appear. Good-Will bears its good fruits, and Evil-Will bears its evil fruits, and we have pointed out the mechanism. It is inevitable!

We have seen that Good-Will and Evil-Will are inmissible, without compromise or respite, an unceasing enmity. In our episode it started with the fraudulent 1919 investigation report, and continued as the Federal Court and FTC attacks and is still running as the FDA monthly releases and daily correspondence. It controls Orthodoxy's continuance of man's misery, for both victim and benefactor. And taking Semmelweiss as an example, who was *betrayed by pretended friends* into a dark prison to rot to death from a streptococcus infection utterly unaided and foresaken, the hideousness of Evil-Will enmity to Good-Will is evident. Semmelweiss was martyred, but his cause was not defeated. Evil always loses, and one provision for its failure is the psychosomatic extinction of its adherents. Psychosomatic justice is but one phase of eternal justice, whereby Good-Will alone survives, and Evil-Will is always overcome with each step of progress. The formula for its success is embodied in the Lord's Prayer in which man is integrated with the Creator-Redeemer Principle by which man is supported physically and spiritually to succeed as a worker of Good-Will, and psychiatry's problems fade away under its influence forever, so be it.

POST-NOTE: The subject is far more vast than the allowed space permits. Many more instances of psychosomatic death in due sequence to Ill-Will activities one had to face in connection with these court trials could be detailed. They all follow the same pattern and would only serve as cumulative material. The principles are given now.