



**I WAS
'CANADA'S CANCER NURSE'**

**The Story of ESSIAC
by
Rene M. Caisse, R.N.**

FEEL BETTER BOOKS & TAPES

INTRODUCTION

by
Maurine B. Cox

A most amazing story comes from a small town in Canada, about a nurse who discovered a beneficial treatment for cancer, which she names ESSIAC (Caisse spelled backwards). Miss Caisse states that she was naive enough to think she could accumulate enough proof so that her treatment would be acceptable to the Medical profession, believing, of course, that the Cancer organizations were really looking for a cure for this dread disease.

But the more proof she succeeded in producing, the more determined they were that it should not be made available to suffering humanity, so she went on helping and healing for years, without aid. They could not discredit her work, and she ran an open cancer clinic for eight years, in Bracebridge, Ontario.

Doctors came from all parts of the world and were amazed at her success; she treated hundreds of patients, during four days each weekend. The more successful she was, the more adamant the Cancer Groups became, but she never gave up hope that some day, somehow, her treatment would be made available to all who needed it.

PREFACE

The many reasons why I was not put in prison for running an open "Cancer Clinic" at Bracebridge, Ontario, for eight years were:

First: I achieved good results in animal research, under the observation of medical doctors. My treatments caused a regression of the malignant growth in the mice, and prolonged life.

Second: Because I achieved the same results on humans, always treating with the permission of medical men

of good standing, and under their observation.

Third: Because I had clinical x-ray and pathological proof of results, after everything known to medical science had failed.

Fourth: Because fifty-five thousand (55,000) persons signed a petition to the Ontario Government Legislature in favor of my treatment for Cancer; three hundred and eighty-seven (387) patients, and many doctors signed this same petition, which was presented to a legislative committee of fifty-nine (59) members of Parliament. I lost out by only three (3) votes! I lost out because the doctors had assured the Legislature beforehand that they would appoint a "Cancer Commission" to hear my case, and to give my treatment a fair hearing which proved to be a very unfair hearing, as you will see by this story.

Note: The Cancer Commission could not accuse me of NOT getting good results, because I had the living proof. They could not accuse me of exploiting the public, for I never made a charge for Essiac treatment, and many of the patients treated during the 1930's are *still* living.

I was "CANADA'S CANCER NURSE"

By Rene M. Caisse

In the mid-twenties I was head nurse at the Sisters of Providence Hospital in a northern Ontario town.

One day one of my nurses was bathing an elderly lady patient. I noticed that one breast was a mass of scar tissue, and asked about it.

"I came out from England nearly 30 years ago," she told me. "I joined my husband, who was prospecting in the wilds of Northern Ontario. My right breast became sore and swollen, and very painful. My husband brought me to Toronto, and the doctors told me I had advanced cancer and my breast must be removed at once."

"Before we left camp a very old Indian medicine man had told me I had cancer, but he could cure it. I decided I'd just as soon try his remedy as to have my breast removed. One of my friends had died from breast surgery. Besides, we had no money."

She and her husband returned to the mining camp, and the old Indian showed her certain herbs growing in the area, told her to make a tea from these herbs, and to drink it every day.

She was nearly 80 years old when I saw her, and there had been no recurrence of cancer.

I was much interested, and wrote down the names of the herbs she had used. I knew that doctors threw up their hands when cancer was discovered in a patient; it was the same as a death sentence, just about. I decided that if I should ever develop cancer, I would use this herb tea.

About a year later, I was visiting an aged retired doctor, whom I knew well. We were walking slowly about his garden when he took his cane and lifted a weed.

"Nurse Caisse," he told me, "if people would use this weed there would be little or no cancer in the world".

He told me the name of the plant. It was one of the herbs my patient had named as an ingredient of the Indian medicine man's tea.

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A few months later, I received word that my mother's only sister had been operated on in Brockville, Ontario. The doctors had found she had cancer of the stomach with a liver involvement, and gave her, at the most, six months--to live.

I hastened to her, and talked to her doctor. He was Dr. R.O. Fisher of Toronto, whom I knew well, for I'd nursed patients for him many times. I told him about the herb tea, and asked his permission to try it under his observation, since there apparently was nothing more medical science could do for my aunt.

He consented quickly. I obtained the necessary herbs, with some difficulty, and made the tea.

My aunt lived for 21 years, after being given up by the medical profession. There was no recurrence of cancer.

Dr. Fisher was so impressed that he asked me to use my treatment on some of his other hopeless cancer cases. Other doctors heard about me from Dr. Fisher, and asked me to treat patients for them after everything medical science had to offer had been used and failed. They, too, were impressed with the results.

Several of these doctors asked me if I would be willing to use the treatment on an old man whose face was eaten

away, and who was bleeding so badly that the doctors said he could not live more than ten days.

"We will not expect a miracle," they told me. "But if your treatment can help this man in this stage of cancer, we will know that you have discovered something the whole world needs desperately- a successful remedy for cancer."

My treatment stopped the bleeding in less than 24 hours. The man's face healed. He lived for six months, with very little discomfort.

On the strength of what those doctors saw with their own eyes, eight of them signed a petition to the Department of National Health and Welfare at Ottawa, asking the 1 he given facilities to do independent research of my discovery.

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Their petition, dated at Toronto on October 27, 1926, reads as follows:

TO WHOM IT MAY CONCERN:

WE, THE UNDERSIGNED, BELIEVE THAT THE "TREATMENT FOR CANCER" GIVEN BY NURSE R.M. CAISSE CAN DO NO HARM AND THAT IT RELIEVES PAIN, WILL REDUCE THE ENLARGEMENT, AND WILL PROLONG LIFE IN HOPELESS CASES.

TO THE BEST OF OUR KNOWLEDGE, SHE HAS NOT BEEN GIVEN A CASE TO TREAT UNTIL EVERYTHING IN MEDICAL AND SURGICAL SCIENCE HAS BEEN TRIED WITHOUT EFFECT, AND EVEN THEN, SHE WAS ABLE TO SHOW REMARKABLY BENEFICIAL RESULTS ON THOSE CASES AT THAT LATE STAGE.

WE WOULD BE INTERESTED TO SEE HER GIVEN AN OPPORTUNITY TO PROVE HER WORK IN A LARGE WAY.

TO"THE BEST OF OUR KNOWLEDGE, SHE HAS TREATED ALL CASES FREE OF ANY CHARGE AND HAS BEEN CARRYING ON THIS WORK OVER THE PERIOD OF THE PAST TWO YEARS.

Copy of the signatures is shown below:

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M. Williams M.D.

Dr. Robert M.D.

NOTE: Originals or certified copies of all quoted material are in my possession.

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I was joyful beyond words at this expression of confidence by such outstanding doctors regarding the benefits derived from my treatment. My joy was short-lived. Soon after receiving this petition, the Department of Health and Welfare sent two doctors from Ottawa to have me arrested for "practicing medicine without a license."

This was the beginning of nearly 30 years of persecution by those in authority, from the government to the medical profession, that I endured in trying to help those afflicted with cancer.

However, when these two doctors sent from Ottawa found that I was working with nine of the most eminent physicians in Toronto, and was giving my treatment only at their request, and under their observation, they did not arrest me.

Dr. W.C. Arnold, one of the investigating doctors, became so interested in my treatment that he arranged to have me work on mice at the Christie Street Hospital Laboratories, with Doctor Norich and Doctor Lockhead. I did so, from 1928 through 1930. These mice were inoculated with Rous Sarcoma. I kept the mice alive 52 days, longer than anyone else had been able to do, and in a later experiment with two other doctors, I kept mice alive for 72 days with Essiac.

This was not my first clinical experience. I had previously converted Mother's basement into a laboratory, where I worked with doctors who were interested in my treatment. We found that on mice inoculated with human carcinoma, the growth regressed until it was no longer invading living tissue after nine days of Essiac treatments.

This was during the period when I was working on Dr. Fisher's suggestion that the treatment could be made effective if given by injection, rather than in liquid form, as a tea. I started eliminating one substance, then another; finally when the protein content was eliminated, I found that the ingredients which stopped the malignancy growth could be given by intramuscular injection without causing the reaction that had followed my first

experiments with injecting mice. However, I found that the ingredients removed from the injection formula, which reduced growth of cancer were necessary to the treatment. These apparently carried off destroyed tissue and infections thrown off by the malignancy. By giving the intramuscular injection in the forearm, to destroy the mass of malignant cells, and giving the medicine orally to purify the blood, I

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got quicker results than when the medicine was all given orally, which was my original treatments until Dr. Fisher suggested further experiments and developing an injection that could be given without reaction.

I well remember the first injection of the medication in a human patient. Dr. Fisher called and said he had a patient from Lyons, New York who had cancer of the throat and tongue. He wanted me to inject Essiac into the tongue.

Well, I was nearly scared to death. And there was a violent reaction. The patient developed a severe chill; his tongue swelled so badly the doctor had to press it down with a spatula to let him breathe.

This lasted about 20 minutes. Then the swelling went down, the chill subsided, and the patient was all right. The cancer stopped growing, the patient went home, and he lived quite comfortable for almost four years.

At the time I first used my treatment on terminal cancer cases - or cancers that did not respond to approved treatments, referred to me by the nine Toronto doctors, I was still nursing 12 hours a day, the customary work day for nurses then. I had only my two hour rest period and my evenings to give to my research work and treatments.

I decided to give up nursing, to have more time for my research and treatment of patients. Doctors started sending patients to me at my apartment, and I was treating about 30 every day.

I now felt that I had some scientific evidence to present that would convince the medical profession my treatment had real merit. I made an appointment with Dr. Frederick Banting of the Banting Institute, Department of Medical Research, University of Toronto, world-famous for his discovery of Insulin.

After reading my case notes, and examining pictures of the man with the face cancer before and after treatment, and x-rays of other cancers I had treated, he sat quietly for a few minutes, staring into space.

"Miss Caisse," he finally said, turning to look me straight in the eyes, **"I will not say you have a cure for cancer. But, you have more evidence of a beneficial treatment for cancer than anyone in the world."**

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He advised me to make application to the University of Toronto for facilities to do deeper research. He even offered to share his laboratory in the Banting Institute and to work with me.

However, in making application to the University I would have to give them my formula. They would then have the formula, which could simply be filed in the archives and forgotten, or could be used for university staff research and my application to do independent research at the university could still be refused.

After much soul searching and prayer, I turned down Dr. Banting's suggestion and his offer to work with me.

I wanted to establish my remedy, which I called ESSAC or my name spelled backwards, in actual practice, not in a laboratory only. I knew it had no bad side effects, so it could do no harm. I wanted to use it on patients in my own way. And when the time came, I wanted to share in the administration of my own discovery.

To do such a thing is impossible even today for any independent research worker, due to what I believe is nothing less than a conspiracy against finding a cure for cancer.

I decided to prove my treatment on its own merit, without assistance if necessary.

Dr. Banting approved my decision -- and my courage. He had discovered Insulin. He did not claim it was a cure for diabetes. He did know by experience and use that it was a palliative and deterrent. I knew the same thing about ESSAC.

But Dr. Banting was a doctor, and a recognized practitioner, so although he surrendered his formula to the profession under the medical code of ethics, he was honoured and rewarded.

I was in no professional position to secure acceptance of ESSAC, or recognition for its discovery, if I surrendered my formula before the merit of the treatment was established beyond all doubt.

Tenants in my apartment house in Toronto objected to my numerous visitors - the 30 or more daily patients. Besides, I could not afford to carry on in the city any longer, since I had given up nursing. I made no charge for my treatments and depended entirely on occasional voluntary contributions. I felt I could live less expensively in a smaller town, so I went to Timmins, thinking I would go back to nursing. However, Dr. J.A. McInnis (who had signed the petition in

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1926) and had seen my work in Toronto, asked me to treat cancer patients for him, which I did with very good results.

I later moved to Peterborough, east of Toronto, and lived in a rented house, where I was no sooner moved in than the College of Physicians and Surgeons sent a health officer to issue a warrant for my arrest, again the charge was "practicing medicine without a license." I have lost count of the number of times I have been threatened with arrest and imprisonment for treating patients with ESSIAC.

The health officer talked to me and to some of my patients and then he told me, "I am not going to issue this warrant; I am going back to talk to Dr. Noble, my chief." Dr. R.J. Noble was head of the College of Physicians and Surgeons.

The next day I wrote to The Hon. Dr. J.A. Faulkner, Minister of Health, and asked for a hearing. I received a letter granting me a hearing on the following Monday at 2 P.M.

I got in touch with doctors who had sent patients to me, and five of them with about twelve patients went with me to the hearing. We were received very graciously at Queen's Park by Dr. Faulkner, The Hon. B. F. McGee (Deputy Minister) and other doctors of the Department of National Health and Welfare.

After I presented my cases, Dr. Faulkner said that I could carry on, provided the patients came with their doctors' written diagnoses, and that I did not make a charge.

"My only ambition", I told Dr. Faulkner, "is to prove ESSIAC on its merit, and make it acceptable to the medical profession."

So I started back for Peterborough, very proud and happy, that I could continue to help patients. The look of gratitude I saw in their eyes when relief from pain was accomplished, and the hope and cheerfulness that returned when they saw their malignancies reducing, was pay enough for all my efforts.

I had faith that if I trusted in God and did my best, a way to support my work would be found. I remembered our St. Joseph's Church in my home town of Bracebridge, Ontario, and the window in it dedicated to the memory of my mother, Frizelda (Potvin) Caisse. She and my father raised their eight girls and three boys to love and fear God, and to believe that respect and love of our fellow man were more important than riches.

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I never dreamed of the opposition and persecution that would be my lot in trying to help suffering humanity with no thought of personal gain.

I AM NOT A DOCTOR - I AM A NURSE

I have never claimed that my treatment cures cancer - although many of my patients, and the doctors with whom I have worked, claim that it does. My goal has been control of cancer, and alleviation of pain. Diabetes, pernicious anemia and arthritis are not curable; but with insulin, liver extract, and adrenal cortex extracts, these "incurables" live out comfortable controlled life spans.

Cancer patients were successfully treated by me for over 25 years using ESSIAC hypodermically and orally. Since I am a nurse and not a physician, I never gave the treatment until I had a written diagnosis of cancer signed by a qualified doctor. As often as possible, I administered my treatment under the observation of doctors.

THE BRACEBRIDGE CLINIC

A few days after the hearing before the Department of National Health and Welfare, Dr. Albert Bastedo of Bracebridge called me. He had sent a patient to me with cancer of the bowel, and was greatly impressed with the results of my treatment with ESSIAC.

He told me he had gone before the Bracebridge Town Council, and had asked that they offer me the Old British Lion Hotel building, to be used as a cancer clinic, if I would return to my home town to practice. He persuaded me to accept this offer.

The Mayor and the Council of Bracebridge were very enthusiastic about getting the clinic started. With their aid, and the help of friends, relatives, and patients, I furnished an office, dispensary, reception room, and five treatment rooms.

From 1934 to 1942 I paid the Council the sum of \$1.00 per month for the building, and there was a large

"CANCER CLINIC" sign on the door. I treated thousands of patients, who came from far and near, most of them given up as hopeless after everything in medical science had failed. Some arrived in ambulances, and received their first treatments lying down in an ambulance; after a few treatments they walked into the clinic without help.

I had absolute faith that I could accumulate enough proof of results obtained with different types of cancer, as demanded by the Cancer Society, the medical profession would eventually be glad to accept ESSIAC as an approved treatment.

I did not then know of an organized effort to keep a cancer cure from being discovered, especially by an independent researcher not affiliated with any organization supported by private or public funds. Tremendous sums have been raised and appropriated for official cancer research during the last 50 years, with almost nothing new or productive discovered. It would make these foundations and institutions look pretty silly, if an obscure Canadian nurse discovered an effective treatment for cancer!

MY MOTHER WAS AN ESSIAC PATIENT

About the time I opened my Cancer Clinic in Bracebridge, my own dear mother became ill. The four local doctors said she had gallstones, and her heart was too weak for surgery. Mother was 72 years old at the time.

As she got worse, I insisted on calling in Dr. Roscoe Graham, a consulting specialist of international fame, for an examination and consultation with the other doctors.

After the consultation, Dr. Graham came to me and said, "Your mother has cancer, Miss Caisse. Her liver is a nodular mass."

Dr. McGibbon, a local doctor who was set against my cancer work, said very sarcastically, "Why don't you do something?"

"I'm certainly going to try, Doctor," I replied. And I asked Dr. Graham, "How long does she have to live?" Dr. Graham said he thought it would be only a matter days.

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I immediately started treating her with ESSIAC. I gave it daily for ten days. When she improved, I reduced the treatments to three a week, then to two, then to one. She continued to improve.

To make a long story short, my mother completely recovered. She passed away quietly after her 90th birthday — without pain, just a tired heart.

This repaid me for all of my work — giving my mother 18 years of life she would not have had without ESSIAC. It made up for a great deal of the persecution I have endured at the hands of the medical world.

INTEREST BY DOCTORS — IN BRACEBRIDGE CLINIC

A few doctors in the United States became sufficiently interested in ESSIAC to investigate the treatment. Some people from Chicago, who knew of my work, persuaded Dr. John Wolfer, of the Alumni Association of Northwestern University at Chicago, to have me treat patients in a Chicago clinic under the observation of their doctors.

A consultant specialist took me to see Dr. Wolfer, and read the histories of the cases selected for my treatment — all hopeless or terminal. I looked the histories over and asked, "When would you like me to start, Doctor?" He looked surprised because, as he told me later, he had expected me to turn them down.

I arranged to be in Chicago to treat these patients each Thursday, under the observation of five doctors. The consulting specialist asked me, as he took me back to the home of friends in Chicago, why I had accepted these terrible cases.

"I will show results that will surprise your doctors, even in these late stages of the disease", I told him. "The

results will be enough to interest the most skeptical doctors."

I was proved right. Later, these doctors offered to open a clinic for me in the Passervant Hospital in Chicago, if I would stay in the United States.

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Dr. Richard Leonardo, a surgical specialist and coroner of Rochester, New York, at first scoffed at the idea of any merit in my work. "The only way to prove or disprove the merit of ESSIAC," I told him, "is to remain in the clinic and see the patients and observe my work and results." He decided to do just this.

The first day he stayed and talked to patients; then he told me he was satisfied that I was getting results, but it was my faith and encouragement that brought hope and improvement to my patients - not my treatment. "These results are entirely psychological", he stated emphatically.

The second day I invited him to come into my treatment room, examine patients, and watch me administer the treatment. We had many advanced cases of cancer, and I did not finish in the clinic until 7:30 P.M.; the doctor stayed until the last patient left. "Young lady," he told me, "I must congratulate you. You have made a wonderful discovery." Dr. Leonardo stayed for four days, examining patients, and became more and more interested in my results.

"I like your method of treatment," he said. "I feel it will change the whole theory of cancer treatment and will eventually do away with surgery, radium, and x-ray treatments for cancer."

He offered to establish and equip a hospital in Rochester if I cared to move there and work with him. I particularly appreciated Dr. Leonardo's opinion, because he had been scientifically trained in Germany, Vienna, London, and Scotland, and he at first had been so completely skeptical of my treatment.

Both of these offers to establish clinics in the United States were tempting, but my forbears on both sides had come to Canada from France in the 1700's and I had made up my mind long ago that I would prove the merit of ESSIAC in Canada, and that Canada would get the credit for providing a cure for the world's most dreaded disease.

Dr. Leonardo's investigation of my treatment was during the summer of 1937, while Dr. Emma H. Carson of Los Angeles was spending June and July of that year visiting my Bracebridge Clinic and studying the treatment and its results.

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THE FOLLOWING IS QUOTED FROM A REPORT DATED AUGUST 12, 1937, WRITTEN FOR PUBLICATION BY EMMA M. CARSON, M.D.

"Several of my world-renowned professional friends (physicians, surgeons and attorneys) and also four famous business officials were spending the winter of 1936-37 in Southern California, and upon various occasions when they visited me, I learned of Miss Caisse's wonderful cancer clinic at Bracebridge, Ontario. Owing to such glowing and impressive reports and the intense interest so earnestly evidenced during these discussions, I became interested."

"I then expressed a resolve to go to Bracebridge as soon as introductory letters could be exchanged, providing Miss Caisse would invite me to visit her Clinic. The invitation was most cordially extended, including explicit instructions for my convenience and comfort, her genuine assurance of sincere welcome, and her appreciation of the fact that I was coming from a great distance to investigate her work, regardless of my skeptical attitude."

"At 8 A. M. on the fourth day after I received her welcome invitation, I left Los Angeles, en route to Bracebridge for the exclusive purpose of meeting Miss Rene M. Caisse and ascertaining the real virtue of her ESSIAC treatments, according to her invitation, and especially appreciative of her promise to demonstrate her method and system personally in her clinical work."

"As I seriously and compassionately surveyed that extraordinary assembly of afflicted people and visually

compared them with the most prominent and distinguished clinics I have ever witnessed either in this or foreign countries, I vividly realized that I had never before seen or been in any manner associated with such a remarkably cheerful and sympathetic clinic, regardless of size, location, or number of persons: or attended a more peaceful, sympathetic clinic anywhere."

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"I was also assured by patients that they voluntarily abandoned narcotics and sedatives of every denomination, that had been prescribed for them by their physicians who had attended them previous to their adoption of ESSIAC treatments, and very soon after the first treatment by ESSIAC."

"My skepticism neither yielded or became subdued by the hopes and faith so definitely expressed by the Clinic patients and their friends. However, I candidly admit that my curiosity became greatly augmented, and I resolved that skepticism should not blind by eyes or oppose my thorough investigation of the real efficacy of the ESSIAC treatment for cancer."

"Several prominent physicians and surgeons, who are quite familiar with the indisputable results obtained in response to Miss Rene M. Caisse's ESSIAC treatments, and who have also asserted their intense interest in Cancer Research Work, including the investigation of the most prominent advocated remedial treatments for cancer, really conceded to me that Rene M. Caisse's treatment is the most humane, satisfactory, and frequently successful (in consideration of her unavoidable limitations due to certain restrictions) remedy for the annihilation of cancer 'that they had found at that time.' "

"I candidly explained the motive that inspired the purpose that determined my visit to the Bracebridge Cancer Clinic. I hoped to obtain visibly authenticated proof that would sufficiently convince and satisfactorily establish incontrovertible evidence of ESSIAC as a reliable remedial agent for cancer."

"Miss Caisse explained her earnest desire to conscientiously provide all verified information, both favorable or unfavorable, to aid and establish unbiased and impartial conclusions, decisively confirmed, as a merited compensation for my long distance trip, made for the purpose of obtaining convincing evidence concerning the real merits of ESSIAC."

"I diligently proceeded in quest of the definitely assured results accomplished by the use of ESSIAC, and attributed to Miss Rene M. Caisse's treatment for cancer. I firmly resolved that my investigation must be based on unprejudiced judgment."

"Miss Caisse does not even suggest 'Cure All' pertaining to her ESSIAC remedy. When asked if her ESSIAC will cure cancer, she

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always replies:

'If it does not cure cancer, it will afford relief, if the patient has sufficient vitality remaining to enable him to respond to treatment.'

"The vast majority of Miss Caisse's patients were brought for treatment after Surgery, Radium, X-Rays, Emplastrums, etc. had failed to be helpful and the patients pronounced incurable or hopeless cases. Really, the progress obtainable and the actual results from ESSIAC treatments and the rapidity of repair were absolutely marvelous, and must be seen to convincingly confirm belief."

"I was intently engaged in reviewing, comparing, and summarizing my accumulation of data, records, histories, etc., and mentally visualized each patient and his apparently miraculous progress toward recovery, when I realized that skepticism had deserted me, or in recognition of defeat folded its tent, like the Arabs, and silently passed away."

"When I arrived in Bracebridge, I contemplated remaining twelve hours, at least not more than forty-eight hours. Miss Caisse and her ESSIAC treatment and her patients were responsible for the unlimited extension of my time at Bracebridge and Toronto, as I remained twenty-four days and spent about sixteen days at Toronto."

"During the three weeks of the time I visited Bracebridge and neighboring cities or towns, I examined and investigated results obtained by ESSIAC treatments, including 400 patients."

"I am pleased to assure all interested persons that I paid my own expenses and investigated ESSIAC to satisfy my own interest in cancer victims and learn of some remedial agent for cancer that had proved itself superior in every respect to all else, and which I could conscientiously recommend to my friends and interested persons."

"I can heartily express my genuine regrets that Ontario is so far and difficult to reach for cancer sufferers from California. Transportation covering such long distances is certainly an important feature to be considered for the safety and comfort of invalids."

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"With sincere interest and hopes that humanity throughout all nations be permitted to obtain Miss Rene Caisse's remedy ESSIAC according to her philanthropic and humane principles, I remain,"

Signed: Emma M. Carson, M.D.
Hayward Hotel
Los Angeles, California

Dated: August 12, 1937

Dr. Carson's belief in my cancer theory and treatment reflected that of the many physicians who had followed my work for the preceding ten years.

On page 3, I quoted a petition filed in October of 1926. In October of 1936 a similar petition was filed by physicians from Cobden, Ottawa, and Timmins; among the doctors signing was Dr. J.A. McInnis, whose name had been included with the 1926 document.

Copies of the October 1936 and December 1936 petitions are attached.

Every few years I would make an appointment with whoever was then "THE HONORABLE THE MINISTER OF HEALTH FOR ONTARIO" and would attend with a group of patients and a petition. First, Dr. Robb, then Dr. Faulkner, and The Honorable Harold Kirby. Each year the group of patients would be more numerous, and the petitions would carry more names.

The last petition was presented in 1938 with a Bill requesting our government to legalize my ESSIAC treatment.

NOTE: For details and a copy of the Preamble to this Bill please see Page 24.

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To —

Th. lioneutoble the Prime Minute, of Daft*

The Honourable the kilniskr of Health Jot Natio, .4

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mi humble Petition of the Undersigned, in the Province of Ontario, sheweth is followe-

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Wherefore be it resolved that we, the undersigned, do strongly urge that The Hon• ourable the Minister of Health take immediate action, to make this treaunent able to cancer eufterers, and keep it a Canadian Discovery.

And your petitioner, will ever pray etc.

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i•r■LYNK,

*W. C. Caldwell.
Physician*

Ogrommber 23, 1936.

To:

The Honourable the prime Minister of Ontario,

The Honourable the Minister of Health for Ontario, The Honourable the Attorney-Oeneral of Ontario.

This humble petition of the Undersigned, in the Province of Ontario, sheweth as follows,-

1. That wh aaaaa Cancer is considered the greatest ...urge of humanity.
2. W Miss Mons M. Cals.. of gracebridge ha. dieoov-
ered egSSIAC., a treatment which has proven to be • oomplete control, 1/ not a ours for Canoe,
3. Whereas patients treated with egSSIAC" seversl years ago, are still living and well.
4. Whereas Miss Cale" has pathological proof of the effectiveness of mESSIAC", her treatment for Cancer.
6. That we as physloiens and doctors of the nedloal Profession reognine the importance of Chi. treatment end are in favour of keeping at in Canada.
6. And whereas Hiss Cal... is demonstrating this treatment before American University doctor., which will inevitably take her out of Canada permanently if nation la not taken to keep her here.

Wherefore be it resolved that we, the undersigned do strongly urge that the Honourable, the Minister of Health take immediate action,to make this treatment available for 0.4001. *offerers. and keep it • Canadian disooverY•

And your petitioner., will ever pray he.

Signature of petitioner	Post Office Address	Occupation
<i>W. C. Caldwell</i>	<i>Rosseau</i>	<i>Physician</i>
<i>W. J. O'Rourke</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>W. J. O'Rourke</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>E. J. O'Rourke</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>F. J. O'Rourke M.D.</i>	<i>Churchill</i>	<i>Physician</i>
<i>W. J. O'Rourke M.D.</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>W. J. O'Rourke</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>S. M. O'Rourke</i>	<i>Bracebridge</i>	<i>Physician</i>
<i>J. D. McInnis M.D.</i>	<i>Timmins</i>	<i>Physician</i>

MY CANCER THEORY

During the years I operated my Cancer Clinic in Bracebridge, many doctors, surgeons and scientists visited the clinic, read case histories, examined patients, and watched me administer ESSIAC treatments. Many of these doctors said they believed my treatment acted upon the glands of the body.

This coincided with a statement made as early as 1926 by Dr. Frederick J. Banting, when he reviewed the work I had done with patients of the first nine doctors.

One of these cases had interested Dr. Banting particularly, since the patient, a middle-aged woman, was a diabetic as well as a cancer victim. Dr. J.A. McInnis of Timmins, Ontario, had asked me to treat this patient for him under his observation.

Not knowing what effect ESSIAC would have on a patient taking Insulin, I didn't want to give injections along with Insulin. So Dr. McInnis said he would discontinue the Insulin and I should give ESSIAC for a time. If the diabetic condition worsened, he would go back to Insulin.

To our mutual surprise, the diabetic condition improved with the ESSIAC injections, and continued to improve until there wasn't any diabetes at all!

The cancer, at the beginning of treatment, became larger and harder and almost caused an obstruction in the bowel. However, after a few more treatments, it softened and reduced in size until it entirely disappeared. X-ray pictures were taken during the course of treatment, to see what was taking place. The ESSIAC treatments were discontinued after six months of weekly injections. The patient continued in good health, with no trace of either cancer or diabetes.

Dr. Banting was greatly impressed with the X-rays and this case history.

"ESSIAC must actuate the pancreatic gland into normal functioning," he said. "Otherwise, the patient would have had to take treatments for the rest of her life, just as she would have had to take Insulin."

It is my conviction that cancer results from a glandular deficiency. ESSIAC is a combination of non-toxic herbs, given by hypodermic injections into the muscle. (It may also be taken orally).

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I believe that it supplies a deficiency of a secretion ordinarily supplied to the human body by a gland of undiscovered origin, which I call "Gland' XOX." This gland should supply the body with a secretion which is resistant to cancer tissue. Lack of this secretion allows malignant cancer cells to prey upon and invade healthy cells, and take control of the human body, growing and multiplying until the invasion of the malignant cells into vital organs takes place, stopping the functioning of these organs and causing death.

This deficiency cannot be supplied from the "outside". It must be supplied through the blood stream. ESSIAC, injected hypodermically or given orally, supplies this resistive element. The XOX gland starts functioning normally, secreting into the body's living cells the substance required to resist the onslaught of the malignant cells, and thus restores health to the body.

ESSIAC, if given to healthy people, is a blood purifier that stimulates the XOX gland to do its work before there is any chance of malignant cells invading the body. It helped sufferers of malignant diseases for over 25 years; healing, and sometimes curing (when given before vital organs are destroyed).

It renews the normal functioning of gland XOX. It sets up a resistance and cuts off the supply of the substance in the human body upon which malignant cells thrive and multiply. This causes the malignant cells to regress within themselves, and gives to healthy cells strength to rebuild themselves.

I believe some people are born with a predisposition to cancer because of a non-functioning XOX gland.

This XOX gland has not been discovered as yet. When it is, the cause of cancer will be known.

ESSIAC acts on all the glands in the human body, as well as this unknown XOX gland. It restores all glands to health and activity. It is my opinion that, just as there is a chain reaction in the nervous and circulatory systems, there is a chain reaction in the glandular system which connects and stimulates all glands, of discovered and undiscovered origin, into normal functioning. I believe ESSIAC starts this chain reaction on the glandular system.

Cancer has baffled medical science for many, many years.

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The death rate is increasing by leaps and bounds. After years of research, medical science knows neither the cause nor the cure for cancer. Recurrences after surgery are frequent. Diagnostic methods are completely inadequate.

In 1958 hearings were held in San Francisco by a committee formed to hear testimony on a measure setting up a commission to validate methods of treating cancer, and to define permissible spheres in the treatment of cancer by non-medically affiliated physicians.

In reporting on these hearings, Maurice Natenberg, in his book, THE CANCER BLACKOUT, quotes Dr. Glen S. Harman, a Fellow of the American College of Surgeons, a past president of his local surgical society and chief surgeon at the hospital with which he is affiliated.

Among Dr. Harman's observations during the hearing was this: "A well-trained physician beginning his practice should be capable of diagnosing cancer."

The acceptable diagnosis for cancer by the medical world is to locate the growth by X-ray, then cut out a section of the growth for analysis. This method aggravates the growth into growing more rapidly, and thereby lessens the patient's chance of recovering.

While the medical profession officially believes any young well-trained physician should be able to diagnose cancer, it quickly recants any such diagnosis if a cure is obtained by other than orthodox, approved methods.

Diagnosis by X-ray is not considered adequate by the medical profession; it must be substantiated by the pathological analysis of a dangerous biopsy. However, I have presented case histories - and patients - cured by ESSIAC, with written reports from Government pathologists and the head of the College of Physicians and Surgeons in Toronto, with a pathological diagnosis of cancer, only to have a doctor say, in a public hearing, that even a pathologist could be wrong - and he was speaking of the Government pathologist - and that, if my patients were cured by ESSIAC without having been given orthodox treatments earlier, then they had not suffered from cancer. If they had received any of the orthodox treatments- surgery, radiation, deep X-ray therapy, cobalt, nitrogen mustard gas - then this earlier treatment, not ESSIAC, should be credited with the cure.

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Various studies have been made which establish beyond all doubt that persons diagnosed by reputable physicians as suffering from cancer, but who refuse treatment of all kinds, live at least as long and often longer than patients receiving orthodox treatments considered permissible by the medical profession.

I believe that radium drives cancer in, instead of out, and burns the surrounding tissue. I believe that radium, used in too heavy doses, is a prolific cause of further cancer in the burnt tissues.

Regardless of Dr. Harman's confidence in the ability of any young physician to diagnose cancer, I feel very few physicians can diagnose it. There are very few symptoms to warn the individual or the doctor in the majority of cases. In many internal afflictions, there are few, if any, noticeable symptoms: in the majority of such cases, the disease is well established or rooted before the doctor or his patient even suspect its presence.

Cancer generally follows the line of least resistance. It does not cause pain or even inconvenience in its early stages, until it invades an organ, nerve center, or the body surface. It may be slow in development; in such cases it is most deceptive and difficult to discover or feel.

Cancer may develop rapidly and make itself felt early, when it can be fairly easily treated. In its rapid growth, however, a few months of progress may make it too late for the surgeon's knife. Then deep X-ray therapy may scatter it to other parts, or radium drive it in or cause further cancer in destroyed tissues.

If the affected part can, in its infancy, be cut out by surgery before the malignancy starts shooting out its fine, spiderweb-like tentacles, a cure can and is sometimes effected. Once it starts to travel to any extent, I believe that any destructive agency applied to the human body can only do more harm.

Where surgery is indicated, I believe ESSIAC can prove of tremendous benefit. By supplying the body with a secretion resistant to the onslaught of malignant cells, it causes the growth to regress within itself. Being localized, the growth can be removed by surgery without cutting into a large area of healthy cells surrounding the growth, and without so much danger of recurrence as in the present-day method of operating.

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In a case of cancer of the breast, the primary growth will usually invade the mammary gland of the opposite breast, or the axilla of both. If ESSIAC is administered either orally or by hypodermic injection in the forearm, the secondary growth regresses into the primary mass, enlarging it for a time. But, when it is all localized, it will loosen and soften, and can then be removed without so much danger or recurrence.

In the case of cancer of the lung, after localizing with ESSIAC treatments, it is advisable to remove the lung along with the growth.

No matter where the malignancy may be in the human body, surgery is more successful after six to eight treatments with ESSIAC. If there is any suspicion that any malignant cells are left after surgery, then ESSIAC should be given once a week for at least three months, supplying the body with resistance to recurrence.

Thousands of drugs are developed in research laboratories every year. Many are widely promoted both with the public and with the medical profession. Many are approved for distribution without prescriptions. Many others are approved for distribution with prescriptions.

Each year some of these drugs are found to be either toxic, or to produce undesirable and sometimes even fatal side reactions. In the tragic case of Thalidomide, it was found that this sedative, widely used in Europe, produced deformities in babies if taken during pregnancy.

Since no evidence has ever been presented at any time by any person, scientist or otherwise, that there is the slightest toxicity, or undesirable reaction, to the use of ESSIAC, and evidence has been presented that is overwhelming that it has proved of great benefit, it is difficult for me to understand the reluctance of the medical profession to its use.

ESSIAC goes right to the seat of the trouble. If given to a patient who is ailing, and there is any suspicion of cancer, it causes the growth to localize and is easily found by Fluoroscope or X-ray. If there is no growth, the patient's general condition will improve.

Many cancer cases would not require surgery if ESSIAC were given in early stages of pre-cancer conditions.

**PARLIAMENT
and
PATIENTS**

In 1938 a Bill was presented to the 2nd Session of the 20th Legislature of Ontario for:

**"AN ACT TO AUTHORIZE RENE CAISSE TO PRACTICE MEDICINE IN
THE PROVINCE OF ONTARIO IN THE TREATMENT OF CANCER AND
CONDITIONS RESULTING THEREFROM."**

Attached to the Bill were petitions bearing the names of over fifty-five thousand (55,000) persons who were in favor of its passage. Of this number, three hundred eighty-seven (387) were patients, and many were doctors.

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NO. 38	1938
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An Act to authorize Rene Caisse to practise medicine in the Province of Ontario in the treatment of Cancer and conditions resulting therefrom.

WHERE AS Rene Caisse of the town of Bracebridge, a British subject, has by her petition set forth that she is an independent cancer research worker; that during the past fourteen years ehehas been actively engaged in developing a remedial and curative treatment for cancer, and has during the past three yeara been conducting a cancer clinic at the town of Bracebridge, in the district of Malcolm, and has met with a very substantial degree of success in the treatment of cancer, having succeeded in many cases in effecting a complete cure, and, in other cases, in retarding the growth and development of the disease and substantially prolonging the lives of persons afflicted with such disease; that the claims of the said Rene Cain's have been duly investigated and appear meritorious; and the said petitioner has prayed for special legislation in respect to the matter hereinafter set forth; and whereas it is expedient to grant the prayer of the said petition:

Therefore, His Majesty, by and with the advice and consent of the Legislative Assembly of the Province of

Ontario, enacts as follows

1. The said Rene Caisse is hereby authorised to practise medicine in the Province of Ontario in the treatment of cancer in all its forms and of human ailments and conditions resulting therefrom.

24 BILL

An Act to authorise Rene Caisse to practice medicine In the Province of Ontario in the treatment of Cancer and conditions resulting therefrom.

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The Bill was presented by Mr. J. Frank Kelly, a liberal member of Parliament, and by Mr. Leopold McCaulley, a conservative member. It was presented to the second session of the 20th Legislature in Ontario; the Committee consisted of 59 members of Parliament. The Bill failed by only three votes. It would have authorized the practice of the treatment of cancer by a specialist without a medical rating. This was a position never before heard of in the conservative history of the Dominion of Canada.

I learned later that this unusual Bill, authorizing me to practice medicine in the treatment of cancer would, no doubt, have actually been approved by the Committee, except that members of the medical profession assured the Committee that if the Bill was not passed they would then sponsor appointment of a "Cancer Commission" to hear my case and to give my treatment a fair hearing.

NOTE: It came to light later that the Canadian Medical Association had debated my case with the Legislature before my hearing and had made this false promise.

Soon after the Hearing of my Bill, a Legislative Assembly in Ontario passed "AN ACT FOR THE INVESTIGATION OF REMEDIES FOR CANCER". This Act provided, among other things, that:

"The Commission may require any person who advertises, offers for sale, holds out, distributes, sells or advertises either free of charge or for gain, hire, or hope of reward, any substance or method of treatment as a remedy for cancer, to submit samples of such substance, or a description of such treatment, and samples of any substance used with such treatment, to the Commission together with the formula of such substance and such other information pertaining to such substance or method of treatment as the Commission may determine".

I immediately closed my clinic, and reopened it only at the urgent request of the Minister of Health, the Honorable Harold J. Kirby and of the Premier of Ontario, the Honorable Mitchell Hepburn.

The Honorable Mitchell Hepburn has said at the time this Act was passed: "The onus is on the medical profession now. They must

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either prove or disprove Miss Caisse's claims, and I do not believe they can disprove them. I am in sympathy with Miss Caisse's work, and will do all in my power to help her".

The Premier answered an inquiry from Mrs. Wilfred Raney of Sundridge, Ohio, about my treatment, stating that I could "carry on" as in the past. His letter of June 8, 1938 follows.

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Toronto, Ontario, June Stir,

Dear Mrs, Raney:

In reply to your letter of recent date relative to Miss Rene M. Caisse's cancer cure, I wish to advise you that the Commission for the investigation of so-called cancer cures has not been set up as yet. Miss Caisse is in the same position to-day as she was prior to the passing of An Act for the Investigation of Remedies for Cancer. There has been no interference whatever by the Department of Health, nor by any department of the Government.

The Minister of Health and the Deputy Minister have personally interviewed Hiss Caisse, and she has been advised that she can carry on her treatment in the meantime the same as she has done in the past.

With kind regards, I remain Xours very sincerely,

Mrs. Wilfrid Raney, Sundridge, Ontario.

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Eventually, on December 31, 1939, the Commission for the Investigation of Cancer Remedies brought in its' report which read in part:

"After a careful examination of all the evidence submitted and analyzed herewith, and not forgetting the fact that the patients, or a number of them, who came before the Commission, felt they had been benefited by the treatment which they received, the Commission is of the opinion that the evidence adduced does not justify any favorable conclusion as to the merits of ESSIAC as a remedy for cancer, and would so report."

It is my opinion that the Hearing of my case before the Cancer Commission was one of the greatest farces ever perpetrated in the history of medicine. Over 380 patients came to be heard, and the Commission limited the Hearing to 49 patients. Then, in their report, stated that I had taken only 49 patients to be heard! They stated that X-ray reports were not acceptable as a diagnosis, and that the 49 doctors had made wrong or mistaken diagnoses.

It is a sad state of affairs if doctors can diagnose an affliction as "Cancer" and send the patients home with a few months (at most) to live, if they are not sure. In the 49 cases examined by the Ontario Cancer Commission, the majority had been diagnosed by more than one physician. Some of them had three or four doctors, and were told they had cancer, and were treated for malignancy before coming to me for ESSIAC treatment.

The Cancer Commission at the Hearing admitted that every patient presented had benefitted or been cured by ESSIAC; many of them with pathological findings and reports, but they said the doctors had all been mistaken in diagnosing the cases.

Over 300 patients were waiting to be heard, but the Commission stated they had seen enough to give a report.

The Cancer Commission made much of the fact that I had not furnished them with the formula of ESSIAC with samples thereof. What they did not state was that I had been offering to the proper authorities for years my formula providing they would admit some merit for ESSIAC on the CLINICAL PROOF I presented.

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I had offered to give it to them if they would assure me that it would not be shelved (as was done with penicillin). So I did not give out my formula and they published the bald statement that I "refused to give my formula."

My files reflect hundreds of documented cases concerning the proven efficacy of ESSIAC with cancer patients, including many of the 49 that the Cancer Commission turned down for dubious reasons. I will give just two cases of patients who appeared before the Commission in July of 1939, and who were alive and well over 20 years later.

Mr. Walter Hampson, Utterson, Ontario. Age 34 in November, 1937.

Diagnosis: Squamous Carcinoma of lip.

Dr. Ansley, Pathologist: Dr. A.F. Bastedo, Bracebridge, Ontario.

After the pathologist's report, Dr. Bastedo urged Mr. Hampson to go at once to have radium treatment as he had no time to lose. Mr. Hampson came to me for treatment and was cured. When he went before the Cancer Commission on July 4, 1939, with other patients they listed his case as "recovery due to surgery." The only surgery he had was the removal of the small section for the biopsy which showed the cancer!

Note: Mr. Hampson was well on May 4, 1960.

Mr. Herbert Rawson, Bracebridge, Ontario. Age 48 in 1935.

Diagnosis: Carcinoma of rectum, confirmed by X-ray pictures.

Patient had a hard mass with sloughing and bleeding and great pain. When Mr. Rawson refused surgery, Dr. Kenny gave Miss Rene M. Caisse a written diagnosis with permission to treat with ESSIAC. treatments began in April of 1935 and the last of 30 was given May I, 1936, and a good improvement in weight. Patient was able to work during treatment period except for one month of rest. No trace of cancer found in 1936 when he was examined by Dr. W.C. Arnold of Ottawa, Herbert Monthorne of Timmins, and F. Greig of Bracebridge.

Note: Mr. Rawson died of a stroke on May 22, 1960 at age 73.

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In 1963 Mrs. Canine Donald died at age 79 - Mr. John McNee died at age 95 this same year. Both had been cured at the Bracebridge Clinic, but no doubt the investigators would now claim they never did have cancer. It seems the only cases they admit had cancer are the ones who died of it. In spite of all the research and conventional treatments.

One of the well-known cancer victims who was informed about my treatment was Lady Eva Peron in Argentina. The contact was made by the Honorable Godfrey A.P.V. Winter-Baumgarten representing THEOPOLIS, in Rome, Italy. The Honorable Winter-Baumgarten had heard about the excellent results from ESSIAC and he wrote to Eva Peron on June 6, 1952, and to me on June 14. (Copy of same overleaf). She did not take advantage of his offer to help her get ESSIAC treatment, and she died soon afterwards.

The Prime Ministers, the Ministers of Health, and later the Cancer Commissioners and the Attorney-Generals of Ontario received hundreds of letters and pleas from patients and their doctors regarding ESSIAC. Many of the 55,000 persons who signed the petition supporting the Bill to recognize and legalize my treatment, also wrote letters. The Cancer Commissioners, backed by certain medical groups, were deaf to the appeals, and used the same biased interpretations of data as have been placed on other treatments indicated for cancer, unless limited to their approved surgery, radiation, and toxic drugs. It is my honest opinion that if apple cider vinegar were found to benefit cancer patients, it would be banned from the public!

June the 14th, 1952, 73 Pantheon Place, Home 242, Italy.

Telephones:

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68434.3

To Lady Rene M. Caisse McGaughey,

P.O.Box 485, Bracebridge, Ontario, Canada.

Most Esteemed Friend:

The very kind airway letter of June the 4th has just arrived, for which please accept many thanks. No other communication has reached we regarding the cancer stricken Evelyn Puro of Duluth, Minnesota, U.S.A.

You may contact the parties mentioned in my airway letter of May the 30th, without the least delay, in my name ,and let me know at once. To Mr. Higbee is being mailed, under even date, a duplicate copy of this letter,

to the address given by you, so kindly inform me at once.

From the enclosed copies of my airway letters to Lady Eva Peron, the remedy mentioned is to be applied in the Essiac" treatment, as I explained to the Argentine Ambassador, who has replied with the greatest deference. I am at present expecting a speedy answer from Buenos Aires. You will, therefore, be ready for an emergency call at any moment with the Triumph of Essiac and God' s Greater Glory.

With Heaven's Choicest Blessings
Most faithfully in Xt.



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THE CANCER CONTROVERSY

There has been continued controversy within medical circles for over fifty years about cancer and its treatment. The late Dr. Cornelius P. Rhoads of Sloan-Kettering Institute was quoted by the New York Times on October 10, 1956, as "predicting that a chemical control of cancer would be found in ten years."

Cancer therapies are not the only ones handicapped by long- delayed medical acceptance. Dr. Alexander Fleming, who discovered penicillin, sadly stated:

"Penicillin sat on my shelf for 12 years while I was called a quack. I can only think of the thousands who died needlessly because my peers would not use my discovery."

Above from Dr. George W. Carne's column in THE POST- TRIBUNE, Gary, Indiana, June 20, 1964.

With cancer therapy, we have to face a financial fact. There is more money in cancer than in any other disease ever known to mankind. Millions of dollars, every year, are poured into research grants.

An article in the New York World-Telegram and Sun of December 14, 1963, tells of a life-time grant to a young Doctor Jerard Hurwitz in the amount of \$692,000.00! Why a "life-time"? There is one catch clause in the grant. Should a cure for cancer be discovered during the next 34 years, the grant will be terminated. At this point, the doctor is quoted as saying: "Some people must think that all the people looking into the disease have signed a blood pact not to announce a cure until they are all on their death beds so the grants will continue." He may have been joking, but it seems to be unfortunately quite true!

There are the CANCER SOCIETIES with their huge staffs and never-ending appeals for funds. The patient then has doctor bills, hospital and surgical costs, X-ray treatments or radiation, perhaps cobalt, and drugs such as nitrogen mustard. Much of this may leave dangerous side effects. Many families are financially ruined by the expense of one cancer case, and the loved one still suffers and dies. Radical surgery may leave one not only physically handicapped, but an emotional wreck.

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Where there are controls in the hands of a powerful group, or groups, the doctor "down-the-line" is almost helpless with his protest, or desire to do anything different for his patient. Harsh methods may be used to defame a doctor and his treatment - this is brought out in THE CANCER BLACKOUT by Maurice Natenberg, published by Regent House in Chicago in 1959. This book is documented "history of denied and suppressed remedies."

What actual progress has been made during the past 50 years in the Cancer Therapy field? What proportion of

patients still die? Except in certain types, where there has been a lower incidence of the disease - and this is used for statistical purposes.

Until the public is aroused, and demands the liberty and freedom to get the treatments of their choice, this tragedy will continue for an indefinite time. It is a wonder that the Medical hierarchy has not figured some way to forbid religious treatment! What right has any group of medical men to VETO the findings of other doctors similarly trained and experienced? Yet, this is done all the time! We should have some type of HUMAN RIGHTS COMMISSION to hear the patients' side in this unfair controversy between certain doctors versus other doctors, and until we do, we will have no freedom!

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E P I L O G U E

Now, like Grandma Moses, I paint pictures. Many, many, oil paintings, trying to forget that which I know I can never forget -that I know a cure for Cancer, and that I can never give it to the world, and must each day see the misery of the patients.

In spite of everything that has been said and written to the contrary, I always have been, and am still, willing to turn over my formulae to any medical group, at any time, who will GUARANTEE to me that ESSIAC will be used to help suffering humanity, and not "put on the shelf", as has been done with other drugs and treatments.

Were I to release my formulae to a doctor of proven ability, he would be subjected to the same torture that I have been. He would be powerless against the powerful medical establishment, in many cases upheld by the authorities of various governmental agencies who are sworn to protect the public, not to arrest citizens who disobey orders regarding what treatment they are to have, for their own bodies and at their own expense! In some locations, a person is not even allowed to TALK about any treatment not subscribed to by the local medical groups. Where is any freedom of choice for the citizens of so-called "free" countries, like Canada and the United States? Even the press seems blinded to any reports that indicate help outside the "standard procedures."

Having spent nearly 30 years trying to get my discovery accepted by the medical profession, I feel that cancer is, at present, a closed book. Once a simple treatment is found, it will revolutionize the entire program and it would lose millions of dollars for the research groups, foundations, societies, doctors, hospitals, equipment manufacturers, drug firms, etc., etc. So why "kill the goose that lays the golden eggs?"

In my heart, I still hope and pray for a miracle — but, in my mind I see only closed doors. The disappointment is a tragedy that has made my last years sad and frustrating; I am grateful that God has given me the strength to retain my sanity.

Perhaps some other country will have the courage to find and bring help to suffering humanity, though I had hoped it would be by my own beloved Canada, or our neighbour, the United States of America.

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