

Allopathic Medicine's Stonewall Shaken

Howard D. Straus¹

A Book's Publication

In February, 2002, Prof. Michael Gearin-Tosh's book, *Living Proof: A Medical Mutiny*¹ was published in the United Kingdom and in the United States in March, 2002. This volume is significant because it documents in great detail the author's odyssey from the diagnosis of his multiple myeloma in 1994, through many consultations with oncologists, nutritionists, researchers, and friends, to his eventual decision to use alternative therapy and his continuing survival, despite the overwhelming odds against it predicted by the specialists. Multiple myeloma is a cancer of the bone marrow. The only treatment course indicated by conventional medicine is aggressive chemotherapy, including bone-marrow transplants, a draconian regimen at best. In fact, as Gearin-Tosh learned, the treatment itself has a good chance of killing the patient.

Discouraged by the paucity of options offered by the experts, Gearin-Tosh set out on a voyage of discovery, helped by numerous friends, themselves brilliant researchers, in an attempt to find some means of surviving more than the three to six months threatened by oncologists if he failed to take chemotherapy, or the two to three years if he did take it, and if the chemotherapy course did not kill him.

After much searching, Gearin-Tosh found the Gerson Therapy, a holistic, nutritionally-based treatment regimen developed by Dr. Max Gerson (1881-1959), and detailed in his book *A Cancer Therapy: Results of 50 Cases*.² Though difficult to follow, and with few multiple myeloma case histories for reference, the therapy, when followed fully by patients whose vital organs are still functioning adequately, usually heals whatever else ails the body. The approach made sense to Gearin-Tosh, and

he began implementing it, with the help of several loyal friends and caregivers.

From time to time, Gearin-Tosh made additions to the Gerson Therapy, based on reports of other "alternative medicine" successes that his researchers found for him. For instance, he added large doses of vitamins C, B₁₂, and D, acupuncture sessions and hours daily of Chinese meditation techniques. Encouraged by his early results, Gearin-Tosh continued the therapy, eventually returning to his work as an Oxford professor of English.

After eight years, Gearin-Tosh, though not completely free of multiple myeloma, decided to record his experiences, and wrote *Living Proof: A Medical Mutiny*.

The Medical Press' Response

One would expect an enlightened, truth-seeking medical profession to respond to this case story with avid attention. Here, after all, was a multiple myeloma patient who had survived longer than would have been expected had he accepted the medical care pressed upon him—in fact, over three times as long, and still counting. Wouldn't it be reasonable to find out everything possible about the therapy that had produced this highly anomalous result? Moreover, a logical response would be to insist on immediate research leading to clinical trials of the therapy and all its component parts. The actual response, however, has been far less encouraging.

Members of the medical community who had been all too eager to send Gearin-Tosh to useless, debilitating, and expensive chemotherapy now found themselves being questioned by the lay press about their tactics. This included the near routine "gradual disclosure," in which patients are given only the information that supports their physicians' agenda, and then are pressed to act on this partial data, with

1. President, The Cancer Research Wellness Network, 25680 Tierra Grande Drive, Carmel, CA 93923

impressive diplomas also being used to intimidate subjects into compliance. Physicians unaccustomed to being interrogated like this were angry that other multiple myeloma sufferers and their families were now reading *Living Proof* and questioning the efficacy of the conventional treatment proposed or already received. Some doubtless wanted to know what their oncologists could tell them about the Gerson Therapy and orthomolecular augmentation.

When *Living Proof* was reviewed in the *New York Times* on May 12, 2002, by Natalie Angier in an article entitled "Physician, Take a Hike," the reviewer seemed pained even to acknowledge that there might be some benefit to the path that Gearin-Tosh had chosen for himself. Nonetheless, Gearin-Tosh continues to survive, now ten years after his diagnosis—far longer than the most optimistic prognosis his doctors had given him.

In the Dec. 12, 2002 issue of the *New England Journal of Medicine*, (NEJM) James Spencer Malpas, M.D., D.Phil. of St. Bartholomew's Hospital in London reviewed *Living Proof*. This was a milestone event for several reasons. For the first time in over 40 years the Gerson Therapy was referred to as a coherent therapy. Moreover, it was the first time that Gerson's name had appeared in the mainstream medical press without the accusation of "quackery," and certainly the first time that the Gerson Therapy was acknowledged to be "the right therapy" for any case of cancer. Notwithstanding these shifts, the article contains some puzzling and disturbing statements and omissions that deserve to be looked at more closely.

A Critique of the NEJM Review

At the outset of his review, Malpas claims that Gearin-Tosh's stage 1 multiple myeloma "occupies a borderland between the relatively benign form of the disease, so-called smoldering myeloma, and the aggressive classic form of the disease. It is

not uncommon for an oncologist with a practice in myeloma to see a patient with stage 1 myeloma who survives for many years." Yet when Gearin-Tosh researched his disease with experts around the world, he writes, "the question was put again and again: Did any of these clinicians have records or experience of long-term survivors, against all the odds? Surprisingly, now and again the answer came back: yes, there were outriders. If the clinician in question had been around long enough, an anomaly could sometimes be brought to mind." A physician at Oxford estimated the chance of 20 years of survival with stage 1 multiple myeloma left untreated to be 0.005%.

Thus, when Gearin-Tosh was faced with a life-or-death decision as to whether to seek treatment, he was told by many experts that long-term survival untreated was an almost impossible long shot, of the order of one in 20,000, the exact opposite of the "not uncommon" survivals vaguely cited by Malpas. It is difficult to escape the conclusion that either Malpas or all the other experts were stretching statistics to the breaking point to support their own agendas: the clinicians to convince Gearin-Tosh to rush into treatment; or Malpas, after the fact, to minimize the success of the "non-medical" treatment that Gearin-Tosh chose.

Malpas then poses the question, "Why did this intelligent, erudite, and by his own admission, obstreperous man write this book?" The short answer is that it was suggested to him by a friend and one of England's leading cancer researchers. But beyond that, it would seem to me that an intelligent, erudite, and extremely literate person who survived a disease pronounced by all the specialists he consulted to be uniformly and rapidly fatal, and who had done it by using what they would consider a radical and dubious therapy, would want to share his unique experience with others in hopes of helping them deal with and even survive the grim prognosis they were given.

It would be more unusual to think that he would not write a book about his experience.

Dr. Malpas continues: "Journalists seized on [the book] and used it to vilify orthodox medical practice and doctors in general. This was grossly unfair." Considering that the attitudes of the oncologists were arrogant and dismissive to an "intelligent and erudite" Oxford Fellow, one can only imagine the distress of an average workman or housewife being browbeaten to follow unquestioningly some learned medical consultant's orders. It seems like whining to complain when this behavior is exposed and criticized. Malpas notes that "many patients and their families had been upset," but he coyly does not mention with whom they were put out. It is highly unlikely that they were angry with Gearin-Tosh, as he was writing about a very personal and inspiring saga of survival. What could upset people about that? I surmise that the patients and their families were upset because they didn't get any information regarding alternatives to the painful, expensive, and ineffective treatments proposed by their oncologists-alternatives that might well have resulted in longer survival for themselves or their loved ones. Malpas later asks a rhetorical question that shows all too clearly that he still doesn't understand what the book is about: "So *Living Proof* of what? Having survived, Gearin-Tosh feels he has the right to draw lessons from his experience." This is an astonishing statement. Gearin-Tosh is clearly saying that by his very survival, he is "living proof" contradicting the oncologists' flat statements that theirs is the only way to treat the disease. And, please, Dr. Malpas, what could be a better way to learn a lesson than through personal experience, purchased at the price of discarding all conventional wisdom, the wager of one's life, and the technical difficulties of a radical change of lifestyle? Having earned that knowledge the hard way, Prof. Gearin-Tosh would be remiss if he did not share what he has

learned with others despairing of survival.

Now to identify some glaring omissions in Malpas' review. Any researcher with integrity who stumbles across a treatment that has shown such a positive outcome as that evidenced in the continued survival of Prof. Gearin-Tosh even just in one case, and perhaps using bizarre methods as well would rush to gather all possible information about it, for it then could then be used to help other patients. Yet there has been no clarion call from the medical profession for further research into the elements of the treatment assembled by an English professor and his non-medical helpers, and certainly no proposal for clinical trials using one or more of the factors Gearin-Tosh credits for his survival. There is only Malpas' most grudging and narrow admission that this therapy, "although it seems far worse than conventional chemotherapy, was the right therapy for him." How could consuming a diet of delicious organic foods and juices, taking micro-nutrient supplements, systematically detoxifying one's body, and meditating daily possibly be "worse" than the removal of one's bone marrow and subsequent application of highly toxic and possibly fatal doses of chemotherapy? Dr. Malpas' statement seems especially grotesque in the light of the penultimate sentence of his review: "The irony of the whole situation is that a recent randomized trial of treatment for stage 1 multiple myeloma by Riccardi and colleagues (*British Journal of Cancer*, 2000; 82: 1254-60) showed no advantage of conventional chemotherapy over no treatment." Once again, there are no figures offered for the actual survival duration for the two groups, but given the dismal record of chemotherapy, it is doubtful that either group survived more than three years.

An even more disturbing omission in the review is the lack of any statement or even speculation as to how oncologists will now treat multiple myeloma, after the only acceptable conventional treatment, chemotherapy combined with bone-marrow transplantation, has proven no more effec-

tive than no treatment at all. It would seem that any therapy with a chance of success would be carefully examined. Yet Malpas leaves the reader with the distinct impression that the application of chemotherapy will continue unabated, rather than not treating patients at all or else encouraging them to undergo a supposedly outlandish "alternative" therapy program already shown to have phenomenal success with a number of chronic and degenerative diseases, including cancer. The current research, especially that conducted by Riccardi, et al., indicates that physicians who recommend and conduct chemotherapy in treating multiple myeloma in the future could be regarded as unethical.

Are Medical Journals Biased?

Malpas' very statement in *NEJM* that the Gerson Therapy was evidently the "right therapy" for Gearin-Tosh is an enormous departure from the practice of American medical literature for the past half-century. During Morris Fishbein's tenure as Editor-in-Chief of the *Journal of the American Medical Association* from 1924 to 1949, Gerson's name was banished from favorable mention in American medical literature, and has not been mentioned at all since. It is a well-established fact that for many years American medical journals have been cunningly manipulated by large and incredibly wealthy pharmaceutical companies, which contribute crucial financial support through advertising. Obviously their profits would be directly threatened by a successful and relatively inexpensive cancer treatment. Furthermore, the Gerson Therapy views all drugs as liver-toxic, and chemotherapy as particularly pernicious. The promising results of the Gerson treatment for cancer have been published by researchers from Graz, Austria (Dr. Peter Lechner) to Fukushima, Japan (Professor Yoshihiko Hoshino, M.D.). Additionally, the Gerson Therapy's success in treating a wide variety of serious health conditions, not only cancer, has been reported in hundreds

of articles providing scientifically proven and reproducible results, and published for over seventy years in many of the world's most respected peer-reviewed medical journals. Besides implicitly determining which articles may or may not be published, the pharmaceutical companies manipulate the mainstream medical journals by sponsoring ostensibly unbiased studies by well-paid medical researchers, but only submitting favorably skewed results for publication. The scientific fraud reached such a high-water mark that on May 18, 2000, Marcia Angell, M.D. wrote an editorial in *NEJM* titled "Is Academic Medicine for Sale?" Thus far, there has been no apparent change in the practice.

Money speaks, then, where medical research and reporting are concerned. But money cannot cover up the kind of very public and undeniable results chronicled by Prof. Gearin-Tosh, nor can he be dismissed as an ignorant loony who has been gulled by quacks. He is a brilliant and highly respected senior faculty member in one of the most prestigious universities in the world. His words and his success must be addressed directly if the medical profession is to maintain any of its shrinking credibility.

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