



HEALING NEWSLETTER

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THE GERSON INSTITUTE

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A NEW RATIONALE FOR THE ANTINEOPLASTIC EFFECTS OF POLARIZING TREATMENTS

Gar Hildenbrand

The ability of low sodium, high potassium vegetarian diets to inhibit tumor growth and enhance host defenses to produce cures in advanced cancer in man has been demonstrated by Gerson (1). Now, evidence from the laboratory of Jaede and Rajewsky suggests that these cures are due, in part, to a reduction in pH in malignant cells caused by repeated, temporary elevation of serum glucose which, in Gerson's cancer therapy, results from continual oral application of fruits, certain vegetables, grains, and the juices of fruits and vegetables.

In 1981, Dr. Demetrio Sodi-Pallares, developer of GKI (glucose, potassium, insulin) intravenous treatments of acute myocardial infarction (2) and polarizing treatment (low sodium/high potassium diet, insulin, potassium) of advanced cardiovascular disease (3), proposed the incorporation of GKI solutions in the treatment of advanced, severely depleted cancer patients in cases which were difficult to reach through the full-intensive Gerson cancer therapy as it had been practiced up to that time. Intravenous GKI solutions were subsequently applied by physicians of the Gerson Therapy Center of La Gloria Hospital (La Gloria, Mexico) in certain advanced, refractory cases.

One of those cases was mentioned in Healing, Vol.2, No.1. the Journal of the Gerson Institute and Gerson Therapy, a woman who arrived by ambulance flight from the east coast of the U.S.. She had been un-

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Charlotte Gerson, President

2.

able to take nutrition orally and had been placed on total parenteral nutrition by her Florida physicians two weeks prior to her admission to La Gloria Hospital. She was semi-comatose. Under the influence of GKI intravenous solutions and coffee enemas (1) alone, she recovered sufficiently within four days to take teas and juices (for more than two weeks she would vomit even teaspoons of water). She was placed on the full intensive Gerson Therapy by stages, including three full meals per day, and left the Gerson Therapy Center walking, without support.

Dr. Sodi-Pallares suggested that the improvement of cancer patients under the influence of GKI treatment was due to the correction of tissue damage syndrome as described by Cope (4) in damaged tissues surrounding tumors, and subsequent improvement in host defense mechanisms.

Now, from the Institute for Cell Biology (Tumor Research) of the University of Essen, Germany, comes a rationale for the direct antitumor effect of such I.V. solutions. Reporting in Cancer Research 42, April 1982, researchers Eckhard Jaede and Manfred F. Rajewsky stated that tumors in cancerous rats perfused with I.V. glucose solutions became acid due to the fermentative metabolism of all malignant cells [Warburg (5)]. No acidity developed in normal brain or kidney tissue, but the pH of malignant cells dropped to a level at which they could no longer clone. Cell lethality apparently resulted with the pH of necrosing tumors having dropped from 7.1 to 5.2. Unlike normal cells, malignant cells take up glucose at whatever concentration it occurs in serum, fermenting it to lactic acid. Because many tumors do not have good vascular systems, they are unable to transport away excess lactic acid and, literally, swamp in their own metabolic waste product.

Also reporting in Cancer Research 42, March of 1982, Edward A. Benson and Ian M. Holdaway of the Department of Medicine of Auckland Hospital, New Zealand, found that breast tumor cells (adenocarcinoma--a very common tumor cell type for cancers originating at many sites in the body) have lost the ability to "down-regulate" the amount of insulin accepted from serum. Greater concentrations of insulin in serum result in greater concentrations of insulin in malignant cells.

Greater intracellular quantities of insulin result in higher cell concentrations of glucose which, in cancerous cells with fermentative metabolism, can only mean production of lactic acid at higher concentrations resulting in further damage to those cells. In fact, Jaede and Rajewsky have initiated studies to investigate the effect of insulin on tumors of hosts with elevated serum glucose.

In Cancer Research 42, October 1982, K. Bennegård of the University of Gothenburg, Sweden, reported that depleted cancer patients differ from depleted (non-cancerous) controls in that the normal cells of cancer patients used almost no glucose after fasting. He also found that normal tissues in those cancer patients are resistant to insulin (refusing to bind it as in adult onset diabetes) which results in decreased glucose uptake.

Maurice Shils, Director of Nutrition at New York's Memorial Sloan-Kettering Cancer Center, stated in Nutrition and Cancer, Vol.1, No.1, 1982, "Clinical experience indicates that it is a very rare patient who has obvious

explosive tumor growth during a period of improved nutrition". This commonly accepted fact, in light of the above reports from Cancer Research, opens itself to new interpretations.

Max Gerson, M.D., of New York, reported that patients with malignant cancers responded clinically much more satisfactorily if they would continue to consume fruits, oats, and juices containing carrot and apple among other materials, in addition to regular frequent vegetarian meals which included oats, potatoes in several forms, fruits, and vegetables (6). In fact, Gerson found that his most successful patients (those in whom tumors were regressing and dissolving) voluntarily consumed larger quantities of foods and juices than were prescribed, asking for seconds and for larger helpings at meals, taking extra juices, and continuing to eat fruits and to drink juices whenever awake, even in the middle of the night.

For some time, the question of the rate of increase of serum glucose in response to feedings of complex carbohydrates was answered only with assumptions. D.J.A. Jenkins of Toronto University, Canada, and R.H. Taylor of Central Middlesex Hospital, London, U.K., reported in Diabetologia 23, 1982, the relative serum glucose rise (glycaemic index) in response to feeding carrots is 92% (glucose is 100%), potatoes 70%, oats 49%, bananas 62%, millet 71%, illustrating that the commonly held belief that these materials produced a slow serum glucose rise was not based in fact.

It is likely that the Gerson Therapy itself, without polarizing GKI solutions, causes periodic increases in serum glucose and subsequent increases in serum insulin (the pancreas' normal response) which are sufficient to damage fermentative malignant cells by causing them to swamp with lactic acid.

Cachexia, typical aversion to nutrition seen in cancer patients, is corrected by the Gerson cancer therapy at least in part through medications which encourage cell respiration and reduce the number of internal challenges to cells. Gerson prescribed potassium in addition to a low sodium diet which stabilizes damaged cell proteins as demonstrated by Ling and reported by Cope (7). Improved internal environment in cells results in increased glucose burning and enhanced energy production. Gerson directly stimulated glucose burning in cellular mitochondria with large dosages of thyroid and Lugol's solution. Tumor generated toxins and partial metabolites which impair cell metabolism were reduced in Gerson's patients through coffee enemas which stimulate enzyme detoxification systems in the liver [glutathione S-transferase (8,9)] and bile flow.

There are, of course, many rationales regarding other biological mechanisms which may partially account for the ability of the Gerson cancer therapy to cure advanced cancer in man. Any attempt to say that one or another rationale is wholly or even mostly responsible could only be scientific arrogance. At this time, the immature science of medicine is not capable to make such pronouncements.

When considering this and other empirical treatments, which comprise the majority of successful medical treatments, weight and emphasis must be placed not on questions of why but rather the simple fact that they work. Acceptance by the medical community will ensure the generation of a flood of possible rationales, some of which will have predictive value and will actually advance the effectiveness of treatment.

During 1984, Charlotte Gerson will speak at the following Convention locations:

<u>Health Group</u>	<u>Location</u>	<u>Dates</u>
National Health Federation*	San Jose Convention Ctr. 291 Market St. San Jose, CA	June 16 & 17
Cancer Control Society 2043 N. Berendo Los Angeles, CA 90027 (213) 663-7801	Hotel Ambassador Los Angeles, CA	June 30, July 1 & 2 Charlotte speaks Sunday, July 1st at 4:45 P.M.
National Health Federation*	Holiday Inn; O'Hare Kennedy 5440 No. River Road Rosemont, IL	August 25 & 26
Donsbach University Expo P.O.Box 5550 Huntington Bch. Ca 92646 (714) 848-0774	Disneyland Hotel Anaheim, CA	Sept. 8 & 9
National Health Federation*	Americana Hotel/Tandy Ctr. 200 Main Street Ft. Worth, TX	Sept. 22 & 23
Health Horizons Expo**	Wm. Penn Hotel Melon Square Pittsburgh, PA	Nov. 9 - 11
National Health Federation*	Sheraton Twin Towers 5780 Major Blvd. Orlando, FL	Nov. 17 & 18

For details contact:

*National Health Federation
212 Foothill Blvd.
Monrovia, CA 91016
(818) 357-2181

**Health Horizons Expo.
Jim Winer
P.O. Box 189
Wildwood, PA 15091
(412) 367-7053

References:

- 1) M. Gerson, "Effects of a combined dietary regime on patients with malignant tumors", Experimental Medicine and Surgery, Brooklyn Medical Press, 7, 299-317 (1949).
- 2) D. Sodi-Pallares, A. Bisteni, B.A. Medrano, M.R. Testrelli, A. DeMicheli, "The polarizing treatment of acute myocardial infarction", Dis. Chest, 43, 424 (1963).
- 3) -----, "The importance of electrolyte therapy in heart disease", Annals of the New York Academy of Sciences, 156, 603 (1969).
- 4) F.W. Cope, "Pathology of structured water and associated cations in cells (the tissue damage syndrome) and its medical treatment", Physiological Chemistry and Physics, 9, 547-553 (1977).
- 5) O. Warburg, (Ed.), Über den Stoffwechsel der Tumoren, Berlin, Springer Verlag (1926).
- 6) M. Gerson, A Cancer Therapy: Results of Fifty Cases, (3rd E., Gerson Institute, Bonita, California, 1977).
- 7) F.W. Cope, "A medical application of the Ling Association-Induction Hypothesis: The high potassium, low sodium diet of the Gerson cancer therapy", Physiological Chemistry and Physics, 10(5), 465-468 (1978).
- 8) L.F. Chasseaud, "The role of glutathione and glutathione S-transferases in the metabolism of chemical carcinogens and other electrophilic agents", Advanced Cancer Research, 29, 175-274 (1979).
- 9) L.V. Spornins, L.K.T. Lam, L.W. Wattenberg, "Effects of coffee on glutathione S-transferase (G S T) activity and 7, 12-dimethylbenz(a)anthracene (DMBA)-induced neoplasia", Proceedings of the American Association for Cancer Research, American Society of Clinical Oncology, 22:114, Abstract Number 453 (1981).

MEDICAL MIRACLES, OLD AND NEW

by Charlotte Gerson

We often hear from friends, relatives, or neighbors of former patients who are now doing well or have totally recovered. Many of those patients feel that we do not like to be "bothered" by calls or letters from them. Nothing could be further from the truth: We are anxious to keep in touch and to know how our former patients are doing. Please call or write and let us know.

THREE MORE OF DR. GERSON'S "FIFTY CASES"

Some of our most exciting moments come when we hear that former patients of Dr. Gerson's are still living and active. Just recently we had word from Sister Moranda, case #38 in A Cancer Therapy: Results of Fifty Cases (Gerson, 3rd Ed., pub. by Gerson Institute, 1977). She is now eighty years old, still actively teaching. She was first seen by Dr. Gerson in October of 1947, suffering a recurrence of kidney cancer for which she had been operated and radiated at Sacred Heart Hospital in Allentown, PA. To give you an idea of the severity of her case, a twentyeight pound tumor (!) was removed along with her kidney. She was repeatedly radiated despite the known futility of such treatments and was weakened and near death from the radiation (never mind the cancer) when Dr. Gerson first saw her. Knowing his feelings on radiation we can only guess what he thought as he examined her. Even in his eyes her cure must have been miraculous.

Case #18 was discovered quite by accident by Gerson Institute staff exactly thirtyone years to the day after he had first gone to Dr. Gerson. W.S. is alive and well, a lighting designer in Cincinnati, Ohio. He was treated by Gerson for a poorly differentiated lymphocytic lymphoma which had been operated, radiated, and had recurred. With conventional treatment approximately half of the victims of this disease live five years, and all suffer a relapse after which the progress of the disease is relentless. W.S.'s case is a very important thirtytwo year survival and an obvious cure.

We also heard from the son of case #23. You perhaps recall the X-rays of this dramatic case, a cancer of the thigh bone which was destroyed, broken, and held together with a metal plate. This was so completely healed by the Gerson therapy that the metal could be removed. (The bone, as it mended, became so strong that it shattered the metal pins which secured it to the plate.) Unfortunately, the lady passed away in 1983, at age 76, and we did not know about her in time to videotape and interview her as we have done with other Gerson patients we have found.

RECENT DRAMA AT LA GLORIA HOSPITAL

The number of "cured incurables" is growing all the time. Yet we are frequently surprised and delighted to have dramatic results in exceptionally difficult cases. I should like to share some of these histories with you. I think you will be proud to be a member of the Gerson Institute which, through its work, has made these miracles possible. Note that these are not all cancer cases.

Case #1. D.E., age 21, juvenile diabetes. This young man had suffered from diabetes since age seven and had been on insulin for fourteen years. By the time he

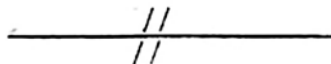
came to La Gloria he had serious problems: constant pain in the kidneys. His kidneys were damaged to the point where his physicians back home told him that he would need dialysis within one year. He also had very high blood pressure even with medication. His bladder would function only with drug stimulation (he could tell when he needed to urinate only by an increase in pain in his kidneys). His physicians told him that his bladder had to be removed. His ophthalmologist found a 40% decrease in his eyesight and said this was "irreversible damage". He had lost color perception and faced blindness within two years. He was also bloated with edema and frightened.

Within three weeks at La Gloria his eyesight improved and some color vision returned; his kidney pain disappeared and his bladder functioned normally. His edema nearly disappeared and his blood pressure came close to normal. After six weeks on the Gerson Therapy, he was re-examined by his ophthalmologist who found his eyes virtually normal (the "irreversible damage" reversed), blood pressure normal, edema gone, insulin requirements down to 33% of pre-Gerson Therapy level, kidneys functioning normally. Recently this patient told Gerson Institute staff that he is planning to bicycle cross-country!

Case #2. S.W., 61, kidney cancer. Admitted to La Gloria in near coma, almost unable to keep eyes open, total daily urine output 100cc (less than 4 oz). One kidney was not functioning, the other seriously damaged. Physician told his son, "Let him die". His blood chemistry was frightening: BUN 169 (norm 6-27), creatinine 19.1 (norm 0.7-1.6) so high that La Gloria M.D.s agreed they had never seen such a patient survive with almost total loss of kidney function, uric acid 15.7 (norm 3.4-7.2) and he was slipping into a coma. At first he was only able to take partial juices and soups, but within two days his creatinine had dropped four points to 15.2, his uric acid was down to 13.2, and his urine output had increased to 600cc (20 oz). By the seventh day his creatinine was 3.1, normal; uric acid 6.9, normal; urine output close to two quarts! This patient was not cured in one week, but his recovery was miraculous since he was dying when admitted.

Case #3. S.M., 3½ years old. This delightful boy had severe kidney dysfunction, nephrotic syndrome, which had not responded to conventional steroid treatment. Scar tissue was replacing normal kidney tissue. He was admitted to La Gloria Hospital on prednisone with ascites, belly very distended. Within three weeks, for the first time since his diagnosis eleven months earlier he had no symptoms, his abdomen was down and his appetite was good. This little boy was impressed with his new diet and promised never to eat junk food again!

Case #4. R.W., 57. This patient had a history of alcohol abuse and was admitted with symptoms of liver cirrhosis: ascites (fluid in abdomen), fluid in lungs, difficulty breathing. He was given diuretics (lasix) by his home physician but was not given hope for recovery as advanced liver cirrhosis is usually fatal. He was given polarizing GKI intravenous solution with full Gerson Therapy and his response was so strong (fluid cleared from lungs and abdomen decreased) that after only five days he decided to go home to carry on by himself (against his doctors advise).



FAST FACT: 75% of your body, by weight, is oxygen. 80% of the fruits and vegetables you eat, by weight, is oxygen.

FRESH LIVER ANYWHERE IN THE U.S.

Utica Veal is the nation's largest processor of veal. Mr. Frank Broccoli, the owner, has taken a personal interest in the welfare of Gerson Therapy patients. He sees to it that livers are from very young and healthy veal and are hand-selected, bagged, and iced within minutes of slaughter. This is the best handling and highest quality liver we are currently aware of. Utica Veal of Utica, New York will ship 6 pounds of veal liver on ice by United Parcel Service "NEXT DAY AIR" to anywhere in the U.S. served by U.P.S. for a maximum of \$22. airfreight. Cost of the liver is \$1.50 per pound. Call Frank Broccoli, (315) 797-1370.

NEW BOOKS

Aside from the books on our regular book list, we constantly search for new information for our members and friends. Some of these new books now on hand are:

THE NEW HEALTH REVOLUTION, by Ross Horne.
337 pages, soft cover. \$9.95

This book presents overwhelming evidence of damage done by eating fats. Graphic presentation is easy to understand for laymen and thoroughly convincing. For non-cancer patients, one of the best guides for renewed health as well as prevention of circulatory and heart disease, diabetes, etc.

FLUORIDE: THE AGING FACTOR, by John Yiamouyiannis
210 pages, hard cover. \$11.95

Complete research on water fluoridation with disturbing reports about establishment tactics. Information about damage done to teeth, bones, premature aging, arthritis, cancer and death - all caused by this 'public health hazard' (per Pittsburgh Judge Flaherty). A must for everyone, especially parents who let their children use fluoridated toothpaste, fluoride dental treatments, supplements or fluoridated drinking water.

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THE GOLDEN SEVEN PLUS ONE, by C. Samuel West,
316 pages, hard cover. \$19.95.

Excellent presentation of the importance of activating the lymphatic circulation. Cause and relief of pain, paralysis, M.S., circulatory problems, etc. through the use of rebounding, "lymphasizing". Exact directions given have helped many to overcome their problems.

POTTENGER'S CATS - A study in nutrition, by Francis M. Pottenger, Jr., M.D.
126 pages, \$5.95.

This fascinating study shows how cats responded when their foods were heat damaged; their degeneration and diseases while on heated or cooked foods; their healing when returned to raw foods. There is much evidence of degenerative changes in people who eat cooked rather than raw foods.

I FOUGHT LEUKEMIA AND WON! by Rex Eyre
54 pages, soft cover. \$2.50

Rex was the first patient who was admitted to La Gloria Hospital the day it opened in 1977. He describes the background and development of his illness, his experiences on the Gerson Therapy and his total recovery. Easy to read, in simple language.

NEW ORGANIC FOOD SOURCES

Some of our friends and former patients have been able to locate good sources of organic foods and would like to share this information with our readers.

Organic vegetables - all Gerson supplies available:

Leonard's Eco Farms
181 Post Road West
Westport, CN 06880
(203) 226-5233

Some organic vegetables available - some not - clearly marked:

Mothers Market & Kitchen
225 E. 17th St.
Costa Mesa, Ca. 92627
(714) 631-4741

Dealer in organic vegetables:

Rising Sun Community Services
P.O. Box 627
Milesburg, PA 16853
(814) 355-9850

Wholesale Distributor:
Organic Farms, Inc.
10714 Hanna St.
Beltsville, MD 20705
(301) 595-5151

WARNING:

The California Dept. of Health Services has conducted several investigations regarding produce shipped by West Valley Produce Co. Several times, West Valley packaged commercial produce in bags marked "organic". Please avoid this shipper unless their name can be cleared.

National news**CAN DIET CUT CANCER?****Apple a day may do more than keep doctors away**

DAYTONA BEACH, Fla. (AP) — Women eating 20 or more servings of fruit or vegetables a week cut their risk of mouth and throat cancers in half, according to a new study by the National Cancer Institute.

Those cancers will strike an estimated 8,800 women and 18,700 men and cause about 9,350 deaths this year, according to the American Cancer Society.

The study of 227 women in North Carolina, which has among the highest rates of oral cancer and cancer of the pharynx in the country, also found that women consuming moderate amounts of fruit and vegetables, 11 to 20 servings each week, cut their risk by 35 percent.

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