

# JEK A T J Season Joseph Jose

VOLUME II. NUMBER 6

# An Excerpt from Dr. Max

Giuliano Dego s upcoming novel

In our last two issues, Healing introduced its readers to the Italian writer Giuliano Dego and published an excerpt from Doctor Max, his monumental biographical novel (767 pages), centered on the life and work of Dr. Max Gerson.

This month, as promised, we continue previewing the book and, in view of its approaching publication, are making a special pre-publication offer to members and friends. (See pre-publication order form on p. 9)

#### BOOK THREE

What's Waiting For Them Over There?

Shadows in the snow

The night of December 16, 1916, the moon was full above the ancient city of Breslau.

That second winter of the great war had been extremely harsh in East Prussia. Over the Oder and the fertile plains of Lower Silesia Siberian winds reached sixty miles an hour. They

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# Alternative Medicine Debate Heats Up

... Lead Articles in Major Media

by Howard Straus

Recently, there have been front page or feature articles on alternative medicine in the New York Times, Scientific American, Life magazine, and a special issue of Time magazine. Hugh Downs' television magazine, Turning Point, did an entire show on the subject. Newspaper after newspaper, driven by the manifest interest of the American public in Complimentary and Alternative Medicine (CAM), are doing articles on various aspects of the subject, from the debate itself to whether and how far insurance companies will cover these modalities.

The fact that many of these articles are negative, often uncritically parroting the party line of the NCL does not detract from the fact that they are being written, time and public attention is being focused on the issue, and people are being asked to think about it. An often-quoted figure that is published is that Complimentary and Alternative Therapies account for over half of all the health care visits in this country, as they have for four or five years. Another is that

Americans spend some \$14 billion annually on these treatments. What is less-often quoted is the other figure: that half of all medical visits made to traditional physicians costs us approximately \$1 Trillion, or some 70 times as much as the CAM visits, on the average. It is also interesting that most alternative medical approaches are not covered by insurance companies, so patients must pay for these visits out of their own pockets. This shows a certain measure of satisfaction with what patients are getting from their practitioners. No matter how much propaganda the medical establishment puts out, it cannot hide the fact that people like the service they are receiving from alternative providers. On the contrary, the more articles appear that contradict what people's experience shows them, the less credible the information coming from the advertising-dependent print and broadcast media will be, and the more it sounds like propaganda.

Even the negative articles and pro-

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#### Alternative Debate ...

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grams that appear contain germs of truth that almost unintentionally show the weakness of the criticisms they attempt to level. The point that many articles try to make is that alternatives are unproven, untested, dangerous and ineffective, compared to conventional, technological and drug-oriented medical care. But they contain quotes like one from the Associated Press article, titled HMOs Begin to Cover Alternative Medicine (Oct. 7, 1996). "... There is a tendency for people that like holistic cures to generally be healthier people, so they are more attractive patients for HMOs," attributed to Randall Huyser, an HMO industry analyst. Huyser continues, "Often [nontraditional treatments can be less expensive than traditional health care, especially if you can avoid hospitalization."

Questions arise immediately, but they are never addressed in the article. If good health is the final goal of "Health Care," and people interested in, and presumably using, holistic therapies are generally healthier people, why are "conventional" physicians so negative about these treatments? Also, if these methods help people to avoid expensive hospitalization, in the era of shrinking budgets and ballooning deficits, shouldn't they be given more serious consideration by our government, insurance and medical establishments? It seems that the financial analysts have seen the bottom line far more clearly than the doctors and our governmental agen-

# **Publication Schedule**

The Gerson Healing Newsletter is published bi-monthly by the Gerson Institute. It is our membership organ, and is intended to keep our members informed of health issues surrounding the Gerson Therapy, including political developments, case histories, clinical notes and recent literature having a bearing on nutrition and health.

Members receive the Gerson Healing Newsletter six times a year. You can become a member of the Gerson Institute simply by making a taxdeductible contribution of \$25.00 or more (foreign memberships \$30.00) to The Gerson Institute. cies.

Time magazine published a special issue in Fall, 1996, titled The Frontiers of Medicine, purporting to be an analysis of the current state of medical art, its miracles and shortcomings, and why we should have great confidence in its future. The real thrust of the issue, however, becomes very clear, when the advertisements were counted. GlaxoWellcome, a huge drug manufacturer, had 26 full pages of four color advertising out of the 90page issue (29% of the entire issue), including the inside front cover and the inside and outside back covers. The Time magazine special issue, in fact, appeared to be a GlaxoWellcome advertising brochure, thinly disguised as objective journalism.

In the light of this heavyhanded corporate sponsorship, it is not surprising that the obligatory article on alternative therapies is an example of those that cluck at the fact that Americans spend \$14 billion annually on alternative medicine, without a mention about the \$1 trillion a year we spend on conventional medicine.

#### Positive notes creep through

To an attentive reader or observer, it soon becomes clear that even the negative articles contain many statements that indicate patients' satisfaction with alternative therapies, and their dissatisfaction with conventional medicine. Attempts to discount these sound more and more like the current version of doublespeak, "spin doctoring". Patients who are interviewed most often express satisfaction with their therapy choices, even when the interviewer tries to get them to doubt their decisions. They insist that they are happy with the treatments they get, even when the purveyor of the therapy is a "fugitive from justice", as was one of the clinic directors interviewed by Hugh Downs on Turning Point. How has confidence in American medicine fallen so far that patients are more satisfied with an expatriate fugitive's unknown, untested and unexplained treatment than they are with the "finest" of technological and chemical therapies available here?

Time magazine says, "Many [Americans] are concerned that their suffering has not been alleviated by standard medical or surgical treatment, or that the traditional treatments themselves are too expensive and often dangerous. Others feel that the intrusion of increasingly complicated and impersonal technology has widened the gap between mainstream caregivers and patients. Too many doctors are thought to be coolly professional and emotionally distant, inclined to cure a specific disorder narrowmindedly without comforting or caring."

This is an understatement. The patients who choose to leave the country, risking their lives on treatments that represent their last hopes have generally been treated not with cool professionalism, but with cold arrogance. They have not been "narrowmindedly cured", if they had been cured at all, they would not be seeking treatment far abroad. More likely, the massive and manifest failure of conventional and technological medicine to address the most common killers of our time is driving large numbers of the American public to seek treatment at their own expense from alternative practitioners, despite the direst warnings of the medical and governmental authorities and millions of advertising dollars. Those in the medical professions who continue their blind and mindless resistance to the kind of treatment that their patients want, will simply be left behind in their empty hospitals, fussing over idle and expensive, but useless machinery. It is time for the medical establishment to look seriously at alternative and complementary therapies, without the automatic negative bias of the past. There are very good reasons for caution when evaluating new therapies, but they should nonetheless be openmindedly evaluat-

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GERSON

# HEALING

NEWSLETTER

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# **Editor's Corner**

... Election Rhetoric

by Howard Straus

In this election year, our national drug policy has, once again, been called into question, and with good reason. We see the streets of our inner cities taken over by drug dealers, many of them still children, wielding automatic weapons and cellular telephones. The traffic in the neighborhoods reflects the high prices that the addictive drugs command, and the constant staccato of gunfire at night reminds us ever of the high price in death and injury that the drug traffic imposes on the most innocent of bystanders — the young casualties of stray bullets.

Both our incumbent president and his challenger have been criticizing each others' approaches to the problem. The incumbent president defends his dedication to education and law enforcement. "Just Say NO!", we urge our schoolchildren, and imprison those who don't. The challenger points accusingly at the drug use statistics that have risen somewhat during the current administration, and claims that his program of ever more Federal prisons and more draconian enforcement would solve the problem.

When either of these politicians decry "drug" use, however, each has in mind the illegal "recreational" and "hard" drugs used by our children in the streets: marijuana, crack, cocaine, heroin. Neither of them has included in the debate the worst drug problems in our country, by far.

Conservative estimates blame up to ten percent (10%) of the medical costs in the United States on the use of tobacco products. A pulmonary specialist who called in to a talk radio program recently pooh-pooh-ed the figure as being ridiculously low, estimating that tobacco-related complications from otherwise easily handled injuries and illnesses triple the direct costs, putting the number closer to 30%.

The challenger, belonging to the party that receives the lion's share of tobacco industry contributions, has not only told us that he doesn't believe that tobacco is really addictive to everyone, has even impugned the integrity of one of the few voices who has spoken out about the problem.

Dr. C. Everett Koop, former Surgeon General under Ronald Reagan, testified in hearings that nicotine was more addictive than cocaine or heroin. Tobacco use is rising among our children, who will be unable, for the large part, to kick the habit later in life. If either of these two men would like to reduce the Federal deficit, a very serious campaign to eliminate tobacco use would be a really effective place to start.

Probably the most serious drug problem in the United States, however, is neither tobacco nor heroin, not crack or cocaine. It is our legal and constant companion, alcohol. To understand the magnitude of the alcohol problem in our land, reflect on the fact that about half of all traffic deaths and injuries involve a driver who has been drinking. Half of all violent crime and half of all property crime is committed by a perpetrator who is under the influence of alcohol. Yet, as the parent of a teenager, I have actually heard other parents express relief that their child was only using alcohol, not marijuana or crack!

Education is not the answer, either. Dr. Harold Reis, a naturopathic doctor from Florida, reports that nearly half of the children in one local school district are on Ritalin®, a drug used to treat attention and behavioral disorders. How on Earth are we going to be able to convince our schoolchildren to "Just Say NO" when their schools are the organizations demanding that they take psychoactive drugs in the first place?

Children are very sensitive to hypocrisy, and this issue is rife with it. Controlled studies done in Washington state with two groups of schoolchildren, one of which was given the maximum educational exposure to antidrug materials, and the other of which received none, revealed little, if any difference in drug use between the two groups.

To both candidates, we would urge: "Get these truly dangerous drugs off the streets, or at least make their purveyors pay the actual societal price for their use. Stop kowtowing to the liquor and tobacco industries. Start owning up to the fact that these drugs, though legal, are deadly and expensive to our culture at large. And address the real cause of addiction, poor nutrition, if you want to do something for us all."

# Tax Giving Time is Here

... Help us, help yourself

by Howard Straus

As the end of the year approaches, the opportunities for tax-advantaged charitable donations for 1996 are rapidly coming to an end.

We would like to ask our friends to consider giving a "healthy" contribution to the Gerson Institute to help support the many new and continuing programs that we provide. Often, these services have saved the life or health of a loved one, a friend, an acquaintance.

With a relatively small, but dedicated staff, the Gerson Institute handles up to 300 telephone calls every day, helping people to connect with the lifesaving services of Gerson Treatment Centers. In the past year, our outreach program has enabled us to appear on dozens of radio and television interviews, present lectures in some 20 cities in the United States, Canada, England, and Germany, send out thousands of books, newsletters and videotapes, plus tens of thousands of informational brochures. We have produced a series of Public Service Announcements (PSAs) that regularly appear on television stations in and around the cities where we will appear. We are also pursuing a cooperative program with a group in the Western Pacific rim for representation in Asia.

The Institute has begun an educational program for health care professionals that will lead to certification as Gerson. Therapy care providers, as well as a program for lay people who want to learn how to support a Gerson patient at home. We have also been actively pursuing the possibility of opening a U. S. Gerson facility.

All of these activities take time, enormous effort, and, always, funds. You may be assured that the Gerson Institute will continue to use your contributions in as efficient a way as we possibly can. Please support us generously in our vital efforts to bring the Gerson Therapy to the mainstream of medical knowledge, and give yourself a tax break, as well.

#### Doctor Max ...

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engulfed the narrow streets of the old city, shuddered around grim or grotesque statues in snowy mantles, blended with the lament of an organ swelling through the stained glass windows of the cathedral of St. John the Baptist.

Toward 7 oclock, two men clad in military uniforms, carrying a leather briefcase and a box, stepped stealthily from the long, anonymous facade of the university.

Trudging through the snow, they crossed the Messergasse and plunged into the maze of streets in the medieval city.

Anyone traversing those alleys in peacetime would have admired the variety of stone and wood buildings— a veritable showcase of German Gothic architecture. Now, however, the shadows cast by that tall mass of houses prevented the two pedestrians from distinguishing anything but black rooftop crenellations.

Staggering over pavements, feeling their way along, their noses up and ears straining, the two proceeded in a southerly direction.

Where were they directed that wartime night, clumsy, numb beneath long capes blown apart by icy winds, slinking along hostile walls the very moon refused to light?

They leapt over snow drifts, passed still more intricate lanes, crossroads and alleys, often retracing their steps, scanning street signs.

Finally, after exploring what the beautiful Latin language of cartography calls tota via, cheminum et viaria, the odd couple left ancient oak portals and worm-eaten hovel doors behind them.

The medieval symphony of wood and stone dissolved. Towers, spires, pinnacles, gables, loggias, windows of every shape and size and numberless overlapping rooftops gave way to balconied villas. The moon, still low on the horizon, broke up the widening streets into patches of light and darkness. Our hikers could now keep to the shadows and see what went on in the light.

Few passersby hurried past, anxious to arrive home. The coffee bars, beer halls, meeting places and pleasure houses that had made the pre-war fame of Breslau, episcopal seat and historic capitol of Lower Silesia, were now deserted. Indeed the whole city seemed dead, clad in its white shroud of snow.

They crossed the ancient moat and entered the semi-circle of the new town.

Interspersed with more gardens, avenues and squares surrounded by liberty-style villas, this area was soon followed by a broad plain, cobbled with crops and punctuated by factories.

"How much farther?" nervously wondered the shorter of the pair, a bald, bearded lieutenant in his late thirties, with stooped shoulders and dark, prominent eyes.

"In Germany, they'll write, essential foodstuffs were lacking. Meat, butter, flour were scarce. Salt had disappeared altogether.

"We lack alcohol and tobacco, too, bread is the color of boots, we live on sugar beet ... yet in the entire country, overall health has greatly improved."

"How would I know? I never cared much for such places."

The man who had just spoken, a tall, broad-shouldered captain of the German Imperial Army, might have possessed an easy, athletic stride in a less snowy landscape. Now, trudging on, he extended his arm in the direction of an invisible point beyond the suburbs. "Three quarters of an hour, I'd guess."

Near the industrial zone, a few students engaged in a snowball fight spotted them. "There, look! Don Quixote and Sancho Panza."

One of the boys threw a snowball, and the lieutenant lurched forward.

"Don't!" The captain placed a restraining hand on his shoulder. "They might report a curious encounter in town."

He pointed to the box swinging at the end of his comrade's outstretched arm.

A zinc box, the kind used by fishvendors, it shone dimly in the moonlight. As the bells of St. John the Baptist's struck 8 o'clock, they rounded the Melanchton railway factory. The last suburban homes were now behind them.

Cloaked arms held out, they navigated the ice, moving past large enclosures where spiked fences surrounded allotments or industrial stores.

Alongside the Marienbad textile factory a rut was pressed in the snow between a thick high wall and the embankment of a rail line for coal wagons. It looked ominous, and before stepping into it they glanced over their shoulders.

Nothing. The plain harbored but formless shadows. No sign of life. Yet, taller than the tall captain, and no less spectral, gripping a long object hastily wrapped in newspapers, a third character had turned into Blucherplatz, and with long, sweeping strides was trying to catch up.

Meantime the pair had advanced to a point where the wall ended and the rut forked.

Without hesitation they directed their steps left. They followed the rail escarpment for a hundred yards, then cut through the vegetable plot.

In the distance, behind a screen of pillared trees, they could now make out a squat square tower and the high walls of an enclosure rising from the undergrowth.

They exchanged a nod, as if it say, "That's it!" Then the captain indicated he intended to take stock. With precise strokes he brushed the snow from a rotting tree stump and sat down.

The nervous one blew his nose, stuck his chest out and began stamping his feet.

He clapped his hands twice under his armpits, then picked up the box and pointed to the walls. "How long do you reckon it will take?"

"Why, it's about a quarter of a mile,

"No, I mean, how long will it take to..." The lieutenant mimed the act of pounding with a hammer and chisel. He accompanied his performance with a clucking, complicitous laugh.

"Depends on what the night watchman is doing. Altenwasser."

Abruptly, the lieutenant stopped miming.

He lifted his cap, rubbed his hand-

# Soy Products Followup

... We See Some Terrible Effects

by Charlotte Gerson

In our last issue of the Gerson Healing Newsletter, Vol. 11, No. 5, we presented important information about the dangers of eating soy products. We are beginning to see how very important this article was, especially in view of how many people we are seeing who have been seriously damaged by eating soy products.

One patient at the Gerson hospital was not suffering from cancer, but was in deplorable condition. She was in her middle forties and was deeply disturbed about her many health problems. "I don't understand why I am so sick. I have been a vegetarian for over 10 years", she complained. Upon further questioning, and since we had just completed our research for the article about the dangers of soy products, she confirmed that she had been consuming a very large proportion of her food in the form of soy products: tofu, soy milk, soy cheese, etc. She was suffering from severe osteoporosis with pain in most of her bones; she had many allergies and infections. (both stem from immune deficiency), she was anemic and had no energy, had sleeping problems and more. All these difficulties could be ascribed to her inability to absorb nutrients, the very problems caused by soy products: blocked absorption of minerals, vitamins and enzymes.

This patient responded rapidly and beautifully to the Gerson™ Therapy with the high nutrient content of the 13 juices and organic meals, now easily absorbed and assimilated since she no longer blocked her system with the toxic soy.

Another patient was a long-term recovered "Gerson person". Carl K. originally came to the Gerson Therapy hospital suffering from widespread melanoma. All his tumors disappeared rather rapidly — except one. After many months on strict Gerson Therapy, that one tumor was still very much in evidence, loose and movable, but present. Finally, after almost a year, Carl had that tumor removed surgically. It was easy: a small incision in the skin of his leg and the tumor lifted right out. It was encapsulated and not attached. Carl has been well ever since and said that he had not seen a doctor in 14 years.

Just this week, we had a call from him; he has begun to have new problems. He has pressure pain in his buttocks, first in his left one, then running up his leg toward his pelvis, then the other buttock also hurt, but only when he is sitting. X-rays and scans didn't show anything. But his blood test was surprising: he had a choles-terol level of 210. Worse, his urinalysis showed ketones — kidney damage. I could only guess that he had gone off the therapy and was eating excess meat or cheese. But, as it turned out, he didn't do that, he had remained on a vegetarian diet. However, on further questioning, he said that he was taking fairly large amounts of soy protein supplements as well as consuming tofu and other soy products! Worse, though he is still a member of the Gerson Institute receives our Healing Newsletter, he admitted that he had not read the last issue, and didn't realize that soy products were dangerous. But he promised to change his ways.

I hope and trust that most of our members do read the Newsletters and that our warnings are not in vain. Our recovered patients are some of our most valuable assets; we are very upset when they get into new trouble.

On my recent trip to Seneca Falls, to the New York Chiropractic College, there was another situation almost certainly caused by soy products. very nice lady, a student at the college who had already done a good deal of nutrition counseling, offered to drive me back to the airport in Syracuse, almost an hour's drive. I was rather uneasy when I studied her appearance. She was pale, with almost sunken eyes, saflow skin tightly drawn across her cheekbones. I also hesitated to confront her with my concerns about her health, but I did ask her: "Are you healthy?" Then she told me her story: she is four and a half months pregnant, generally vegetarian, but ... she eats a good deal of tofu and other soy products! She actually seemed to be starving, so I had to assume that the soy products were blocking her nutrient absorption. I supplied her with our last Healing Newsletter and urged her to cut out all soy products immediately.

# Gerson<sup>®</sup> Therapy at Home

... Hard, but it can be done

by Charlotte Gerson

We are well aware that many patients are unable to travel to Mexico for financial or family reasons. To help as many of these people as we can, we have created *The Gerson Therapy Primer*, videotapes showing Gerson food preparation and a workshop *How to do the Gerson Therapy at Home*. Hard as it seems, without expert help or encouragement, with so many directions of "dos" and "don'ts", we know that many of these patients are also "winners", and make it!

One such case illustrates my point. Pat Cockfield, of Queensland, Australia was exceptionally severely ill, and struggled for some eight months before she really saw improvements — yet she stayed on the Therapy with her husband's devoted help — and won.

Pat underwent a left radical nephrectomy (operation for removal of her kidney) for adenocarcinoma of the kidney. During pre-operative investigation, including ultrasound scanning, these demonstrated "what appeared to be secondaries in the liver — with an oval mass in the right lobe approximately 6 cm in the long diameter."

Pat takes up her own story. "I was bedridden, skin and bone, terribly jaundiced when my husband helped me begin my Therapy. My left kidney was removed in October 1993. By February, '94 I had deteriorated so much and had been told that the cancer had spread to the liver that I was not offered any treatment. I was just given a prescription for morphine and told to go home and try to make the best of what time I had left. My son Wayne was called home from overseas and my family were told: 'No hope; it is only a matter of time! (I had nursed cancer patients myself when I was nursing — and chemotherapy or radiation wasn't for me.)

"I guess eight months does seem a long time without improvement. I felt so deathly ill, yet my husband says,

# **Healthy Holiday Feasting**

... Eat, Enjoy, and Stay Healthy

by Charlotte Gerson and the British Gerson Support Group

There is a wonderful Gerson Support Group in England. This group, consisting of many former (cured) and current Gerson patients, helps and supports new patients with supply sources, information and even with excellent recipes. Their publication is called (appropriately) Coffee 'N' Carrots: A Newsletter for Gerson People by Gerson People. We are indebted to this group and their newsletter for the following Holiday Feasting Recipes, a regular holiday feature. It is important to us that the impetus to celebrate and have festive meals and gatherings during the holiday season does not negatively impact the health of our members, and especially our patients.

#### Holiday Menu for Four

- · Fruity winter salad
- Tomato and mint soup
- Sweet potato and apple bake
- Cooked creamed beets
- Brussels sprouts
- · Apple cake with maple yogurt

# Truity Winter Salad

1/2 white cabbage

2 medium carrots

2 red eating apples

1 oz. raisins

I oz. dried figs

I oz dried apricots

10 Thsp. non-fat yogurt

1½ lemon

chopped parsley

Combine finely shredded cabbage, coarsely grated carrots, coarsely grated apples with the raisins, figs and approots (soaked overnight) in a dish. Combine the yogurt, lemon juice and parsley in a jug and spoon over the salad. Toss together until well mixed and chill before serving.

# Jomalo and mint soup

2 lbs. tomatoes (Roma preferred)

5 green onions (scallions)

2 small cooking apples

5 Theps. cider vinegar

I tsp. brown sugar

2 large lemons

200g (6 - 8 oz.) nonfat yogurt (optional)

6 - 8 sprigs fresh mint

Chop tomatoes, slice spring onions, core and slice apple. Put these into a saucepan with the cider vinegar and sugar. Bring to a boil and simmer gently for 30 minutes. Put through food mill.

Either leave to cool, adding last ingredients later, or add the lemon juice and beat in the yogurt immediately. Just before serving, add the chopped mint, leaving some scattered over the top of the soup for decoration.

Makes 4 generous or 6 small servings.

# Sweet potato and apple bake

12 oz. sweet potatoes 3 eating apples allspice little brown sugar little water

Cook the sweet potatoes gently in their skins until tender. Allow to cool. Slice and put into baking dish with alternative layers of apple. Over each layer, sprinkle some water, a little sugar and some allspice. Bake covered for 20 minutes at 350°, then remove cover and bake further 10 minutes.

# Cooked Creamed Beels

3 cooked beets

6 Thsp. non-fat yogurt

1 Thsp. fresh snipped chives

2 Thep. finely chopped onion finely chopped parsley

Put cooked chopped beets into a saucepan with the yogurt, chives and onion and heat gently. Put into serving dish and sprinkle with chopped parsley.

# Apple Cake with Maple Yogurt

11/2 lb. cooking apples

1 lemon

1 oz. rolled oats

I oz oatmeal

2 oz. sultanas or raisins

4 oz. sugar

4 oz. wholewheat flour

1 teaspoon potassium baking powder

1/2 cup fresh apple juice Yogurt and maple syrup

Put chopped peeled apples into a large bowl and sprinkle with lemon juice. Combine rolled oats, oatmeal, raisins, sugar, flour and baking powder and mix well. Stir this mixture into the apples. Pour mixture into cake pan and bake at 350° for 20 - 35 minutes or until lightly browned on top.

Serve with yogurt mixed with 1 - 2 Tbsp. maple syrup.

The Brussels Sprouts may be prepared in the manner that you usually prepare Gerson Therapy vegetables, i. e.; boil them over a very low heat in their own juices until the liquid has evaporated.

If you are a new British Gerson patient, be sure to contact the Gerson Support Group and become a member. Miss Rysia Ziendalski, 17 Pheasant Close, Winnersh, Berkshire, RG41 5LS. Subscriptions: £10. for one year, four issues. Back issues £2.50 ea. Checks payable to Gerson Support Group.

# From the Convention Circuit

... We find another of Dr Gerson's patients

by Charlotte Gerson

At the end of September, 1996, I had the great pleasure of visiting the New York Chiropractic College. I was invited to address the faculty and students, discussing the Gerson Therapy. The following day, I did the usual lecture and workshop for the public.

I received a warm reception, and thank the students and faculty for their help. I was deeply impressed by the magnificent campus, set among rolling green hills, studded with beautiful, majestic trees. The light, airy buildings are situated along one of New York's extensive finger lakes. There is a feeling of peace and beauty, very conducive to study and meditation.

I received great joy from the testi-

monial of one of the members of the audience. This gentleman introduced himself as the nephew of one of the 50 cases (Case #18) Dr. Gerson described in A Cancer Therapy.

William Schickel. at age 32 was a struggling artist with a young family, three small children, the youngest a baby, and a 22 year old wife. He had been diagnosed with inoperable, widespread retroperitoneal lymphoma. Radiation

was not an option, and he was literally sent home with perhaps two months to live. Bill's wife, Mary, found an article in a magazine on organic gardening in which she read that Dr. Gerson was curing cancer by diet. Following a pilgrimage to the shrine of the Blessed Philippine Duschene, their decision was made: they would go to see Dr. Gerson in New York City.

They arrived in the spring of 1950 from their home in Loveland, Ohio. After numerous tests, Dr. Gerson felt that Bill had perhaps a 30% chance of recovery on the nutritional therapy.

Bill was surprised that, in spite of the quiet elegance of a Park Avenue office, Dr. Gerson's fees were "very modest". Gerson also told Bill that he would not cure him but that his reactivated defenses, his body would work to heal him.

Struggling physically and financially to follow this demanding treatment, but with nothing to lose, Bill reports that he felt better within a few weeks. He received no other treatment.

Bill writes that in 1983 he looked back on "33 years, eight children, twelve grandchildren, and a wonderful productive life". In September, 1996 (46 years after his prognosis of 'two months'), Bill and his wife Mary beam from the cover of St. Anthony's

Messenger, inside of which is the inspiring story of Bills activities. He is a famous artist, designs and builds churches, church art and stained glass windows. assisted by his sons and daughter Martha in his art studio. Bill won national honors for his interior design and artwork for the new St. Mary's Church in St. Clairsville, Ohio. Some years ago, he also had an art

show in San Diego which I was proud to visit. Now 77, Bill works full time with his family in his studio. When I spoke to him to ask permission to publish this story, I could hear the energy and enthusiasm in his strong voice. His story is copyrighted and he expects to publish it sometime in the future.

We are grateful to Dr. Gerson for having given this creative, prolific and talented artist the chance to live a long, healthy and productive life, and make his quite significant contribution to the world.



Bill Schickel
Photo by Brad Smith

# Alternative Debate ...

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ed.

There are encouraging signs, however, that even the most conservative quarters are sitting up and taking notice. Dr. Wayne B. Jonas, head of the Office of Alternative Medicine (OAM) of the NIH, pointed us to a list of some 50 courses in alternative modalities now being offered by the most prestigious medical schools, including Harvard, Stanford University and Columbia. Dr. Jonas, an M. D. also trained as a Naturopath, has for years been advocating the teaching of alternative practice in medical schools.

For many years, we at the Gerson Institute have felt like we were "behind the 8-ball", struggling against major economic and social forces to protect and repair the health of those who had been failed by their medical and governmental agencies. It seemed as if we were in imminent danger of being crushed. But in the last 12 to 18 months, we have felt a real change in the attitude of the population as a whole. We have begun to feel as if we are at the crest of a wave, riding the upwelling of interest in complementary and alternative medicine that has appeared from the grassroots. We feel that we have been a part of the cause of this interest, with the generous and constant help of our members, our patients and supporters, and the dedicated staff of the Gerson Institute.

Max Gerson's work and its scientific underpinnings have been confirmed in nearly 400 articles in peer-reviewed journals over the past 60 years, making it the most thoroughly documented, reliable and consistent alternative approach in existence. In addition to Dr. Gerson's work, dedicated physicians trained by the Gerson Institute, have continued to successfully treat patients, extending and improving the therapy where appropriate and necessary to meet new challenges.

We are grateful that Dr. Gerson's work, and the work of many, many others who have braved the negativity of the medical and governmental establishments, is finally being recognized and taken seriously. Perhaps now we can help people by the millions rather than by the hundreds and thousands. That is our fervent wish.

# Practitioner's Training Program Scheduled for February 2-8, 1997

by Chip White

Our second Level I intensive training program for practitioners seeking certification in Gerson Therapy treatment methods will take place February 2nd through February 8th at the Lake San Marcos Resort in San Marcos, CA (near San Diego). Demand for the program has grown considerably since our first intensive training in July, 1996 (see article in Sep./Oct. 1996 Healing Newsletter.)

Taking suggestions from the first group of participants, we have scheduled more contact time with patients at the Gerson Hospital facility, and we have extended the program from 5½ to 6 full days. Also, in keeping with the clinical nature of the program, registration will be limited to licensed health care practitioners.

As before, the six-day curriculum will include clinical and practical instruction, detailed case histories and visits to the Gerson Hospital. Instructors will include Charlotte Gerson, Alicia Melendez, M.D., Luz María Bravo, M.D., Chip White, and Howard Straus. Beata Bishop, a recovered patient, psychotherapist, and author of A Time to Heal will speak on psychological issues and appropriate interventions with Gerson patients.

Details of the practitioner certification program are now being finalized. It will involve the Level I training, a clinical internship at a certified Gerson treatment center, supervised treatment of patients in the practitioner's local area, and a shorter Level II training, including skill assessment and knowledge evaluation. We anticipate the first certified practitioners will be available to treat patients by the third quarter of 1997.

Tuition cost for the training program includes six nights lodging and use of all facilities at the resort, 18 organic vegetarian Gerson meals with organic Gerson juices, a special 100 page Clinical Practitioner's Workbook available only to program participants, a complete set of Gerson books and videotapes, and one full day of Gerson juices (13 juices).

The tuition costs, including all of the above, are \$1750 to \$2650 (depending on housing preferences), but an early registration discount reduces fees by almost 20% for participants who register before December 13, 1996. There is also a work/study program with reduced fees for medical or other healthcare students.

An eight-page brochure describing the training program in detail is available from the Gerson Institute. If you are an interested health care practitioner, or know of one, please request a brochure from the Gerson Institute toll-free at 1-888-4-GERSON, (24 hours) or call 619-585-7600. (9:00 AM - 4:30 PM Pacific time, M-F)

#### Major New Book on Gerson Therapy Due 1st Quarter 1997

by Chip White

In addition to *Dr. Max*, the biographical novel you've been reading about in these pages for several months now, we are pleased to announce the publication of a completely new reference book for Gerson Therapy patients and companions.

Healing Cancer and Other

Degenerative Diseases: The Gerson™

Therapy is the first completely new book on the Gerson Therapy since Dr.

Gerson's original work was published in 1959. For the first time, patients and companions will have a single volume with complete resources and information on the practice of the Gerson Therapy, written in easy-to-understand language. In addition to the history and theory of the Gerson Therapy, the new book will be filled

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# **Coffee Corner**

... Preparing the Space

by Howard Straus

In the last issue of Healing, we described the optimum and convenient methods for making the coffee enema solution. In this issue, we will discuss equipment and location for making your "coffee break" a pleasant, relaxing, healing and cleansing experience.

#### Bag or bucket?

First, you must obtain the proper equipment with which to administer the coffee. There are many different pieces of gear that are specifically designed for the purpose of enemas, none of them elaborate, and most of them quite inexpensive. The simplest one is a disposable, one-quart plastic bucket with a plastic tube and simple pinch valve, the same as is used at our Mexican hospital, costing about \$4.00 from STAT, the suppliers in Mexico. These can be used for a while, then discarded when they cannot be easily or conveniently cleansed. It is probably a good idea to have one or two of these on hand even if you have other equipment for the times when you do the castor oil enema, since that solution makes the bucket rather difficult to clean.

Next is the well-known enemadouche-hot water bottle that is sold in most American drug stores for approximately \$12.00. You must be sure to obtain one with a tube, the proper (enema) nozzle, and a valve to shut off the flow of liquid. These bags come in several varieties: some are sealed at one end, so they can double as hot water bottles, others are open at the end opposite the tube, making for easier cleaning. We would recommend the latter model. Even these come in different varieties; find one with which you are comfortable.

Finally, there is the deluxe, high-end stainless steel hospital bucket. This device is very similar to the small plastic bucket, but will last a lifetime for the dedicated and regular (pardon the expression) coffee break person. This device runs about \$75.00 from hospital supply houses. The hose is surgical latex tubing, and is hooked to

# New Therapy Book ...

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with practical tips, common pitfalls and troubleshooting advice, specific information about treatment of over twenty different diseases using the Gerson therapy, the use of adjunctive therapies, surgery, radiation and chemotherapy, and commonly-asked questions and answers.

Written by Gerson Institute President Charlotte Gerson and Vice President of Client Services Chip White with assistance from experienced Gerson physicians Alicia Melendez, M.D. and Luz María Bravo, M.D., this book draws extensively on the twenty-plus years of clinical knowledge and experience gained at Gerson Therapy centers since the Gerson Institute was founded in 1976, as well as knowledge gained from refinements made to the Gerson Therapy by Max Gerson after publication of his book.

One of the most unique aspects of Healing Cancer is the design of the book as a "living document". Each copy will include a registration card which, when returned to the Gerson Institute, will register owners for our update service. On a periodic basis, we will issue updated pages to add to or replace pages in the book as we make additions or changes to the therapy.

**Please note:** The price of Beata Bishop's book, A Time to Heal, will increase to \$14.00 in the next printing. The publisher, Penguin Books, has raised the price, and we must pass this increase along.

# Doctor Max Prepublication Order Form

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Share the gift of health with someone you love ... a gift membership in The Gerson Institute beeps giving all year long!

#### Coffee Corner...

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a catheter by a transparent plastic connector. The catheter generally has a pinch valve to control the flow of fluid.

There is no need for any more elaborate equipment than this. The coffee enema is an extremely low-tech procedure, though it is one of the most important in the Therapy.

#### A warm, comfortable place

Now, prepare yourself a comfortable place to lie down for 20-30 minutes. That can mean your bathroom floor, covered by sufficient towels or padding to not be hard or cold, or some other place, preferably convenient to your toilet to be able to get there in a hurry in case you suddenly feel that you cannot hold the coffee due to some toxic pressure. Also, you should pick a place that can be easily cleaned in the case of the rare, but occasional accident.

Be sure that the place you pick is warm enough, and you will not be disturbed while you are "soaking". Get yourself a bath or beach towel to cover yourself while holding the coffee.

The husband of one of our patients made his wife an "enema bench" by covering, appropriately enough, a coffee table with a couple of inches of foam padding and naugahide, and adding a hook about 20" to 26" above the surface of the bench on which to hang the bucket or bag. The coffee table was just the right dimension for an enema bench.

Others have fitted a padded and covered plywood board onto their bathtubs, so that it could be easily installed and removed, when required.

The important part is that the place be comfortable, private, relaxing and conducive to healing. A reading light or abundant natural light for reading or keeping a journal is often pleasant. Remember, if you are on the Gerson Therapy, you will be in this space five times a day initially, less later, for a couple of years. Many Gerson Therapy patients find the "coffee break" the most pleasant, healing part of the therapy.

If approached with this attitude, your "coffee break" can be very akin to a frequent meditation period. This, in itself, can be a healing experience.

#### Doctor Max ...

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kerchief over his shiny scalp, and pointed his bulky nose at the distant walls like a weapon.

2

Altenwasser's colorful Baedeker of what should and should not be done, and his companion's considerate opinion on matters of coffins and salt.

"Forget the night watchman," he said. "If you can harvest the honey from the hive, I can keep you away from the old bear's clutches. Let me tell you what will happen. We'll arrive at bedtime when the old chap dozes. I'll wake him up, that being part of my job. You slip your rubbers on, fondle the instruments, go to the resting place. Perhaps the door is open. Perhaps it isn't. In that case, you'll whistle and I'll fingle some coins. He'll smack his lips at the sound. I'll get the key and you'll start plucking the feathers. In less than half an hour, or so, we should be able to make off with the specimen."

The captain looked straight at him and said nothing.

Altenwasser misunderstood his silence. "I wouldn't worry if I were you," he began. "The young lady's progenitors..."

"Ah yes, I would have liked to meet them."

"Meet them?"

"Yes, her parents. I'm not really at peace about that girl's death, you know? I would have liked to question them."

"Question them?"

"Yes, about their daughter's eating habits"

Even deeper melancholy now furrowed the captain's features.

Little white tufts dotted the fields. In the distance, all around the walled enclosure, the snow looked soft and solid beneath the moon.

In the half darkness of that unknown place, there followed a silence. Then the captain turned uneasily to Altenwasser.

"Historians won't forget this winter,"

"Sure, world wars such as the present one are no common occurrence."

"Not only because of that. In

Germany, they'll write, essential foodstuffs were lacking. Meat, butter, flour were scarce. Salt had disappeared altogether."

"We lack alcohol and tobacco, too, bread is the color of boots, we live on sugar beet and..."

"And in the entire country overall health has greatly improved, Altenwasser."

Curious about the statement, piqued at the interruption, the lieutenant jerked his head round. "Intriguing. All the same, if the word gets out that beets are the true medicine of man, the only ones to prosper will be the greengrocers. I mean, doctors will find themselves lined up with the unemployed on the banks of the Oder."

"People will still be run down by carriages, Altenwasser."

"With respect, captain, your words of defiance worry me stiff."

"Nevertheless, a doctor should only go by the evidence of his own eyes. He should never veil facts for fear of unpopularity."

Staring at the enclosure, the captain smiled sadly. Then he stood up and started walking.

Altenwasser shuffled into step with him. "What's the hurry?" he grunted. "The dead wait forever."

"It's not the dead that concern me." Both men struggled on in the snow.

"All the same, captain, since we are lucky enough to be dealing with them, I suppose everything will go right."

"Provided nothing goes wrong. God help us if it does!"

The captain turned to Altenwasser, and the moon shone full on his face.

Two clear blue eyes sparkled with an expression that made one think of childhood innocence.

Seeing the badge on the lapel of his cape, any German would have understood the man was a medical captain.

But readers who still recall the 1933 Berlin-Vienna Express might also have recognized in him Dr. Gerson.

"Doctor Max is a subtle mixture of a detailed, factual biography of Dr. Max Gerson and a fast-moving adventure story ... riveting enough to keep you reading well past your usual bedtime."

Beata Bishop, from the Penguin edition of A Time to Heal

#### Lecture Schedule ...

continued from page II

Location: to be announced. For more information, please call the Gerson Institute **2** (619) 585 7600.

A Gerson exhibit booth will offer Gerson Therepy Information, books and video tages

#### Los Angeles, CA

Monday, April 7th through Wednesday, April 9th, 1997

Gerson Therapy Home Care Assistant Training

A three-day course for people wishing to be trained in the provision of home care for Gerson Therapy patients.

Location: to be announced. For more information, please call the Gerson Institute **2** (619) 585 7600

#### Home Treatment ...

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after two weeks on full Therapy, he could see a slight improvement, which gave him hope and faith. He studied Dr. Gerson's book, A Cancer Therapy, endlessly to try and help me. After two months helping me, he had to go back to work — and I was on my own, struggling all day.

"During those months, I had a lot of pain and at times vomiting for hours on end [Pat lived in an area where there was aerial pesticide spraying — ed.] and many times I really don't know how I found the strength to fight to live. Some of my healing reactions were very severe but, so very slowly, my body turned around and I began to heal. I lost so much putrid dead matter with my enemas — it was unreal. The last time (this happened) was at 16 months!

"The Gerson Support Group in Australia were invaluable in their encouragement and support. Now, I am back working four hours a day most days, living life to the fullest around my Therapy. I haven't felt so well since my early 20's and am now 56. I only have the Gerson Therapy to thank for saving my life."

Pat asks us to emphasize to our patients: "To start the Therapy, you must have help. I would have healed much faster if I had been able to come to the Mexican Hospital — but I knew I had no help, and had no choice but to try and succeed."