

## The Cancer Reality Today

If you are facing a cancer diagnosis, the first thing you should know is that there *is* hope in the world of alternative, non-toxic treatments. And I am referring to very *real* hope—not the “false hope” that is so often offered in the guise of chemotherapy and radiation. Tens of thousands of people have declined conventional medicine, either as soon as they were diagnosed or after conventional methods failed, and used alternative methods instead to overcome their cancer. These people have then gone on to live normal, healthy lives!

The second thing you should know is that you are far from alone. Right now, one in every two to three Americans will develop life-threatening cancer at some point in their lives. This estimate comes primarily from the official American Cancer Society figures of 1996, which predicted that 40 percent of all Americans will develop life-threatening cancer. This statistical estimate has been confirmed by other researchers as well, many of whom believe the 40 percent figure to be *conservative*. Overall, cancer rates have been rising at an alarming rate for the past 100 years. In recent years, the rate of lung cancer incidence has been going down due to fewer people smoking, but the rates of virtually all other types of cancer are still increasing.

Whenever a person finds themselves facing a cancer diagnosis, time is of the essence. There are urgent decisions to make, and you need treatment information fast. You may have various doctors, relatives, or friends

pushing you to quickly get your surgery, chemotherapy, and/or radiation. They may even say things like, “If you don’t do this now, you will die!” If this is happening to you, try to remember that these people are pushing you because they care about you and are, themselves, scared. And they are right when they say that you need to take action *very soon*.

But you deserve to know that everyone in America is strongly influenced—even brought up all their lives—to think that conventional treatments are the only answers to cancer. Surgery, chemotherapy, and radiation are commonly called “The Big Three” of mainstream cancer treatment, and most doctors think these are the only answers.

Unfortunately, there are serious problems with these conventional treatment approaches. Of the three, surgery is definitely the most effective. Surgery can sometimes bring about long-term recovery when cancer is caught early and is in an area where the entire cancerous area can be cut out. This is particularly true for early cancers where an *entire* organ or body part can be removed, such as a kidney, thyroid gland, testicle, or uterus. But for the *majority* of cases, the cancer has already metastasized (spread to other areas of the body) by the time a person is diagnosed. And, for those cases, surgery cannot get all of the cancer cells. Many researchers believe that surgery can even *promote* metastasis in some cases.

Chemotherapy and radiation have even *worse* long-term recovery rates than surgery. This is largely because they resort to toxic methods of “bludgeoning” a person’s cancer to death. These toxic treatments harm healthy parts of a person’s body along with the cancer, thereby making long-term recovery difficult.

The good news is that, even if you have been diagnosed with cancer that has already metastasized, there *are* alternative options to conventional treatments. And they often have better track records, in general, than what mainstream medicine is offering. I know many people who were told by their doctor that their late-stage or metastasized cancer was incurable, only to completely recover later by using a non-toxic, alternative approach! In fact, you may find after reading this book that your biggest difficulty is not in finding a good alternative treatment approach to cancer, but in deciding which one to use because there are so many to choose from.

There are very important reasons why alternative treatments for cancer often have better track records than conventional ones. Most importantly, alternative, non-toxic approaches work in ways that do not harm normal, healthy cells of the body. They do this by focusing on those

aspects of cancer cells that are significantly different from healthy cells. These approaches treat cancer as a “whole-body” disease and work *with* a person’s immune system to attack the cancer cells everywhere, even the free-floating individual cells. This is different from mainstream practices, which focus primarily on just treating tumors (which may represent most of the cancer cells in a person’s body, but not all), and use toxic treatments that can seriously damage the body’s immune system and vital organs.

In other words, conventional medicine tries to *bludgeon* your cancer to death with toxic treatments that can be extremely harmful to your body, while alternative methods use non-toxic approaches to *Outsmart Your Cancer!*

## Benefits of Non-Toxic Approaches

The most obvious benefit of using a non-toxic approach to cancer is that, by doing so, a person does not damage healthy parts of his or her body while trying to recover from their illness. Chemotherapy and radiation can damage virtually any cells they come in contact with and may have extremely serious long-term side effects such as liver, kidney, nerve, and heart damage. These side effects can often be life-threatening in and of themselves. Other side effects, such as chronic weakness, may result from damaged adrenals and/or thyroid glands, and this can reduce a person’s quality of life.

Besides general bodily damage that can be caused, many cancer patients are not even told by their doctors that some common conventional treatments for cancer are themselves *carcinogenic*. The fact is that some chemotherapy agents are known carcinogens, and the chemotherapy treatment given to many patients to put their cancer into remission may directly cause a *secondary* cancer to develop in that person a few years later. Radiation can also cause cancer, which has been well-known since radiation techniques were first developed. Though surgery is not considered carcinogenic, it may cause the spread of cancer to other parts of the body.

Moreover, at some point, the use of a toxic treatment for cancer may enable the cancer to spread *even faster* in a person’s body. This is because that person’s immune system and other natural defense mechanisms have been so weakened by the treatment itself, the body can no longer fight off the cancer. So it only makes sense that using a toxic treatment for cancer can work against long-term recovery by giving the body more damage to recover from.

But there is another benefit of non-toxic approaches that is critical to long-term recovery from cancer, yet is little understood. This is the benefit that comes from *continual use* of a treatment. The importance of this particular benefit cannot be overstated. Conventional toxic approaches, such as chemotherapy and radiation, do not allow for continual use because they are so toxic, continual use would kill the patient before the cancer could! For this reason, toxic treatments are always administered with doses spaced out. This necessity to space out the administration of a toxic treatment is not optimally effective since one of cancer's best abilities is to grow new cells *fast*. Thus, in-between toxic treatment administrations, while the patient's body is recovering from the treatment, the cancer cells are recovering too. And those cancer cells that grow back the fastest are those cells that have some amount of "resistance" to the treatment. In other words, the treatment itself selects for the proliferation of resistant cancer cells in a person's body. This type of resistance has become more and more evident with the use of antibiotics causing antibiotic-resistant bacteria. In the case of chemotherapy use, this type of dynamic may result in what are called "multi-drug-resistant" cancer cells, or MDR cells.

With non-toxic treatments, however, these vicious dynamics are avoided. Non-toxic approaches do not harm the body and therefore allow for continual use. When a cancer treatment is non-toxic and can be administered continually every day, resistant cells are not promoted. In fact, a non-toxic approach can be done every single day for months or years. This allows the treatment approach to work in the body "24/7" and *never* gives the cancer cells a chance to grow back in ever more virulent forms.

Also, non-toxic approaches can often be continued for years *after* one has achieved remission, if a person chooses to. This gives people a way to help ensure that their cancer does not come back!

## The Bigger Picture

To sum up the bigger picture of conventional versus alternative cancer treatments today, I have come up with what I call the "three basic truths." They are:

1. Conventional treatments have failed
2. Successful alternative treatments abound
3. The "disbelief factor" is alive and well

### *First Basic Truth—Conventional Treatments Have Failed*

It is commonly accepted by many reputable cancer researchers that the conventional “war on cancer” has failed. In fact, it has failed so miserably that the conventional cancer industry has had to resort to “fudging” their cure-rate statistics so the public will continue to think they are doing a good job! (By “cancer industry,” I mean the part of organized medicine devoted to cancer research, treatment, and education, which is led primarily by the National Cancer Institute [NCI], the American Cancer Society [ACS], the Food and Drug Administration [FDA], the American Medical Association [AMA], a few large centers throughout the country such as Memorial Sloan-Kettering Cancer Center in New York, and various pharmaceutical companies that produce cancer drugs.)

Once we clear away the fudged statistics and get down to the true reality, however, we find that current conventional medical treatments for cancer can only bring about real cures (long-term survival) for a very small percentage of cancer patients. People with primary cancer (cancer that has not yet metastasized) have the best chance of survival with conventional treatments, where they may have about a 10 to 15 percent chance of long-term recovery if the cancer is caught early and is in an area of the body that allows for total surgical removal. But most cancer patients are not lucky enough to be diagnosed with primary cancer. In the United States, between two-thirds and three-fourths of all cancer patients have cancer that had *already metastasized* by the time they were first diagnosed. And when it comes to conventional medical treatments for metastasized cancer, many researchers agree that the long-term survival rate for these patients is less than 1 percent. (In some cases, it is as low as one-tenth of a percent.) When it comes to the long-term effectiveness of chemotherapy in general, some highly respected cancer researchers believe it is effective in only 2 to 3 percent of all cancers.

You might say, “Wait a minute; I heard that 40 to 50 percent of all cancer cases today are being cured by mainstream medicine. I also heard that *most* cancers, when caught early enough, are curable.” Well, I believe that you heard that because these are the typical types of figures the cancer industry likes to advertise. But the truth is that when you hear a statistic like “40 to 50 percent cure rate” or “most cancers are curable if caught early,” you are being presented statistics that have been incredibly *fudged and manipulated*. I learned about the official fudging tactics from a variety of sources, but primarily from the in-depth work done by two prominent cancer researchers: Ralph W. Moss, Ph.D., and Lorraine Day, M.D.

Ralph Moss is a highly renowned cancer researcher who has written numerous books including *The Cancer Industry*, *Questioning Chemotherapy*, and *Cancer Therapy: The Independent Consumer's Guide to Non-Toxic Treatment and Prevention*. Moss began his cancer research when he was hired as a science writer at New York's Memorial Sloan-Kettering Cancer Center in 1974. There, he was able to observe the workings of the cancer industry from the inside. But according to Moss, his employment at Memorial Sloan-Kettering ended when he would not go along with the advertising of misleading information to the public. Over the years since then, he has diligently researched the *real* truth for the public, which he has carefully quoted and documented in his books. In an ever-growing circle of people researching the truth about cancer treatments, Ralph Moss is considered to be a leading authority.

Dr. Lorraine Day is an orthopedic trauma surgeon who rose to the position of chief of orthopedic surgery at San Francisco General Hospital. In 1992, Dr. Day's life changed dramatically when she was diagnosed with breast cancer that had already metastasized. Though she was pressured by specialists to undergo a mastectomy followed by chemotherapy and radiation, she chose *not* to receive those treatments because she knew so much about the severe damage to her body they could cause. Instead, she immediately started looking into other ways to treat herself, and eventually was able to completely heal and overcome her advanced cancer by drastically changing her diet and through other natural steps.

Dr. Day details her amazing story and reveals the results of her own in-depth research into cancer treatments in her numerous videos which can all be purchased from her website ([www.DrDay.com](http://www.DrDay.com)). One of Dr. Day's videos reveals the stark truth about conventional cancer treatments and their side effects and real cure rates. It is called *Cancer Doesn't Scare Me Anymore*, and I highly recommend it. (See ordering instructions at the end of this chapter.)

Taken primarily from research done by both Dr. Moss and Dr. Day, the six *big ways* official cancer cure rates and statistics have been "fudged" are the following:

1. **By the way "cure" is defined.** The current cancer authorities, such as the ACS, NCI, and FDA, have all chosen to define "cure" as alive five years after diagnosis.<sup>1</sup> This official definition does not mean "cancer free," nor does it mean "healed of your disease," which is what most people think the word "cure" means.

To give you a better idea of what I am talking about, we can look at the true story of one female cancer patient. In this woman's battle against breast cancer, she did all the conventional approaches—surgery, radiation, and chemotherapy. Unfortunately, the woman did *not* survive. She died, full of cancer, five years and two weeks after her diagnosis. To add insult to injury, her husband found out later that his beloved wife was listed as a “cure” on the official ledgers, because she had died two weeks *after* the five-year mark. Thus, because of the American Cancer Society's definition of “cure,” many patients who live five years after their cancer diagnoses are listed as “cured”—*even though they still show evidence of having cancer, or even though they die from their cancer.*<sup>2</sup> Thus, the definition of “cure” is the first big fallacy of official cancer cure-rate statistics, and may be the biggest official fudging tactic used.

2. **By simply not including certain groups of people, or certain types of cancer.** This is one of the hardest fudging tactics to believe. It means that, at times, the official cancer authorities have been able to make their statistics look better than they really are by simply not including certain groups of people in their statistics who tend to show lower recovery rates than other groups. These groups might be less likely to recover for socio-economic or other reasons.

I was shocked when I discovered this could include *all non-white Americans*. According to Ralph Moss, two prominent medical researchers who published their findings in the *New England Journal of Medicine* stated that the NCI “generally reports whites-only figures. Nonwhites . . . are kept in a separate category, untallied with the main group.”<sup>3</sup> Moss states that “NCI's solution is to list them in separate (but equal) charts, and then to present the white charts as the norm.”<sup>4</sup> Moreover, the NCI has also been known to greatly improve its advertised cancer cure rates by simply omitting *all lung cancer patients* from their statistics!<sup>5</sup> (It seems that the NCI sees lung cancer as different from other cancers because of its connection to cigarette smoking.) Yet, according to the American Cancer Society, lung cancer is the leading cause of cancer death for both men and women. Thus, in some statistics, the National Cancer Institute simply does not include the type of cancer that causes more deaths than any other type. Both of the above tactics of omission can only be called “biased selection,” and yet these statistics are presented as representative of all patients and *all* life-threatening cancers.

3. **By including types of cancer that are not life-threatening.** The cancer authorities were able to improve their publicized cure rates even more when they took this brilliant step years ago. This tactic involves including cancers in their statistics that are easily treatable and not life-threatening, such as simple skin cancers. According to Dr. Douglas Brodie, “Five-year survivals of non-melanoma skin cancers, localized cancers of the cervix, and some other non-spreading (metastasizing) cancers detected early in specific sites, have been ‘curable’ (that is, amenable to five-year absences of symptoms) since the days of Ptolemy.”<sup>6</sup>

As will be covered in Chapter 19, ductal carcinoma in situ (DCIS) is now included in breast cancer statistics. DCIS is really more of a “pre-cancerous” state that many experts believe should not even be classified as cancer, and is 99 percent curable. Yet, DCIS now comprises about 30 percent of all breast cancer diagnoses in the United States and is included in the cure-rate statistics for life-threatening breast cancer as well. Thus, easily treatable skin cancers and DCIS are types of *non-life-threatening* cancers that are included in statistics used to imply what a patient’s chances of recovering from *life-threatening* cancers are. This tactic is like adding the risk of being killed by a bicycle or someone on a skateboard when compiling the statistical likelihood of being killed in a car crash!

4. **By allowing earlier detection to imply longer survival.** This tactic is subtle but important. Over the decades, one of the aspects of cancer medicine that *has* improved because of improved technology is that of earlier detection. Advances in technology have allowed doctors and researchers to detect cancer on average about six months earlier than they used to be able to detect it. With the definition of cure being “alive five years after diagnosis,” earlier detection has, by itself, added many new patients to the conventional “cure” list.

What is *not* accurate, however, is to claim that these improved statistics reflect *improved life expectancy* because of better treatment methods. In other words, because tumors are getting diagnosed at earlier stages than before, and because of the way “cure” is officially defined as a time deadline following diagnosis, long-term survival rates may *look* better now than they did years ago. But the reality is that no improvement in long-term survival has occurred at all.

5. **By deleting patients from studies who die too soon.** This is a particularly treacherous way the cancer industry manipulates statistics.

What this means is that it has become an acceptable practice in official cancer studies with human patients to simply drop a patient from the records if he or she dies from cancer before the treatment protocol is considered to have been completed. According to Dr. Lorraine Day, this means that “if a cancer patient dies on day 89 of a prescribed 90-day course of chemotherapy, he or she would just disappear from the list of treated patients and would not be listed as a failure.”<sup>7</sup> Yet, if a patient in the control group (those *not* getting the specified treatment) dies at *any* time, that patient is listed in the study as a death from cancer. This is a double standard that shows an institutional lack of integrity and is definitely *not* consistent with true scientific method.

6. **By using an adjustment called “relative survival rate.”** This was a variant on the five-year survival statistic that the official cancer industry created and adopted in the 1980s to help them claim that the war on cancer was being won. According to Ralph Moss, “Relative survival rates take into account the ‘expected mortality figures.’ Put simply, this means that if a person hadn’t died of cancer he might have been run over by a truck, and that must be factored into the equation.”<sup>8</sup>

These *adjusted* rates are used in a very misleading way because they are presented to the public as representative of mainstream medicine’s ability to help a cancer patient recover from their life-threatening cancer. But, in truth, the relative survival rate adjustment is just one more way that cancer cure-rate statistics are manipulated to make conventional treatments look better than they really are.

The above six major fudging tactics are the real back story behind the “official” cancer cure-rate claims currently being advertised to the public. It is only by using these types of extreme statistical manipulations and a totally misleading definition of “cure” that the cancer industry can make bogus statements like *40 to 50 percent of all cancers are curable*. It takes very little research to see that these statistics are not real, and that conventional medicine has failed in the arena of cancer treatment.

Because these tactics are now institutionally ingrained in mainstream cancer treatment and research, the conventional data available start out distorted from the get-go. Therefore, the real data needed to figure out the “true” conventional cure-rate statistics for cancer just aren’t available. However, we don’t need those data to know that we are in the midst of a very serious problem. All we need to know is that in just one year (1996),

more people in the United States died of cancer than the number of U.S. soldiers who died in all of World War II, the Korean War, and the entire Vietnam War combined!<sup>9</sup> This is quite a sobering thought. Another is that Americans are dying of cancer at a rate approximately equivalent to ten September 11<sup>th</sup> terrorist attacks every month!

So, in the bigger picture, the first basic truth is “conventional cancer treatments have failed.”

### *Second Basic Truth—Successful Alternative Treatments Abound*

How many times have we heard television commercials that imply the pharmaceutical companies are working very hard to find a cure for cancer? Yet, you will discover in the following pages that many successful treatments for cancer have already been developed. They just don't get publicity since they are labeled “alternative.” To put it briefly, the cancer treatments that have been relegated to the alternative world have generally involved natural forms of treatment that could not be patented or otherwise controlled by the big multi-billion-dollar cancer industry. This huge industry is run by powerful pharmaceutical companies and even bigger corporate cartels. Its profits are threatened by any natural or individually owned treatment that can't be patented or controlled by big business for profit.

The truth is that there have been many highly successful cancer treatments developed over the past century that *should have been incorporated into mainstream medicine*. Most of them were developed and pioneered by highly respectable physicians or scientists—not quacks or con artists. The best of the alternative, non-toxic treatments for cancer have had blatantly higher success rates than conventional treatments, and these success rates reflect real cures, not phony redefined cures! But these successful cancer treatments have been suppressed to one degree or another, and many misconceptions about alternative cancer treatments have flourished as a result.

One misconception is that, in order for treatments to be suppressed, there must be some kind of centrally located, “conspiracy” going on with little evil men in dark clothes wringing their hands and tittering “hee-hee” while eagerly anticipating peoples' deaths. This is not at all how it works. The suppression has been carried out in many different ways by many different organizations and is simply the result of business economics and

common unethical tactics that tend to occur when large money interests are involved in any field.

Surgery, chemotherapy, and radiation involve billions of dollars of profit for the industries that supply them. Moreover, the current system for new drug development and approval by the FDA is set up such that the cost of developing and bringing a new cancer drug to market is close to a billion dollars. (Common costs are 700 to 800 million dollars in the United States.) Without a patent, this type of cost investment is not economically feasible for a pharmaceutical company. This means that, since any treatment made up of natural ingredients is not patentable, a natural form of treating cancer will never be pursued by a drug company. Unfortunately for the public, the most successful treatments for cancer either involve natural substances or are privately owned and patented by creative individuals who were willing to think out of the box to develop something totally new. What they have to offer is always going to be an economic threat to the multi-billion-dollar cancer establishment.

Thus, to say that there is a conspiracy to suppress alternative cancer treatments is like referring to industries that pollute the environment as joining in a conspiracy to sacrifice the well-being of our natural ecology. That would be ludicrous and would show a total lack of understanding that the way big businesses get where they are is by being profit-motivated. When it comes to the environment, it is true that some of the tactics used by industries to circumvent environmental protection laws or public safety may seem conspiratorial, especially if they involve falsifying paperwork, paying off Congress, or illegally dumping waste under the cover of darkness. But that does *not* mean there is a broad conspiracy by big business to pollute the environment. In the same way, there is no broad conspiracy by big business to suppress alternative cancer treatments. In both cases, big businesses are just doing what they do best—*protecting their profits*.

Another misconception about alternative treatments for cancer in general is that they simply involve going to the nearest health food store and buying everyday types of supplements. If you find it hard to believe that doing this would be a successful way to overcome such a powerful health challenge as cancer, your instincts are right. This is *rarely* how it is done. Most of the successful alternative approaches involve much more powerful treatments than that, and often revolve around very innovative methods that require the help of an experienced alternative practitioner or a knowledgeable support group to be done properly.

There is actually an amazing human story going on in the world of

alternative cancer treatment these days. With conventional medicine failing most cancer patients, more and more people are turning to alternative medicine every year to save themselves. And large numbers of them are winning! They are beating their cancer even though conventional medical experts are claiming that what they are doing cannot be done. They are beating their cancer even though the big insurance companies are not recognizing or paying for the treatments they are using. They are beating their cancer because they are “outsmarting” their cancer with alternative, non-toxic treatments that work. Thus, the second basic truth of the cancer reality today is that “successful alternative treatments abound.”

### *Third Basic Truth—The “Disbelief Factor” Is Alive and Well*

Another widely held misconception about alternative cancer approaches is that, if they really worked better than the current conventional approaches, doctors and clinics everywhere would be using them. This misconception is at the heart of what I call the “disbelief factor.” The disbelief factor is a dynamic that occurs in people’s minds when they say, “If there really are natural, non-toxic treatments for cancer that can bring about real, long-term cures, even in cases of late-stage metastasized cancers, then why aren’t all doctors using these treatments?”

Finding it hard to understand why all doctors are not using the most effective and least toxic treatments for cancer is not the problem. The real problem arises when a person finds this so hard to believe that he or she simply can’t accept the possibility that there could be alternative approaches out there that really work. And when they are told there *are*, they often don’t listen at all because it is just too preposterous to believe. This is the disbelief factor at work.

For those people with cancer who let the disbelief factor win, it is a tragic situation. Their disbelief keeps them from doing any further research on their own. They trust their doctors, not knowing that their doctors have only been taught the mainstream treatments and usually know nothing of the alternative ones. What these people don’t realize is that most doctors are just people who *also* have a hard time believing in alternative treatments, and who ask, “If these treatments really work, why wasn’t I taught them in medical school?”

And patients usually do not realize that, even if their doctor did think an alternative treatment for cancer would help them, in most U.S. states that doctor is *not* legally allowed to prescribe or even recommend anything

other than the big three of surgery, chemotherapy, and radiation. That is why cancer patients who are doing alternative treatments will so often hear from their conventional doctor monitoring them, “Just keep doing whatever it is you are doing!” These oncologists often don’t even want to know what the patient is doing that is working because they know they can’t prescribe it anyway. Unfortunately, the legal straightjacket that conventional oncologists are in only contributes to the prevalence of the disbelief factor. The fact that the disbelief factor is alive and well is the third basic truth of the cancer reality today.

As you can see, the “bigger picture” of cancer treatment in modern countries such as the United States puts cancer patients at a disadvantage. The almost total separation between conventional and alternative therapies requires patients to do their own homework if they are to make a fully informed decision about their treatment. The good news, however, is that there *are* excellent alternative approaches available. But before we delve into those approaches, there are two basic questions to answer first: “Why so much cancer?” and “What causes it?”

### Resources:

#### *Book*

Ralph W. Moss, Ph.D. *The Cancer Industry*. New York: Equinox Press, 1999.

#### *Video*

Lorraine Day, M.D. *Cancer Doesn't Scare Me Anymore*. To order, call (800) 574-2437, or visit Dr. Day's website: [www.drday.com](http://www.drday.com).