Chapter 1 – Holy Mother of God! The Orchestrated Propaganda Campaign to Kill Americans

vitaminccures.com/blog/index.php/2017/05/19/the-orchestrated-propaganda-campaign-to-kill-americans/

OwenFonorow



What If 800,000 Americans Didn't Have to Die This Year?

These unnecessary deaths are happening, and they have happened for 20 years…

What if another 62 million Americans are being deliberately poisoned and maimed to fill the pockets of foreign pharmaceutical companies?

What if EPA rules have been manipulated to move strategic interests out of the United States?

There are agents of a foreign enemy first maiming, then killing, Americans from the inside the US Government–killing Americans after first draining them of all their assets from unnecessary medical expenses.

Harsh words? Keep reading…

This BIG LIE campaign to kill Americans as documented below is propped up by an orchestrated propaganda campaign fostered by Big Pharma advertising revenues.

The Great Suppression

Pauling Therapy Handbook Volume 2

An Opinion

By Owen R. Fonorow – Vitamin C Foundation

Our government makes laws that say only "drugs" can prevent, mitigate, treat, cure, or diagnosis disease. Real drugs don't generally do these things; they are, in fact, toxic and poisonous, which is why they require a prescription from a medical doctor. There are a few exceptions such as natural hormone replacements, e.g., hydrocortisone, insulin, some antibiotics, and few others that are usually not profitable. The profitable drugs are designed to perpetuate disease. Why? Big Pharma and Big Medicine profit from chronic illness, not cures. **It's a crime in America for a company or individual to tell the truth on a web site about a vitamin:** Doing so risks FDA criminal enforcement.

Case in point: The Vitamin C Foundation nonprofit had hundreds of studies about the "vitamin's" ability to prevent, mitigate, treat, and even cure serious disease.

The recent FDA letter to the Foundation forced it to eviscerate its website, take down these links to the science, or go out of business. This information has long revealed a simple, effective, and outright cure invented by one of the world's leading scientists for America's number one killer. If this information had been publicized twenty years ago when it should have been, almost 20 million Americans would still be living, and the 62 million Americans diagnosed with cardiovascular disease would not be squandering their money for their treatments down a Big Pharma den of thieves.

The Big Lie Propaganda Campaign Against Medical Alternatives

Prediction: When Pharmaceutical media advertising dries up, going the way of cigarette advertising, the problem of Big Media's participation in the Big Lie will end.

Many years before writing the following **PROPAGANDA DISGUISED AS NEWS** article, which was published in the *Townsend Letter for Doctors and Patients*, I was having lunch in a Chicago office building. I started talking with a colleague who shared with me her knowledge of how the CIA manipulates the press to mold public opinion. She may have been a reporter herself. She said the CIA feeds reporters false news stories. If a reporter wants to keep the source in the CIA, the reporter submits the story for publication. For example, if the United States is planning to take military action against some country, the CIA feeds fake news accounts of atrocities in that country to build public support.

This data literally blew my naive mind: I had never considered the possibility of such a thing.

After waking up and seeing how the media is manipulated, we began to observe more.

In the **TALE OF TWO STORIES**, we outlined one case in which a major study of vitamin C's value in treating arthritis was headed off at the pass by the story of a fake study, which appeared first. The news then became *Vitamin C wasn't very useful for arthritis.* When the real story appeared days later, with the opposite result, it did not receive any press.

Lastly, we noticed that **disparaging Linus Pauling "stories" routinely appeared just days before major dates in Pauling's life, e.g., his birthday, or the anniversaries of his Nobel prizes**. The preemptive debunking strikes were apparently aimed at any wayward enterprising reporter who might be thinking of writing a positive story about Pauling.

Back to the Future

WHO AMONG US HAS THE POWER TO ROUTINELY PLANT FAKE HEALTH-SCIENCE "NEWS" REPORTS IN THE MASS MEDIA?

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Heart Disease is the number one killer in the United States; not because science has failed, but because of a deliberate campaign to misinform and mislead the public. Fake health-science "news" reports are now appearing so often in the Press that ordinary people are beginning to take notice. Planted stories resembling a professional CIA- or KGB-style propaganda campaign are responsible for the death of at least 1,000 Americans every day. The campaign has been in operation since 1984, and its roots may date back to 1970 [1]. The First Amendment to the United States Constitution protects these perpetrators. Save defamation and libel, the American Press can print misinformation.

Propaganda masquerading as health-science news is not hard to spot, especially for those with knowledge of the science behind the success of alternative medicine. The drumbeat that 'cholesterol is bad, causes heart disease, and every effort should be made to lower it' has droned on for more than a decade. This BIG LIE is reinforced daily even though the leaders of the American Medical Association cautioned that our fears are misplaced and there is not sufficient evidence to fear elevated cholesterol [2]. We are conditioned to fear fats, favor carbohydrates, and lately fear "antioxidants." Most insidious of all, we are being conditioned to fear the most important life giving substance known: ascorbic acid, or vitamin C!

Propaganda artists understand that the bigger, more widely distributed and more bold-faced the lie, the more people will believe it. Few substances in the world are safer than vitamin C, but this well established fact has not stopped recent worldwide health-science "news" scare stories, which imply that vitamin C may cause heart disease and

cancer! Not a single one of these reports has been substantiated [3]. However, the truth does not appear to matter. “Vitamin C consumption is down 19% year-over-year,” according to Nutrition researcher and journalist Bill Sardi. The “terror” campaign works. The public are now frightened about taking vitamin C!

The Media can and does not act alone. The “propaganda as news” campaign could not succeed without the tacit support of medical professionals and scientists who know better, and who profit from the ill health of Americans. There is circumstantial evidence of a conspiracy. Medicine and pharmaceutical companies profit from illness. Doctors generally look the other way, or else routinely cite these articles to questioning patients. Social security programs are facing bankruptcy from servicing the elderly. **Recently, funeral homes in Israel complained after doctors went on strike and the death rate dropped dramatically** [4].

We have been examining false health-science “news” stories for years. One objective seems to be to promote dietary behavior that leads to chronic, rather than acute, medical conditions. These conditions are normally treated long-term with prescription drugs. Another objective is to undermine confidence in cheap, effective alternatives to prescription drugs. Usually this means ridiculing vitamins, but sometimes the campaign attacks how vitamins and herbal products are made, or cite a “lack of regulation.”

Another hint towards who might be behind the false health-science “news” is the obvious secondary objective: confusion and obfuscation. If one is able to keep the public confused, then the public will have no choice but to rely on their doctors. Health care costs amount to more than 7% of GDP. No reason to rock that boat.

The real science is clear: These propaganda stories, to the extent they reduce vitamin C and other anti-oxidant consumption, will increase the incidence of heart and other chronic diseases; creating an economic advantage for medicine. Not all who die are old. Many heart attack and stroke victims are in their 30s and 40s. According to the American Heart Association, in spite of the decline in heart disease mortality since the 1970s (741,000 in 1970 to less than 500,000 in the year 2000), more than 1,000 people die every day in the USA of some form of heart disease [5].

When you profit from sickness, your marketing department will sooner or later figure out how to make people sick. Those who market hospitals or cardiac drugs may view the steep decline in heart disease mortality rate since 1970 [6] as a revenue and profit disaster. The revenue hemorrhage for heart surgeons, cardiologists, hospitals and pharmaceutical companies (especially those who make high-profit cholesterol lowering prescription drugs) is staggering. From 250,000 to 650,000 more people would have been expected to perish last year. The (lost) profits had the expected heart disease mortality rate continued to rise after 1970 per the 60-year trend, is in the billions! Think of the great marketing problem if a cure had been invented that does not require either a prescription drug or a doctor!

Fortunately, the cause and cure for heart disease is simple. The true nature of heart disease, a simple vitamin C deficiency, was recognized in the late 1940s and early 1950s [7]. Linus Pauling claims to have written his first book on vitamin C to counter misinformation in the media in the late 1960s [8]. Pauling invented his putative cure for heart disease in 1993 [9]. The BIG LIE campaign to discredit Pauling, and reduce the daily consumption of vitamin C, will inevitably lead to higher rates of heart disease and mortality. **The only reason that the public is not aware of this is because individuals in positions of trust, hiding behind the First Amendment freedoms afforded to our press, promulgate false information. The Press, whom we rely on to ferret out corruption, has become the greatest malfeasant of all.**

We suspect, economics being what they are, that the motivation behind the BIG LIE campaign is self-preservation. For an industry that feeds on illness, the realization that Linus Pauling and Matthias Rath are right, that there is no longer any reason for the million annual heart operations, or for taking billions of dollars of dangerous cholesterol lowering medications, was a transformation that had to be resisted at all costs. *This realization is the only logical reason that human beings would dare risk causing such massive suffering among their fellow men and women.*

While we cannot pinpoint specific individuals behind the genocide, recent events provide clues to the morals and ethics of the CEOs of large combined pharmaceutical and vitamin companies. This year, the US Justice Department and the Governments of many Western Nations levied multi-billion dollar fines against those companies that illegally entered into the so-called "Vitamin Cartel" and admitted fixing vitamin prices. The pharmaceutical multinational corporations Hoffmann-La Roche, BASF, Rhône-Poulenc and other multinational pharmaceutical companies have now admitted to criminal price fixing for vitamin raw materials. These international companies have divisions that manufacture synthetic vitamins as well as pharmaceuticals.

The US-justice department declared that this Vitamin-Cartel was the largest cartel ever discovered and named it an economic "conspiracy." Roche, BASF and the others cartel members agreed to pay almost a billion dollars in fines for committing these crimes. One of the smaller companies provided "states evidence" about the price fixing in return for leniency [10].

According to the Matthias Rath website, this cartel formed after Dr. Rath briefed the heads of these pharmaceutical/vitamin manufactures about the true nature and cause of heart disease. Rath maintains that after he provided them with proof that CVD is essentially a vitamin C deficiency disease, these companies began to organize the now infamous "Vitamin Cartel."

Hoffmann-La Roche is the largest producer of vitamin C in the world. According to Dr. Rath, he originally approached the presidents of these companies to encourage them to increase vitamin C production and to help him inform the public of this new use of vitamin C. Rath was shocked to discover that they did the opposite of what he intended.

In order to preserve the higher profit margins of other divisions, e.g. the cholesterol lowering drug divisions, the heads of these major companies conspired to raise the prices of vitamins. According to Rath, this price fixing was to discourage the use of vitamins in favor of cholesterol lowering medications, and to increase profits should the truth about heart disease become widely known [10].

Now that this conspiracy is out in the open, we have insight into the thinking, morals and ethics of the leadership of the largest pharmaceutical/vitamin companies in the world. Fortunately for humanity, but unfortunately for these huge companies, the cure for heart disease is cheap and plentiful. As this becomes generally well known via the Internet, it may be of benefit to unload pharmaceutical stocks or mutual funds.

It is also worth noting that the CIA was strongly influenced at its inception by intelligence experts recruited from NAZI Germany [11]. Much has been written about how the CIA and other intelligence communities routinely use media campaigns to shape public opinion against foreign governments, or to protect clandestine operations. This propaganda is disguised as news. We know that the intelligence communities have media contacts. The media has been conditioned, most likely flattered by the attention and "inside" sources, and has not resisted. We would not be surprised to learn that former intelligence operatives, after leaving the CIA, have found lucrative work at pharmaceutical companies. The campaign from a technical standpoint has been outstanding, however these are not well-intentioned people. Perhaps some day one will come forward and blow the whistle?

The Media cannot escape responsibility. Whether Media moguls are orchestrating the grand deception, or are unwitting accomplices being manipulated, or are relying on expert sources and opinions, the end result is the same; a massive loss of life and untold suffering. A school child could check the accuracy of many of these planted health-science stories. A cub reporter could balance these negative reports with hundreds to the contrary. No, reporters cannot simply hide behind their laziness or ignorance. According to author and former journalist Arline Brecher, tremendous advertising revenues can and do influence Editors to look the other way [12]. Bribery cannot be ruled out.

The great problem facing humanity is how to stop or counter this long running BIG LIE campaign. This is not a simple undertaking. The coffers of huge companies that profit from human suffering and death is enormous, thanks in large part to the campaign itself which effectively promotes and protects their products. As long as the media is unable or not willing to tell the truth, millions of their fellow citizens will continue to suffer and die prematurely. Mediacide has cost the USA trillions of dollars in unnecessary health care expenditures.

Recently, the campaign has become bolder. Perhaps those behind the campaign have gained confidence that these lies will go unchallenged; or they have become stupid. As the planted stories become more shrill, appear too often and are harder to believe, we

can hope the public will finally wake up and become the force that vanquishes these fake-news campaigns from the face of the Earth.

TALE OF TWO STORIES: THE COORDINATED PROPAGANDA CAMPAIGN AGAINST NUTRITIONAL SUPPLEMENTS
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Recently, two diametrically opposed media stories about vitamin C and arthritis appeared. The first stated that vitamin C causes arthritis. The second was published days later, stating that vitamin C prevents arthritis.

The widely reported story implied that large doses of vitamin C might cause osteoarthritis. This particular study, which many believe was blown out of proportion, was easily dismissed from the animal study author's own comments. She pointed out that the pigs fed more vitamin C grew significantly more than the pigs getting little of the vitamin, and she mentioned that this fact probably accounts for her findings of larger knee knobs.

The second story then appeared. Human, *not animal*, research published in the *Annals of the Rheumatic Diseases* showed that a high vitamin C intake protects against the development of painful rheumatoid arthritis. The researchers found that people with inflammatory polyarthritis (Reuhmatoid) tended to have a lower daily intake of fruit and vegetables than those who did not develop the disease.

> **Vitamin C itself seemed to have an even more important role. The results showed that those with the lowest levels of vitamin C intake were three times more likely to develop inflammatory arthritis than those with the highest intake. Those with levels below the RDA (40 mg in UK) were at four times the risk of inflammatory polyarthritis. Those at less than 56mg a day were still at three times the risk.**

> The timing and distribution of these two opposing arthritis stories is suspicious. These coincidental stories provide another clue to the techniques and motivations of the people actively working behind the scenes to damage the health of the public. The negative story, posing as news, is one of a series of fake anti-supplement news stories that are published at regular intervals. These deliberate distortions somehow gain wide access to the worldwide media and negatively affect the public's thinking about vitamins. This eventually leads to poor health for millions of people.

People tend to believe what they read and hear in the news. Could there really be a propaganda campaign that alters the news and attempts to harm the public health? Are there propaganda artists whose job descriptions read *fool the public*? Do people live and

work among us, with access to the media, who are paid to deliberately cause confusion, obfuscate scientific findings, and lie to the lay public about matters of public health?

Consider how this might be accomplished. These propagandists monitor medical journals before they are published, or perhaps they are briefed on harmful-to-their business articles that are about to appear in print. These people are willing to risk everyone's health, in order to blunt the impact that a significant scientific report might have on their business, presumably pharmaceutical.

If such a propaganda campaign exists, which works to preserve markets for expensive pharmaceutical products, then the ensuing suffering makes the Nazi holocaust dwindle by comparison.

HOW TO COUNTER THE PROPAGANDA CAMPAIGN AIMED AT MEDICAL ALTERNATIVES

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The words of the late Nobel Prize winning physicist Richard Feynman bear repeating:

> *"The principle of science, the definition, almost, is the following: The test of all knowledge is experiment. Experiment is the sole judge of scientific 'truth.'"*

These words came to mind on Monday, September 2, 1996, while watching a medical report crafted by the CBS news affiliate in Chicago. WBBM television reported that there is a substance commonly found in junk food that explains the 40% drop in heart disease mortality in the United States over the past 20 years.

New to alternative medicine, I have been slow to realize what the field is up against. Although most people are not aware of it, major news outlets feeding the mass media are being used as a propaganda weapon to spread misinformation about inexpensive alternatives to drugs and other pharmaceutical products. While people may not base their opinions on advertising, they do tend to base their opinions around "news."

For years it was my belief that news organizations may have bias, but that they mostly held to the ideals of a free press. My naiveté dissipated rapidly upon discovering two years ago that one of the world's greatest scientists had made a significant health claim, which was not reported by the media. It was particularly troubling to see so-called PREVENTION Magazine's treatment of this matter.

Coincidentally, I began to notice a series of medical stories carried by the national news media. To the uninformed reader, these stories appear factual and objective. However, each story provided subtly misleading information, always favorable to current medical dogma. ***Amazingly, these stories were published everywhere***

simultaneously. *What power, I wondered, could get these questionable stories published universally and so regularly while efforts to publicize a milestone discovery had failed?*

My epiphany was the realization that these medical stories, without author and usually published under the banner of the Associated Press, were not the work of amateurs. Carefully crafted, each sentence in a given story by itself was (mostly) factual. Together, as the examples later show, these sentences paint a slanted picture; either confusing or otherwise biased against alternative medicine.

Have alternative medicine and its tools, e.g. vitamins, been the target of a BIG LIE smear campaign? Author and AMA infiltrator James P. Lisa thinks so. He reported on this campaign in his recent book entitled *The Assault on Medical Freedom*. Upon representing himself as a freelance writer working on a book about "quackery," Lisa was permitted to see confidential AMA files. On page 56 of Lisa's book, the author presents evidence that pharmaceutical interests have been targeting alternative medicine since the year 1985.

"In a letter dated February 7, 1985, Mr [deleted] sent Mr [deleted] information about the "Roper poll on quackery." This was a survey of the general public that the PAC/FDA campaign had commissioned in October 1984, in order to identify targets for the campaign. An inspection of the survey is revealing.

Judging from the survey questions asked, it appears that those surveyed would get the impression that they were being asked these questions to solicit how effective these treatments were. However, the survey results apparently were used to identify what the public considered most effective in order to determine top-ranking priorities for the "anti-quackery" campaign.

The following is a sampling of the survey: How effective do you think (read item) is/are?

	Heard of	Very Effective	Moderately Effective	Not Very Effective / Other
a. Vitamins for improved health	95%	29%	49%	9% / 8%
b. Chiropractors for back problems	85%	25%	40%	8% / 12%

c. Psychological counseling for improved mental health	68%	25%	32%	4% / 8%

The category that "scored" fourth-highest was alternative cancer treatments. The survey also included weight reduction, body wraps, wraps for slimming, electrical muscle stimulators for body toning, creams to eliminate cellulite, DMSO for aches and pains, air ionizers for feeling healthier, laetrile for cancer, pills for a better sex life, pills to sober up, and creams to grow hair. The BIG THREE targets for the campaign became (1) vitamins, (2) chiropractic, and (3) alternative cancer treatments."

THE MEDIA FEED

Regardless of the intentions of various groups with vested economic interests, such a propaganda campaign could not be effective without the major news organizations in the United States, particularly the Associated Press. Whether the AP disseminated these stories due to gullibility or bribery is immaterial. The fact is that the vast majority of Americans, unaware of the economic implications, accept these stories at face value.

It soon became obvious that important studies were being routinely deflected by these AP stories, and deflected by the assumption that the news media reporting the story was knowledgeable and objective. These authors can appear impartial and objective. And, by what power do they gain such easy access to the public mind?

It is my hope that readers who are cognizant that such a manipulation exists, and knowing how it works and what its objectives are, will be better able to blunt its affect on the hearts and minds of the American public.

A METHOD TO THE MADNESS

A top marketing dictum is: "Advertising is everything." Poorly conceived advertising may not work well, but advertising is fundamental when marketing to a mass audience. However, advertising is costly, and the audience realizes the advertiser's intentions.

Any seller that can generate "news" articles advantageous to its image, products, or services has an unfair marketing advantage. First, such an approach is not likely to cost much; but more importantly, the people receiving the message perceive it as factual news and are more likely to accept and believe the message.

How does one go about getting their advertising message presented in the guise of respected news articles? The most obvious way is to issue a press release. In the case of the pharmaceutical propaganda campaign, these strategically timed and carefully constructed articles occur too frequently to be coincidental.

SCIENCE BY DESIGN

Can public opinion really be influenced by a steady drone of "news" articles designed to create an image of "scientific" allopathic medicine or of "miracle" pharmaceuticals?

What if there was a steady stream of "news" articles about the number of people that die every year from side effects to common pharmaceuticals, especially if compared to the side effects of vitamins and herbs? Consider the effect of a steady stream of "news" articles in the major media that most allopathic cancer treatments themselves are carcinogenic, or that overuse of common antibiotics is creating a crisis that allopathic medicine may not be able to conquer, but that oxygen therapies will. Furthermore, consider the effect of a steady stream of news articles favorable to practitioners of alternative medicine; how many people are using them, how their therapies are more effective and cheaper, etc. One can imagine the new image that alternative medicine would have.

Much depends on the credibility of the messenger, its reputation and the reputation of those providing the "advertising" messages. People must generally perceive propaganda as objective news. The primary intent of this article is to whittle away at that perception.

EXAMPLES TO MAKE OUR CASE

The following examples were clipped from local Chicago newspapers. The full text of each article can be found at http://www.internetwks.com/pauling/lie/index.html.

CASE #1: THE GREAT MAGNESIUM SCARE

On August 29, 1995 the news hit that the essential mineral magnesium, previously thought to be non-toxic and now widely recognized as first line therapy against heart attack, was implicated in 14 deaths since 1968! This mass murder was exposed by researchers of the Food and Drug Administration and reported in a publication of the American Medical Association. This would have been news, if magnesium were really toxic. How and why did this story make all the network and local television newscasts and newspapers on August 29-30, 1995?

For the uniformed reader, it is instructive to consider magnesium in the historical perspective. As far back as 1972, the late Dr. Roger J. Williams reported in his book *Nutrition Against Disease* that a 1957 study showed magnesium to be beneficial to the heart.

"The possibility that magnesium deficiency may also be implicated in coronary heart disease arose when it was reported that injections of magnesium sulfate brought about "dramatic clinical improvement" in patients who had suffered from angina

pectoris and coronary thrombosis, and that the lipoprotein levels were brought to normal in many cases"[Bersohn & Oelofse, Lancet: 1:1020, 1957].

More recently, Dr. Brian Leibovitz, Ph.D., editorialized in a recent issue of the *Journal of Optimum Nutrition* that magnesium*"...is now recognized as a first-line medicine for the treatment of heart attacks. A study published in The Lancet, for example, reported the effects of a double-blind, randomized, placebo-controlled study in 2,316 patients with suspected myocardial infarction. The dose of magnesium was high (about 8.7 grams given intravenously over a 24 hour period), but the results were remarkable: magnesium reduced cardiovascular mortality by 25 percent. The author's conclusion" was that "intravenous magnesium sulfate is a simple, safe, and widely applicable treatment. Its efficacy in reducing early mortality of myocardial infarction is comparable to, but independent of, that of thrombolytic or antiplatelet therapy..."*

These findings have been confirmed and reconfirmed in many clinics and laboratories. In an analysis of seven clinical studies, for example, Teo and colleagues concluded that magnesium (in doses of 5-10 grams by intravenous injection) reduced the odds of death by an astounding 55%.

"Studies of magnesium have revealed it to be Nature's 'calcium-channel blocker,' unlike its drug counterparts; however, magnesium has no toxic side-effects. Another important effect of supplemental magnesium is its ability to mitigate the cardiotoxic effects of catecholamines. Prielipp and associates, for example, published results of a clinical trial in which magnesium (10 mg per kg body weight per hour, or approximately 700 mg per hour for an average adult) attenuated the cardiotoxic effects of epinephrine in 17 bypass patients."

In summary, magnesium is inexpensive, safe and effective. Now, some 38 years after the Lancet report, it is widely recognized as a crucial lifesaver, if and when used in the fight against heart attacks. All unbiased studies have shown it to be non-toxic, even in very large (gm) amounts.

Why "smear" magnesium? Even more interesting, why would the mass media be so willing to print the smear? Magnesium is not only a direct competitor for a wide array of expensive cardiac medications, and it seems to work better. However, its effectiveness directly challenges allopathic medicine's assertions that "simple nutrients" are ineffective in and of themselves therapeutically.

It is bad enough that a story like "the magnesium scare" could make ABC, CBS, NBC, CNN, and the papers in the United States based on a single questionable study; one among hundreds that are published each month, but why pick up a story that even the authors admit contains a number of incidents affecting less than 2 people per year? Experts we spoke with offered their opinion that the large amount of aluminum

consumed was much more likely to be the root cause of the reported problems. A balanced report would have mentioned the great therapeutic value that is now attributed to magnesium.

CASE #2: VITAMIN A CAUSES BIRTH DEFECTS

A "major" story that a new study identified vitamin A as dangerous and can cause fetal defects was given quite a bit of airtime on all the local networks October 7, 1995. The study from Boston University was deemed to be so "important to public health" that results were released two months prior to publication! In other words, the study was released two months before other scientists could critically analyze it.

The reader should be aware that the possibility of "fetal defects" has already been listed in orthodox nutrition textbooks as a "side affect of vitamin A." That makes for an interesting conundrum. If this is "old news," why was it a "major story?" If this is one of the first such study in humans, how did the nutrition textbook writers know? Are they clairvoyant?

The absurdity is revealed by the numbers: Boston University's idea of a statistically significant public health risk is an "estimated 5 or 6 per 23,000." Yet, this "major" story appeared on all local networks.

CASE #3: VITAMIN C INJECTIONS HELP SMOKERS

On July 1, 1996 the following story was reported nationwide. According to the Munzel study published in the *Journal Circulation of the American Heart Association*, Vitamin C injections were shown to "almost totally reverse" endothelial dysfunction in chronic smokers. The intent of this story was to "blunt" a vitamin C bombshell.

The AP report glossed over the fact that heart disease is known to result from arterial "endothelial dysfunction." The AP story dodged a bullet by quoting Harvard Professor Eric Rimm "another study in which smokers were given vitamin C pills over eight years found no effect on their rate of heart disease."

As far as we can tell, this claim is false. There was no eight-year study at Harvard that gave smokers vitamin C pills. Undoubtedly, the study referred to was the 1992 study "Vitamin E and Coronary Heart Disease in Men" published in the *New England Journal of Medicine*. However, that study of health professionals limited its analysis to 667 males suffering cardiovascular disease (CVD) out of 39,910 males given follow-up questionnaires. Only those participants who had originally been free, and then either died of coronary artery disease or suffered a coronary episode, were considered.

As an aside, since the antioxidant intake of 39,243 individuals who participated in the study (or 98.3%) that did not develop coronary disease were specifically excluded from the analysis, the Harvard Vitamin E study should not have been used to counter the Munzel study. Rimm could not have noticed a "completely protective affect of vitamin C" and no pills were dispersed during the study.

CASE #4: LIPOPROTEIN (A) AND PREMATURE HEART DISEASE IN MEN

This AP article reported on the Lp(a) study by Bostom, et. al. in the August 21, 1996 *Journal of the American Medical Association*. It was a follow-up to earlier Framingham studies where Lp(a) measurements were questioned. The study confirmed the earlier work that lipoprotein(a) is an independent risk factor in cardiovascular disease.

The AP title implied that Lp(a) is a "new" discovery. I sensed that the medical profession was about to credit itself for discovering Lp(a). However, the research on lipoprotein(a) was developed enough in 1991-1992 that Dr. Matthias Rath of the Linus Pauling Institute had conducted studies, and Pauling had lectured for years on this danger. The date of the discovery that Lp(a) is a "major" player in heart disease most likely occurred in 1989. The Wall Street Journal first reported on lipoprotein(a) in 1988.

The more damaging part of the AP's lipoprotein(a) article were assertions that "Lp(a) is hard to measure accurately" and even when measured, "there are no known ways to reduce its level in the body." Both these assertions are most likely false. Lp(a) can be measured sufficiently to establish risk. Vitamin B3 and Vitamin C have been shown to lower Lp(a) blood levels. Both of these studies were not mentioned. Another "bombshell" not mentioned is that the binding of Lp(a) to the walls of damaged blood vessels can be inhibited. Pauling and Rath received the patent for this in 1994. These binding inhibitors, especially the amino acid l-lysine, offer a safer and possibly more effective alternative to angioplasty, coronary bypass, and even Chelation.

CASE #5: VIRUS BLAMED FOR ANGIOPLASTY FAILURE

On August 29, 1996, the following AP article *"Study: Virus may negate benefits of angioplasty"* appeared. In this case, the Associated Press was willing to print "rank speculation" as news because it appeared in a medical journal. To many, it was infuriating that the Associated Press would allow itself to be used again as a tool by organized medical interests. **We were now to learn that angioplasty fails so often because of a virus that everybody has in their body? Incredible!**

I believe that part of the reason a "possible viral role in heart disease" was chosen for this particular piece/study is the important news that vitamin E prevents the Coxsackie virus from mutating. According to other articles this month, vitamin E prevents the virus from causing myocarditis, or inflammation of the heart. This unsigned AP article is designed to create confusion on this vitamin E issue.

The AP article does contain some interesting information. For example, it correctly points out that approximately 1/3 of 400,000 angioplasty operations have failed. Chelation doctors have been pointing to this phenomenon for years and explaining the double standard; **neither angioplasty nor coronary bypass were ever studied clinically before coming into widespread use, yet the safer Chelation therapy is "criticized" because conventional medicine claims that Chelation lacks appropriate studies**.

It is transparent that in this article, the AP; either wittingly or unwittingly, is spreading misinformation specifically designed to:

1. Delay the recognition of the real reason heart disease is so prevalent, chronic vitamin C deficiency. This allows up to 100 billion dollars a year to flow into medical and pharmaceutical coffers in unnecessary expenditures. By publicizing these 'red herring' articles in the guise of news, the AP has helped certain unscrupulous members of the medical community impede the march of science.

2. Blunt the effect of the news about vitamin E and viruses, thereby causing confusion,

3. Provide an excuse for the recognized long-term failure of angioplasty.

SUMMARY

The pattern is clear. Mix fact with fiction to protect the status quo, or at least not harm the reputation of pharmaceuticals. When studies damaging to these vested interests are published, a decision is made whether the "news" is likely to get much press on its own. As most readers already know, much legitimate science is collectively ignored by the mass media.

On the other hand, if some issue considered threatening to the status quo appears, a seemingly favorable "propaganda" article is crafted and disseminated, such as the *VITAMIN C INJECTIONS* or the *NEW FORM OF CHOLESTEROL (LP(a))*. These propaganda articles are accurate, but deflect the importance of the study by subtly distorting the results.

Finally, if all else fails, the disinformation technique is applied. We see propaganda designed to discredit legitimate science, e.g. the "junk food reduces heart disease mortality." It works because the average person cannot make sense of a stream of confusing articles.

The public accepts these AP stories as objective and factual, even though they are neither. Interested readers can view the actual AP articles cited here and clipped from the newspaper, along with several others, at http://www.internetwks.com/pauling/lie/index.html.

COUNTERATTACK

It has been said that knowledge is power; people cannot fight something without knowing it exists. First the reader should dispel the notion that much of what is reported by the major media, and medical magazines such as *PREVENTION*, has anything to do with the betterment of human health. **The objectives of the propaganda campaign are to promote the good health and serve the welfare of organized allopathic medicine and pharmaceutical interests.**

It seems to me that the M.D. or D. O. initials after one's name can be a powerful weapon against the campaign; a campaign that exists and works only as long as people don't generally realize that it exists. I encourage everyone to write to your newspapers, with a copy to the Associated Press, every time one of these questionable articles appears.

WHAT PROMPTED THE FEDS TO ATTACK VITAMIN C?



Watch Video At: https://youtu.be/IV2olDA0w8U

The profits of the 10 largest pharmaceutical companies in the Fortune 500 exceed the profits of the other 490 largest companies combined! — Marcia Angell, former editor of the New England Journal of Medicine

Fact: FDA-approved drugs are a leading cause of death and disability.

Fact: No vitamin has caused a death in the United States.

According to the CDC, there have been no deaths from a dietary supplement since 1997.

Current law allows the FDA to treat Vitamin C as a drug if a company tells the truth and claims vitamin C can "cure, mitigate, treat, and prevent" disease. As you will continue to learn in our series on Vitamin C, this substance is arguably better at successfully performing this mission than any drug on the market, without out any known toxicity.

The latest attack on Vitamin C is not the first time the FDA has attacked essential vitamin C by trying to create the impression that using it was illegal.

In 2009, the FDA attacked Proctor & Gamble for adding vitamin C to Vicks Children's cold medicine.

FDA: Procter & Gamble Unlawfully Marketing Two Vicks Cold and Flu Medicines Containing Vitamin C .

The nonprofit Vitamin C Foundation filed a Freedom of Information Act (FOIA) request and wrote to Proctor & Gamble.

This was the company's immediate response:

> *Thanks for contacting Vicks NyQuil, .*
>
> We appreciate the time you took to share this article with us, and I've shared it with the appropriate individuals on our team. For more than 30 years, NyQuil has provided safe and effective medicines to reduce the symptoms of cold and flu. Research has shown that levels of Vitamin C are depleted during times of illness. Vicks NyQuil Plus Vitamin C contains the combination of active ingredients to relieve cold and flu symptoms, and Vitamin C to replenish the body.
>
> Thanks again for getting in touch.
>
> Karen
> Vicks NyQuil Team

A Class Action Suit was filed over this. Proctor & Gamble's lawyers prevailed in court.

The FDA's FOIA response to the Vitamin C Foundation arrived five years later.

Another FDA Attack on Vitamin C For Injection Follows New Zealand 60 Minutes Segment

In December 2010, the FDA went after McGuff Pharmaceuticals, and McGuff's vitamin C for injection was taken off the market. This FDA action created a scare that intravenous Vitamin C for injection was an "unapproved drug," and ongoing trials of vitamin C and cancer were holted in the United States.

It was no coincidence that the McGuff brand was shown on a New Zealand television segment (60 Minutes) earlier that year. The 60 Minutes segment ended with a picture of the vial of McGuff's vitamin C for injection that miraculously saved the life of New Zealand rancher Allan Smith.

Smith's miracle recovery, in the face of his doctor's resistance to even try Vitamin C as a "useless vitamin," will be examined in greater detail in our vitamin C series. The message the FDA sent was clear: If you publicize the fact that Vitamin C can be used to treat and cure a major disease, we will go after you.

> Axis Page Popular Posts

The history of the feds attacking vitamin C shows that the Feds have little or nothing to do with the public interest or public health. The FDA response to the Vitamin C Foundation's Freedom of Information (FOIA) Requests revealed no complaints by the public.

MORE MONEY THAN GOD

It bears repeating: The former editor of the New England Journal of Medicine Marcia Angell revealed key in her. book ***The Truth About the Drug Companies: How They Deceive Us and What to Do About It***.

The profits of the 10 largest pharmaceutical companies in the Fortune 500 exceed the profits of the other 490 largest companies combined!

HAS THE U.S. GOVERNMENT BEEN INFILTRATED BY FOREIGN INFLUENCES?

The surprising answer is yes, according to an Apparition of the Virgin Mary.

Christians don't usually hear much about the great apparitions of the Holy Mother in church because the messages given during these supernatural appearance were often critical of church leadership. Author Ingo Swann, famous for his role in the CIA's Remote Viewing Program, studied first-hand reports. In 1996, Swann published the. fascinating book ***The Great Apparitions of Mary: An Examination of Twenty-Two Supranormal Appearances*.** Swann ends the book by asserting that, for all legitimate confirmed cases (*where it was later found that the individuals passing the apparition's message bodies never decomposed*), the apparition's statements and future predictions all came true.

In what may have prompted the "McCarthy Era," in 1949, the apparition appeared to Mary Ann Van Hoof in Needah, Wisconsin. The Holy Mother's message was clear:

She warned America that the United States Government, Media, and even the Churches were being infiltrated by communists.

From page 172 in Swann's book

For example, the literature indicates that immediately after the August 15, 1950, apparition, Mary Ann Van Hoof said that the Holy Mother had revealed to her that: … *The Enemy is in very branch of the government, the civil service, the news media, the armed service, the Pentagon, the priesthood, the Protestant ministry, bellhops in hotels … [The Virgin showed her] woman spies who flew back and forth from city to city working for the enemy, their femininity gaining them access."*

Van Hoof also exposed the fact that "thirty thousand communists were trained as priests to infiltrate the Catholic church. *Ministers were also trained to infiltrate the Protestant churches and strive for their destruction."*

The FDA Effectively Shuts Down the Vitamin C Foundation

For two decades, I have publicly shared my experiences and advice over the VitaminCFoundation.ORG web site. The FDA has so damaged this country such that exercising my constitutional right to free speech puts me in potential legal jeopardy. The Linus Pauling heart disease story could change the face of America, eliminate the maiming and killing being orchestrated by the FDA, and reduce the cost of healthcare overnight.

Small Change to FDA Law Makes All the Difference

The following link is our attorneys' recommendation for amending the federal Food, Drug, and Cosmetic Act so that food and dietary supplement products will not be regulated as drugs even if they make disease claims. If you find a Congressman or Congresswoman to introduce it, his or her legislative staff will format it for introduction as an amendment. Draft Amendment for the FDCA

Sign the Petition



"If the claims for vitamin C are correct, they might replace many lucrative and expensive medications. As they researched their landmark vitamin C book ASCORBATE: The Science of Vitamin C, Steve Hickey, PhD, and Hiliary Roberts, PhD, began to wonder if Linus Pauling's offense had been to discuss openly the properties of a substance that threatens the profitability of medicine."

CBS News Consultant Explains How Special Interests Manipulate the Media



Watch Video At: https://youtu.be/-bYAQ-ZZtEU

About the author

Owen graduated from the United States Air Force Academy in 1976. In 1996, after his career as a member of the technical staff with AT&T Bell Laboratories, Owen founded the nonprofit Vitamin C Foundation along with his brother Michael S. Till, Sr. Owen has since written more than thirty articles, and these papers have been published in assorted alternative medical journals including the Townsend Letter for Doctors and Patients, Nexus New Times, Life Extension Foundation magazine, American Naturopathic Medical Association Monitor, Florida ECO Report, International Council for Health Freedom Newsletter and Media By-Pass. Many of the themes in these articles have been incorporated in his book, **Vitamin C Cures** (Formerly Practicing Medicine Without A License? The Story of the Linus Pauling Therapy for Heart Disease).

Chapter 2 – The Secret Being Kept From Every American

vitaminccures.com/blog/index.php/2017/05/25/the-secret-being-kept-from-every-american/

OwenFonorow



Those who have read **Vitamin C Cures: Heart Disease** (formerly *Practicing Medicine Without a License*) know that modern medicine, orchestrated by Big Pharma, has been able to keep secret the true nature of cardiovascular disease, including heart disease and stroke. Chapter 2 of The Great Suppression is a review of chronic scurvy, aka heart disease, for those who haven't read Volume 1. Linus Pauling (and associates) discovered and patented a simple, low-cost, non-prescription, safe and effective cure for the number one killer of Americans.

What was Linus Pauling's reward for this great discovery? Ridicule. Over and over Pauling was ridiculed and portrayed in the mainstream media as a "nut" and a "quack" for recommending that people take more vitamin C than the government recommends.

There are thousands upon thousands of published scientific papers and articles about vitamin C, one of the most studied substances in the history of science, and some even have to do with heart disease. **Yet, there hasn't been a single study of Linus Pauling's specific high-dose vitamin C and lysine protocol**. Not one.

Chronic Scurvy and the Suppression of the Nature, Cause, and Cure for Heart Disease

The leading killer in the United States, the condition that those in the medical field call heart disease or occlusive cardiovascular disease, is really a low-grade form of the vitamin C deficiency disease scurvy.

Thank you, Linus Pauling.



Chapter 2 – The Great Suppression

The vitamin C deficiency disease scurvy is characterized by scab-like build-ups that slowly grow on the walls of blood vessels. The underlying disease process reduces the supply of blood to the heart and other organs resulting in angina ("heart cramp"), heart attack, and stroke. The correct terminology for this disease process is **chronic scurvy**, a sub-clinical form of the classic vitamin C deficiency disease. The fact that heart disease is caused by a vitamin C deficiency is becoming increasingly more difficult for modern medicine to deny.

Interestingly, under current federal law in the United States, a vitamin used to cure its deficiency disease is specifically excluded from FDA drug enforcement.

The true nature of cardiovascular disease was identified in the early 1950s by a Canadian team led by G. C. Willis, MD. This finding was confirmed in the late 1980s by leading scientist Linus Pauling, PhD. **Pauling alerted the world to this discovery in lectures, in writing, and on video after he and his associates conducted experiments that confirmed the Willis findings.**

To date, Pauling's announcement has never made its way into a mainstream media outlet.

Moreover, cardiologists are taught and routinely tell their patients that there is no connection between vitamin C and heart disease and there is no value in vitamin C in amounts much higher than the minuscule recommended daily allowance (RDA).

From a scientific standpoint, anyone who tries to challenge the true nature of cardiovascular disease should be made to cite experiments that refute the Pauling/Willis chronic scurvy hypothesis. However, such experiments have never been published.

It has been twenty-four years since Pauling began his lecture tour. Pharmacology professors Steven Hickey and Hilary Roberts in their recent book ***ASCORBATE: The Science of Vitamin C*** (2004) **document that there have been no independent experiments published that were designed to test the Pauling hypothesis** (except one at much lower doses that was conducted by Pauling's close associate Dr. Matthias Rath).

We are aware of only one clinical study in humans that has been carefully designed to test the Pauling high-dose hypothesis. The study was performed in the United Kingdom using a sample of 200 men over a period of three years, and the data confirmed Pauling's theory and therapy. Yet, so far, Dr. Kale Kenton's study has not appeared in a medical journal.

Many wonder, will the giant pharmaceutical industry facing these facts survive, or will it collapse in 2017? The public is beginning to realize that the world's most profitable industry is a very wealthy house of cards. Some believe that its most profitable products are at best useless, at worst dangerous. Prescription drugs beget more drugs. **The secret that could create difficulty for Big Pharma is that taking high doses of vitamin C and avoiding toxic prescription medications can help humans to achieve optimum health.**

The History of the Great Suppression

The 800,000 Americans who die needlessly every year are those who heed their cardiologist's advice. The American Heart Association estimates that 63 million Americans suffer from cardiovascular disease. More than 1 million undergo some form of heart operation, and over 15 million are taking statin cholesterol-lowering drugs on the advice of their doctor. These popular statin drugs are known to deplete CoQ10, which could cause heart failure.

The pioneering research into the relationship between vitamin C and heart disease began in the late 1940s, not long after the structure of vitamin C was determined. Canadian doctors proved that a vitamin C deficiency causes the condition commonly called atherosclerosis. **These doctors found that the condition will arise in 100 percent of vitamin C-deprived animal test subjects that don't make their own vitamin C.** Furthermore, these Canadian pioneers demonstrated that vitamin C alone reverses atherosclerosis in laboratory animals (**THE REVERSIBILITY OF ATHEROSCLEROSIS, G. C. Willis, Canad. M. A. J., July 15, 1957, Vol 77., Pg 106-109**). The team also performed similar studies in humans. The results, while not conclusive, showed reversals of atherosclerotic plaques in one-third of the human

subjects. Notably, these studies were of low oral doses of no more than 1500 mg per day (**SERIAL ARTERIOGRAPHY IN ATHEROSCLEROSIS, G. C. Willis, A. W. Light, W.S. Cow, Canad. M. A. J. Dec 1954, Vol 71, 1954, p. 562-568**).

The knowledge that heart disease is a form of scurvy has been suppressed since the first series of Willis's articles were published in the Canadian Medical Journal in the early 1950s. **Inexplicably, since the 1950s, no articles favorable to vitamin C and its connection with atherosclerosis have appeared in a reputable medical journal that is widely read by medical doctors.**
Cardiologists in training are taught that there is no relation between vitamin C intake and heart disease and that it is "quackery" to suggest otherwise. These assertions seem justified due to limited reports of such studies. **However, as vitamin C expert and pharmacological professor Steve Hickey points out, every cardiologist could have performed these studies on their own.**

> During an email correspondence in December of 2004, Dr. Steve Hickey wrote:
>
> *"Time has moved on and the medical profession has FAILED over the past 50 years to produce the required experiments. The budget of say the NIH alone is over 27 billion, but over the past 50 years no one has replicated the early vitamin C and heart disease research, which could be done by almost any cardiologist from petty cash. Since Pauling, and others, have promoted vitamin C as a cure for heart disease, it seems silly that a potential cure for the worst killer in the developed nations (atherosclerosis) has not been refuted. To a scientist from any other discipline, this lack of interest would be bizarre. It is a fact that the experiments have been done in animals and the results show that ascorbate protects against atherosclerosis and may reverse it. There is some additional evidence from human studies that is consistent with this interpretation. So why have the human studies not been performed? Or we may ask if they have been performed, was the data withheld? The enemies of Pauling, as well as the drug companies, would love to see the Pauling hypothesis discredited. Why have the experiments not been reported?"*

The Unified Theory Lecture Video

In a 1992 Unified Theory of Cardiovascular Disease lecture recorded on video, Linus Pauling explained the reason that atherosclerosis forms on the walls of arteries when vitamin C is deficient. This leading scientist explained how a specific form of cholesterol that compensates for low vitamin C causes plaque and why his discovery of a rapid cure for chronic scurvy includes the amino acid lysine. [*]



Watch Video At: https://youtu.be/PN8up1U6wNQ

There is no doubt that the news of this cure has been suppressed; otherwise, most of the public would have learned about the existence of this cure from two-time Nobel Prize winner Linus Pauling. Millions of people are dying needlessly due to a lack of disseminated knowledge of the Pauling discovery.

Is Linus Pauling's high-dose ascorbic acid (vitamin C) and amino acid therapy the cure for heart disease? The crime is that no one knows the answer.

Pauling and his former associate Dr. Matthias Rath did their part by running the experiments and attempting to publicize these discoveries. Now it is up to other researchers in the medical scientific community to do their part. If there is a chance that Drs. Willis, Pauling and Rath are correct, is it immoral or a crime-against-humanity that no further experimentation has been done? One could pose that medical science is controlled by the drug industry. The American Food and Drug Administration (FDA) is controlled by the drug industry. Even the United States National Institutes of Health (NIH) gives all appearances of being under the control of the drug industry, and it seems that not even members of the US Congress can overcome this obstacle.

Gross Negligence at the NIH

In the years 1998 and 2002, the Vitamin C Foundation submitted grant requests for government funding to study Dr. Pauling's theories. These requests were formally submitted to the new Office of Alternative Medicine at the NIH (**http://vitamincfoundation.org/NCCAMgrant**). The Foundation sought funding so that Linus Pauling's recommended therapy would be fairly investigated in humans.

All previously known tests have been performed with less than adequate amounts of vitamin C. **These grant applications also put the United States government on notice that Linus Pauling had made the claim of an outright cure for heart disease.**
The NIH was free to design, sponsor, and run their own study with their own choice of scientists. Had such studies been conducted, millions of lives and billions of dollars might have been saved. Unfortunately, the NIH Office of Alternative Medicine rejected both grant requests and failed to run their own studies.

Mike Till Sr. wrote, "*Both requests were turned down by the United States Government, not because the reviewers had any objection to the science or the protocols, but because the scientists and medical doctors that the Foundation recruited to run the study were 'inexperienced.' Apparently, investigators that run studies for the NIH have to be members of 'The Club.' This travesty is a matter of public record.*"

The Cholesterol-Lowering Drug Debacle

Many believe that cardiology has been on the wrong path for a long time. The result of this is that heart disease is still the leading cause of mortality in the United States and statin cholesterol-lowering drugs have become the top-selling class of prescription drug. Statin drugs generate more than $7 billion in annualized sales, but these drugs have significant side effects. vitamin C, with annualized sales close to $180 million, has the very same cholesterol-lowering property as the popular statin drugs.

In 1985, two years prior to the introduction of the popular statin cholesterol-lowering drugs, the scientists who were investigating the enzymes that help the body produce cholesterol made an important discovery. They discovered that vitamin C is a powerful anti-cholesterol agent. The vitamin C molecule inhibits the same enzyme, HMG CoA reductase, that the statin cholesterol-lowering drugs inhibit. [*]
Individuals using home cholesterol-monitoring devices such as the LifeStream® monitor, which is available in 55,000 retail outlets, report that 6000 mg to 10,000 mg of vitamin C may be required for maximum cholesterol-lowering effect.

Statin Drugs May Cause Heart Failure, Leading to Heart Transplants

The structure of coenzyme Q10 (CoQ10 or ubiquinone) was determined by the Merck scientist Karl Folkers after its discovery in 1957. [*] There have been at least 35 clinical studies showing CoQ10's massive benefits for heart patients, especially patients in heart failure. [*] In Japan, until last year, CoQ10 was a heart medication only available by prescription.
The drug giant Merck learned during their cholesterol-lowering research that statin drugs block the body's production of its own CoQ10. This blockage of CoQ10 synthesis is a serious action of statins that causes fatigue, muscle pain, and skeletal myopathy (a grave deterioration of muscle). **Drug advertisements in**

Canada must carry the CoQ10 statin-depletion warning, but the American FDA does not require these important warnings, which keeps US medical doctors in the dark and puts their patients at risk. [*]
Merck has more than one patent for adding CoQ10 to statins as a means of circumventing the issue of blocking CoQ10 biosynthesis (US Patent 4,933,165). The fact that Merck has had these patents since 1990 shows that members of the Merck corporation have been aware that statins cause muscle deterioration. However, the Merck patents were never implemented, most likely because the world supply of CoQ10 is far too limited to supply all statin drug users.

For many, it is sad and truly frightening that today's hottest-selling class of prescription drugs, statin cholesterol-lowering drugs, are known to deplete CoQ10 synthesis, yet these drugs are routinely prescribed to heart patients!

Transient Global Amnesia: Another Statin Side Effect?

Former NASA astronaut Duane Graveline, MD believes that the statin drug Lipitor® caused his own case of transient global amnesia, or TGA (**http://www.spacedoc.net/Statins_flyer.html**). Graveline believes that these drugs are the cause of a recent epidemic of TGA to hit emergency rooms. Fearing the dire possibilities of airline pilots who take statins, Dr. Graveline has begun a crusade to educate the medical profession and public about the potential danger of cholesterol-lowering drugs. The vitamin C foundation has posted its collection of concerns at **www.vitamincfoundation.org/statinalert**.

Chronic Scurvy Verified by CardioRetinometry®

It has long been known that human arteries weaken without vitamin C and other necessary nutritional support. Atheromas, or soft atherosclerotic plaques, are abnormal formations that appear in arteries. Dr. Pauling and associates theorized with Willis that such plaque formations serve to strengthen arteries because they appear most often where blood pressure is highest. At times, a weak artery can rupture, and the resulting clot can cause a heart attack or stroke. This condition is most properly characterized as chronic scurvy.
Atheromas in the microscopic arteries in the retina have been clearly visible to eye doctors, but until recently, they did not believe that such build-ups were reversible. Dr. Sidney Bush of the United Kingdom accidentally discovered that atheromas can be reversed in those patients instructed to take from 3,000 mg to 10,000 mg of vitamin C. Dr. Bush made his discovery while studying eye infections in contact lens wearers. Vitamin C was being tested as a preventive measure for these infections, and with

serendipity, Dr. Bush noticed that atheromas disappeared in the patients taking vitamin C. Dr. Bush reported that some patients require as much as 10,000 mg daily to reverse soft atheromas.

Dr. Bush has invented a new diagnostic technique that he calls CardioRetinometry. He believes this method of diagnosis will revolutionize cardiology. A new diagnostic technique can access coronary heart disease risk (CHD) suggested by universal retinal arterial atheroma, previously suspected as irreversible. Physicians, optometrists, and ophthalmologists were not expecting that vitamin C would have this effect.

Dr. Bush has also promoted the idea that chronic scurvy not only exists, but it also can be accurately measured. Eye doctors can now easily diagnose this condition by examining the microscopic arteries behind the eye before any symptoms of heart disease manifest.

Thanks to Dr. Bush, we now know that vitamin C can reverse the condition in short order at the optimal dosage determined by CardioRetinometry.
Dr. Bush has stated:

> ***"People today are under the extremely seriously mistaken impression that nobody dies of scurvy any more! These studies may prove that we are all dying faster from scurvy than hitherto suspected. The pericorneal vasculature, studied frequently by contact lens practitioners, shows that scurvy affects all humans some of the time and most of us most of the time. The largely unrecognized chronic subclinical form can best be diagnosed (and cured) by optometrists using sequential electronic retinal artery images and highly variable amounts vitamin C, occasionally with other nutrients."***

> **Cardioretinometry clearly demonstrates the relationship between vitamin C intake and "atheromas," plaques forming on the arteries that serve the retina in the eye. Dr. Bush has published before-and-after pictures taken with his new method and advocates for rigorous studies.**

The atheroma of the retinal arteries is a virtually perfect surrogate outcome predictor of coronary heart disease and will continue to be so as long as the eyes are connected to the rest of the system. Modern electronic eye cameras and microscopes with high-

definition magnification show the impact of cholesterol beautifully, as well as how it dissolves back into the bloodstream when the system is restored to balance. This effect is seen in arterioles too small to be seen with the naked eye!

While day-to-day variations in the pericorneal vessels are a relatively easy readable barometer of ephemeral scurvy, especially when viewed via the slit lamp biomicroscope of the contact lens practitioner, only a few dedicated medical practitioners have paid it attention.

The pericorneal arterioles and capillaries can and are graded in a system of practice into ten degrees of scurvy, allowing an accurate prediction to patients of how much or little vitamin C they have been eating. The highest mark anybody has had is 94%. When this grading began in 1997, Dr. Bush confounded his nursing staff by being able to correctly identify patients who ate no or few greens. But the same ease of observation does not attach to the identification of the chronic subclinical variety. It cannot identify dietary faults in the most recent past. In a similar way to the slow build-up of vitamin E in the body fat and cell walls of the brain, it takes over a month to confirm what is happening to the cholesterol in the retinal arteries.

Dr. Bush now has evidence that even calcified hard plaques can be reversed over the course of two years on a high vitamin C intake. This development throws a hammer into the Government/CODEX recommended daily allowance of 60 mg and the 2000 mg maximum tolerable allowance.

Given this information, it is imperative to have regular examinations of the retinal arteries by a suitably equipped optometrist trained in CardioRetinometry. After five years of observation of his patients' health, Dr. Bush believes that this is the most valuable safeguard of one's cardiovascular health in addition to the many other body systems that work closely with the cardiovascular system.

> ### Demonstrated Clinical Success in Reversing Atherosclerosis…
>
> Greetings,
>
> "We are using your product at our clinic and having demonstrated clinical success in reversing atherosclerosis (dosage is in range of 5,000-10,000 mg/ day). We are confirming the results with a capillary retinopathy diagnostic."
>
> Anonymous

The Path to the World of Vitamin C and Other Discoveries

In 1994, no one knew whether Linus Pauling's high vitamin C and lysine protocol actually worked. Our company, then Intelisoft Multimedia, Inc., (now Inteligent*Vitamin*C, Inc.) had obtained the rights to the Pauling video on heart disease [*] and tried to promote it. At that time, we had no financial interest in any nutritional product. Years later, we realized that Pauling's close associate Matthias Rath had not fully appreciated what Pauling had been advocating. (*We assumed this because of his company's low dosage recommendations*.) For this reason, we took on the task of promulgating Pauling's discoveries. **Tower Laboratories Corporation was willing to promote a new product with sufficiently high doses of vitamin C and lysine that matched Pauling's dosage recommendations.**

From the beginning, the Pauling therapy began to cure the incurable, miracle after miracle. Many of these testimonials have been written and are posted from at VitaminCCures.com. However, the media has not yet printed a word about this phenomenon.

Kevin Trudeau has written a book titled *Natural Cures 'They' Don't Want You to Know About* (naturalcures.com). Trudeau points out that it is against federal law to say that a particular product cures a disease without consent from the government. This mandate has angered not only Kevin, but also many others who strongly believe that these products could improve the health and lives of so many.

Rave Reviews About Volume 1: Vitamin C Cures: Heart Disease

> *"Of all the articles and books I have read on Vitamin C and heart disease, including Linus Pauling and heart disease,* ***Vitamin C Cures: Heart Disease*** *(Formerly Practicing Medicine Without A License)* ***is the best book on the market for explaining Linus Pauling Research on vitamin C and Lysine for curing heart disease****."*
>
> *Joanna*
>
> ---
>
> *The most valuable book I have ever owned…*
>
> *Mon Dec 6 10:42:05 CST 2010*
>
> *Owen Fonorow,*
>
> *"****The most valuable book I have ever owned is Practicing Medicine Without A license****. Please let me know when I will be able to obtain a copy of the Handbook Volume 2. Thank you for you valuable time."*
>
> *Sincerely Yours,*
>
> *Gloria Goetze*

September, 2011

Dear Owen Fonorow,

"I have been communicating with Sally Jewell for some time. ***I have not read a book that electrified me as much*** *and that answered questions that I had not been able to find answers to. I was mesmerized when your info clicked with what I had studied so hard before this. Owen, I have read volumes of books, newsletters, email entries from authentic and knowledgeable sources, etc. I belong to five libraries to find enough material. Since I do not listen to TV, I have the time to pursue other means of information. (I have been in multi-media P.R., sales and advertising for 25 years, and I know what the media usually has to offer… I wrote a lot of the hype.)*

Your writing is so easy to read, basic–like 2 plus 2 equals 4. I suggest that my students each read it for their own education and for their family and friends, especially if they have any heart problems.

By the way, I am deeply moved to be communicating with you. I am so impressed with the research you did to write such a book! It is indeed a breakthrough, not only for me but for many, many others."

Thank you,

Marna L'Amie

Mon Mar 10, 2008
"Congratulations on the book, it is terrific, well written, easy to read, and ***probably the best literary work on the subject since Pauling****. In fact it brings together not only Pauling's teachings, but adds so much with the testimonials and the information from other authors, such as Levy." –William Decker (Founder, Tower Laboratories Corp)*

Wed Mar 12 2008
"Owen, I just finished reading your book. ***Impressive****. I think you got it all covered and presented in a very understandable manner. I look forward to Vol II – let me know if I can help – I might have some stories." -George Van Giesen, MD*

Thu Mar 13 2008
"Hi Owen, ***What a super job you've done!*** *I'll buy it as soon as you get the shop going on the website. And very many thanks for all your flattery." -Sydney Bush, UK*

Mar 16 2008
*"Owen, Got the book……..****excellent****……..I'll be waiting to see you on Oprah, and I am not kidding."*

Thanks,
Barry E." – Illinois

Fri Jul 4 CDT 2008
"Hi Owen, I received your book from Sally Jewell. What an eye opener, I pray that people will get there hands on it. You are helping a lot of people, and your rewards will be great. ***I loved the testimonies in the book, I read them over and over****.*

The book on the whole is outstanding!"

"Hi Owen, Just want you to know that I finished your book and wrote a review, which has been published on Amazon. It's a rather comprehensive and very positive 5-star review, although I did make one criticism. I'm emailing you in fairness in case you or your associates might want to comment below my review in defense of the criticism. However (as I indicated in the review) ***the information you provided about lipoprotein(a) is exceptionally helpful, and that alone is worth more than the price of the book.***

The book on the whole is outstanding!"

With appreciation,
Fred Pauser (aka purposefirst)

Chapter 3 – The War Between Truth and Medicine

vitaminccures.com/blog/index.php/2017/05/27/chapter-3-the-war-between-truth-and-medicine/

OwenFonorow



The QuackBuster Menance

How I Met Tim Bolen

Author's note: I first met Tim Bolen after being sued for Defamation after this article was published. Please accept my sincere thank you Steven Barrett! (Although I would like to have the $40,000 in legal fees back that that frivolous lawsuit cost me.)

I decided to publish this back in 1996, risking a defamation suit, because the stooges were going after real doctors, and if I did irritate them enough to start a lawsuit, at least that would be time and resources that would otherwise have been trained on my new found heroes, alternative medical doctors.

We did prevail (as Tim Bolen always does against Barrett) in court.
http://www.illinoiscourts.gov/Opinions/AppellateCourt/2003/2ndDistrict/October/Html/2020886.htm

We almost nailed his attorneys too, who would have had to pay all court fees out of their own pockets if we had succeeded in a counter-suit based on an Illinois law against frivolous lawsuits).

THE MOST INACCURATE MEDICAL WEBSITE ON THE PLANET?

An Opinion by

© Owen R. Fonorow 1996 – Vitamin C Foundation

"The proposition is so very manifest that it seems ridiculous to take any pains to prove it; nor could it ever have been called in question had not the interested sophistry of merchants and manufacturers confounded

***the common sense of mankind*" (Adam Smith, Wealth of Nations, Book 4, 1776).**

It was distressing and disturbing to read Dr. Julian Whitaker's experiences in his letter to Lyn Behrens, Presdient of Loma Linda Univerisity published in the *Townsend Letter for Doctors and Patients*, and to learn that there is a computer generated "quack list" compiled by Messrs. John Renner, William Jarvis, Stephen Barrett and Victor Herbert. There is no place in today's society for black lists ala the McCarthy era, especially in science where the free exchange of ideas must be fostered.

If the great American scientific genius Linus Pauling is 'quack listed,' that indicates any person alive or dead can be labeled a 'quack.' If this label can be carelessly applied without question, many view this as a sad commentary on the state of science; especially the free exchange of 'unpopular' ideas and opinions in United States medicine.

This led many to wonder, how could such a list and organization that sponsors it, the National Council Against Health Fraud or NCAHF, exist in today's society? Does the quack list protect the public? Or are we witnessing something sinister; the stifling of scientific ideas and research results that would harm vested economic interests? **It is the author's contention that blatant economic self-interest is the only reason these self-proclaimed experts would take the risk of listing a great American scientific genius Linus Pauling on their 'quack list.'**

Could it be that these perpetrators of the quack list are *stooges* of the pharmaceutical consortiums?

There can be little question, the "quack" attacks similar to those made by Herbert, Renner, Barret and Jarvis seek to restrain trade by harming competition to traditional allopathic medical practice. This assertion is superbly documented in the recent book *RACKETEERING IN MEDICINE: The Suppression of Alternatives* by Dr. James P. Carter, MD, DPH. These people appear to care not who they list, as long as the person listed poses an economic threat to their vested interests. Pauling is a "quack" only because his prestige poses such a threat.

A SHORT THANK YOU TO VICTOR HERBERT

Dr. Victor Herbert, one of the compilers of the list, is owed a debt of gratitude. If it weren't for him, Linus Pauling may not have written his first book about Vitamin C. On page 251 of the fascinating book **Linus Pauling In His Own Words**, Pauling relates:

> "Here's this man, this professor – I didn't identify him when I wrote the book – Victor Herbert, who to this day keeps writing papers and giving speeches saying that no one benefits from taking extra vitamins … and he won't even look at the evidence.

> The upshot of this whole thing is that I finally became sufficiently irritated by this fellow that I decided I ought to do something about it. So I sat down one summer – here, downstairs in my study — and in two months wrote a book Vitamin C and the Common Cold." – Linus Pauling

We owe a debt of gratitude to Dr. Herbert, as the good his work has unintentionally perpetrated on mankind cannot be measured.

THE QUACK-LIST IS BASED IN ECONOMICS, NOT SCIENCE

Not much has changed in the 200 years since famed free market economist Adam Smith wrote the following words in The Wealth of Nations:

> "The violence and injustice of the rulers of mankind is an ancient evil, for which, I am afraid, the nature of human affairs can scarce admit of a remedy. But the mean rapacity, the monopolizing spirit of merchants and manufacturers, who neither are, nor ought to be, the rulers of mankind, though it cannot perhaps be corrected may very easily be prevented from disturbing the tranquility of anybody but themselves.
>
> That it was the spirit of monopoly, which originally both invented and propagated this doctrine cannot be doubted; and they who first taught it were by no means such fools as they who believed it. In every country it always is and must be the interest of the great body of the people to buy whatever they want of those who sell it cheapest. The proposition is so very manifest that it seems ridiculous to take any pains to prove it; nor could it ever have been called in question had not the interested sophistry of merchants and manufacturers confounded the common sense of mankind. Their interest is, in this respect, directly opposite to that of the great body of the people. As it is the interest of the freemen of a corporation to hinder the rest of the inhabitants from employing any workmen but themselves, so it is the interest of the merchants and manufacturers of every country to secure to themselves the monopoly of the home market."

After personally reviewing a small portion of the mountain of evidence written about vitamin C, **Linus Pauling felt that the proposition that "*Vitamin C is beneficial in amounts larger than the RDA*," based on 10,000 papers published during the 20th century, "*was so very manifest that it seemed ridiculous to take any pains to prove it.*"**

What many find hard to understand is why so few other competent medical researchers have reviewed all the evidence and weighed in.

Is it possible that the perpetrators of the 'quack list' have been able to intimidate an entire branch of medical research?

Some fear that this is true. If Pauling erred, it was by not taking into account the "interested sophistry of the drug merchants and drug manufactures to confound and confuse the common sense of mankind."

WHO ARE THE STOOGES?

Who are the men who wrap themselves in the cloak of science, yet call one of the greatest scientists of all time a "quack?" Who tell me that I am not qualified to examine the scientific evidence and make up my own mind, but do not think Linus Pauling qualified either? Who attack people and not their work? Who fail to cite any evidence of a substantial body of research that supports their position? Who, when they do cite evidence, usually cite it in the form of some well-publicized "negative" study (*e.g. the Finnish beta-carotene studies*) that they claim disproves certain facets of their opponents arguments? Why is it that these individuals feel they are qualified to identify 'quacks'? What are their qualifications, background, and education? How are they funded? Why should the public believe them, over say Linus Pauling? Were they at the top of the class in medical school? Do we even know if and where they went to medical school? Are their own patients happy with them? Do they even have patients?

The sad fact is that these individuals have much more influence on medical thinking than ordinary MDs. In order to satisfy an urge to learn "what doctors learn," the author attended a pre-med Therapeutic Nutrition course in 1994 while also copying the class notes from the basic (200) level nutrition course and purchasing the Biochemistry textbook.

Buried in the class notes for the basic nutrition course was a checklist entitled 'Ways To Spot A Quack.' The quack checklist is included as figure #1. On this evidence alone, the author concludes that name-calling is the way to affect change and direct thinking in the nutrition and medical research professions.

Although the 'Ways to Spot a Quack' checklist is silly, the author did not object to the inclusion of this highly inflammatory checklist in the nutritional materials, due to his belief in free speech. However, it was observed that there was no semblance of balance, or even pretense that some scientists held contrary views. **Yet the word "science" was repeated often; as though hearing the word was somehow reassuring to the instructor.**

These young adults are taught early in traditional pre-med nutrition, to their great detriment, that MDs who prescribe in excess of RDA are, by definition, quacks. Case closed.

The nutrition misinformation starts early in the life of a medical student. After reading about the Quack Busters and seeing this website, it is safe to attribute this brain-washing to four specific individuals: **wherein this article we will refer to them as**

'The Stooges.' Their influence on the medical profession is much larger than it should be because they are allowed to infect young minds first; early in their medical education, and without any significant challenge.

It is difficult to understand how schools that only present one side of a controversial issue during the educational process can be accredited. The message these young students learn immediately seems to be, "doctors may not think for themselves. They must follow the dictates of the profession — or else."

Any school that trains students on nutrition from the 'Ways To Spot a Quack' checklist, without also including relevant material with opposing viewpoints (on par with those of Linus Pauling), should question it's ability to maintain its accreditation.

QUACKBUSTERS.COM: SNAKE OIL ON THE INTERNET?

With a computer generated "quack list," one immediately wonders if it can be accessed via the Internet? A search began looking for the names of "quacks" in the author's area. The search uncovered the 'quack watch,' accessed at **http://www.quackbusters.com**, which is maintained by The Stooges. **This is not the correct URL.** The real web site does contain a great deal of funny material. Few competent medical scientists would want to be associated with such individuals.

It is interesting that The Stooges claim their entire web site is copyrighted, and all duplication is strictly prohibited. This causes one to wonder, why wouldn't they want this information disseminated as widely as possible and freely copied?

One possible answer is that this site isn't set up for the general public, or to influence true scientists. It is there to counter-balance the growing mountain of medical information available on the Internet and meant to "influence" youngsters attending medical and pre-medical schools.

AMA CRITERIA FOR JUDGING MEDICAL INFORMATION ON THE INTERNET

Last month, the AMA announced its standards for assessing the value of medical information on the Internet. Although wary at first, I now see the value in this criteria:

- **AUTHORSHIP**: Who wrote this and what do you know about their credentials and affiliations?

- **ATTRIBUTION**: Upon what evidence, sources, and references does the author base a position or conclusion? Are you getting someone's opinion (well founded or otherwise) or a string of anecdotes or scientifically valid statements placed in proper context?
- **DISCLOSURE**: Does the author of the site you're visiting have some kind of real or potential bias, because of economic, political or other considerations?
- **TIMELINESS**: How fresh is the information?

One may be interested to apply these criteria to the "quack busters" web site, run by Stephen Barrett, MD. The entire article on the "dark side" of the "quack" Linus Pauling is included as exhibit #2. It reads:

"Although Pauling's megavitamin claims lacked the evidence needed for acceptance by the scientific community, they have been accepted by large numbers of people who lack the scientific expertise to evaluate them. Thanks largely to Pauling's prestige, annual vitamin C sales in the United States have been in the hundreds of millions of dollars for many years. The physical damage to people he led astray cannot be measured."

This is a serious statement. The man who received the Nobel Peace Prize for almost single handily stopping above ground nuclear testing in the 1960s stands accused of causing "immeasurable physical damage to people."

In order to apply the AMA criteria, we must ask the following questions. Do we know who wrote the page and their credentials and associations? Yes; Stephen Barrett, MD, takes credit for the site, although other names are also listed there.

What about Attribution? Does the site contain references? **There are none listed on the Pauling page.**

The lack of references for making such a serious charge against Linus Pauling is striking. Dr. Stephen Barrett is entitled to his opinion, but I would expect him to cite a reference for his claim that the recommendations of Linus Pauling caused anybody harm, much less "physical damage" that "can not be measured." **He does not cite a single unreferenced example of harm.**

What about disclosure? Is the site visitor made aware of the financial affiliations that may indicate a bias?

Finally, what about timeliness? This criteria is not that important unless there has been on-going research, however **The Stooges waited until after the death of Linus Pauling to publish their opinions.**

It does not appear that the site meets the guidelines under the AMA's own criteria. If one trusts the AMA, then one would not place any credence in the aforementioned material.

A CASE FOR LINUS PAULING?

The illnesses that Frederick Klenner, MD, found that he could treat with high dosages of vitamin C include most viruses, (e.g. the common cold and the flu), crib deaths (commonly attributed to suffocation), crib syndrome, viral encephalitis, herpes simplex virus, diphtheria, hemolytic streptococcus and staphylococcus infections, trichinosis, measles, herpes z. (chicken pox), herpetic lesions, sub clinical scurvy, elevated cholesterol, heavy metal poisoning, monoxide poisoning, pseudamonis, shock, hepatitis, mononucleosis, urethritis, chronic cystitis, simple stress of pregnancy, glaucoma, schizophrenia, arthritis, tooth decay, abdominal wounds, rheumatic heart, tuberculosis, pneumococci, heat stroke, chronic myelocytic leukemia, pancreatis, severe burns, and several others. He also reported reductions in kidney and gallstones, and dramatic improvements in coronary artery disease.
– Lendon Smith, Clinical Guide to Vitamin C

There is little doubt that Linus Pauling was human. Even when the discoverer of the alpha helix made one of his few mistakes, such as the now infamous incorrect hypothesis for the three dimensional structure of DNA, several people out of billions in the world would have had the capacity to understand the mistake, much less offer a competing hypothesis. From the recent biography *Linus Pauling In His Own Words*, on page 150 Barbara Marinacci writes "*Pauling had first met Albert Einstein in 1927, when the latter attended a Pauling lecture at Caltech – afterward declaring that he would have to learn more about chemistry in order to understand what Pauling had said. "Linus Pauling – now there's a genius!" [Einstein] is reported to have commented in later years to an acquaintance.*"

It seems ludicrous that a computer scientist by training, who does not have the medical credentials to even bear the label "quack," must defend some 30 years of medical research work by Linus Pauling.

One can't argue with Barrett's last sentence, which reads that the "damage to people [Pauling] led astray cannot be measured," **for there was no such damage**. On the contrary, it is relatively easy to measure the great benefit to the U.S. and world population since Linus Pauling's book on vitamin C was first published.

Furthermore, as Barrett freely acknowledges, much of the high volume of vitamin C that is consumed in this country can be traced to the prestige of one man: Linus Pauling. Pauling pleads guilty on this charge. And what do we now know about the intake of higher levels of vitamin C (higher than the U. S. RDA)?

One must first consider "the harm" to the man Linus Pauling himself. First stricken with an illness, considered terminal in the 1940s, Pauling lived and begun taking a multivitamin tablet. In his sixties, after learning about the value of large amounts of

vitamin C from Irwin Stone, he began consuming 18 gm of ascorbic acid daily to approximate what animals produce in their own bodies. He died at the age of 93, some 30 years later with a clear mind and remarkably active body. Thanks to an increased intake of vitamin C, other antioxidants, and other vitamins; mankind has the benefit of 30 years of medical research, conducted by one of our greatest scientists, during a period in life when most of us hope to be able to enjoy golf during our retirements. **18,000 mg of vitamin C did not harm Linus Pauling.**

Science supports Pauling, as well. Vitamin C and Heart Disease: A Chronology, issued by the Linus Pauling Institute of Science and Medicine, provides the historical background for what follows:

- 1941: Canadian cardiologist Dr. J. C. Patterson reports that more than 80% of his heart disease patients have low vitamin C levels.
- 1954: Dr. G. C. Willis shows that vitamin C supplementation can reduce arterial deposits.
- 1960: Biochemist Irwin Stone and others recommend increased dietary vitamin C supplementation to improve health.
- 1970: Dr. Linus Pauling publishes his first book on vitamin C.
- 1970: Vitamin C consumption in the U.S. rises by 300%. Mortality from heart disease decreases by 30% in the U.S.-the only country with a significant drop in heart disease fatalities.
- 1986: Dr. Pauling summarizes the evidence for vitamin C against heart disease and other diseases in his book “How to Live Longer and Feel Better”, which becomes a best-seller.
- 1989: Dr. Rath and Dr. Pauling discover that optimum dietary vitamin C prevents the deposition of lipoprotein(a) in artery walls.
- 1991: Dr. Rath and Dr. Pauling publish “Solution to the Puzzle of Human Cardiovascular Disease”. This scientific paper explains (a) that vitamin C deficiency is the direct and most frequent cause of heart attacks, (b) how plasma risk factors lead to atherosclerotic deposits in arterial walls, (c) why humans suffer from heart attack and stroke but rarely from failure of other organs, and (d) why animal species who are able to produce their own vitamin C in the body do not develop heart disease.
- 1992: Dr. Enstrom and colleagues (UCLA) show in over 11,000 Americans that increased intake of vitamin C reduces the death rate from heart disease by nearly half and prolongs life for more than six years.

After Dr. Pauling’s book was written, as Dr. Barrett acknowledges, vitamin C consumption in the U. S. rose by 300%, according to the Pauling institute. Mortality from heart disease decreased by 30%-40% in the U. S., the only country with a significant drop in heart disease fatalities.

This causes one to wonder, is it a coincidence or correlation?

We now know, thanks to Dr. Enstrom, that increased intake of vitamin C (approximately 500 mg) reduces the rate of heart disease by nearly half, and prolongs life for nearly six years. This is a benefit that can be measured; the number of lives saved can be calculated.

If one attributed this reduction in the death rate of heart disease entirely to vitamin C, then gratitude is almost entirely due to Linus Pauling. We can compute roughly 6,250,000 lives that have been saved over the past 25 years. **According to the American Heart Association, somebody dies of heart disease in the U. S. every 34 seconds**. This means approximately 927,158 people die in this country every year. Assuming a 30% higher death rate otherwise, then roughly (on average) 250,000 more people would have died prematurely this year.

Although a recent news story based on a published medical journal article attributes the 30-40% drop in the heart disease death rate to an ingredient in junk food, this author concludes that a more reasonable hypothesis, based upon the Enstrom study and the Pauling/Rath work on Heart Disease, is as follows. **The increase in Vitamin C alone, not junk food, is the most important reason for this significant drop in the heart disease fatality rate.**

Thanks to the many years of fine research work by E. Cheraskin, MD, DMD, et. al. at the University of Alabama, as summarized in the book The Vitamin C Connection,

> **"There are more than ten thousand published scientific papers that make it quite clear that there is not one body process (such as what goes on inside cells or tissues) and not one disease or syndrome (from the common cold to leprosy) that is not influenced — directly or indirectly — by vitamin C."**

Dr. Cheraskin discusses some of this research in his most recent book *Vitamin C: Who Needs It?* This new book is based on 50 randomized and double blind clinical studies.

Irwin Stone's insights are from his classic 1976 book *The Healing Factor: Vitamin C Against Disease.* Stone begins his book by stating,

> **"The purpose of this book is to correct an error in orientation which occurred in 1912, when ascorbic acid, twenty years before its actual discovery and synthesis, was designated as the trace nutrient, vitamin C.**

> Scurvy, in 1912, was considered solely as a dietary disturbance. This hypothesis has been accepted practically unchallenged and has dominated scientific and medical thinking for the past sixty years. The purpose of this vitamin C hypothesis was to produce a rationale for the conquest of frank clinical scurvy. That it did and with much success, using minute doses of vitamin C. Frank clinical scurvy is now a rare disease in the developed countries because the amounts of ascorbic acid in certain foodstuffs are sufficient for its prevention. However, in the elimination of frank clinical scurvy, a more insidious condition, subclinical scurvy, remained; since it was less dramatic, it was glossed over and overlooked. Correction of subclinical scurvy needs more ascorbic acid than occurs naturally in our diet, requiring other non-dietary intakes. Subclinical scurvy is the basis for many of the ills of mankind.
>
> Because of this uncritical acceptance of a misaligned nutritional hypothesis, the bulk of the clinical research on the use of ascorbic acid in the treatment of diseases other than scurvy has been more like exercises in home economics than in the therapy of the sequelae of a fatal, genetic liver-enzyme disease. One of the objects of this book is to take the human physiology of ascorbic acid out of the dead-end of nutrition and put it where it belongs, in medical genetics. In medical genetics, wide vistas of preventive medicine and therapy are opened up by the full correction of this human error of carbohydrate metabolism."

Later, Stone adds the following,

> *"We can surmise that the production of ascorbic acid was an early accomplishment of the life process because of its wide distribution in nearly all present-day living organisms. It is produced in comparatively large amounts in the simplest plants and the most complex; it is synthesized in the most primitive animal species as well as in the most highly organized. Except possibly for a few microorganisms, those species of animals that cannot make their own ascorbic acid are the exceptions and require it in their food if they are to survive. Without it, life cannot exist. Because of its nearly universal presence in both plants and animals we can also assume that its production was well organized before the time when evolving life forms diverged along separate plant and animal lines."*

Robert Cathcart, III, MD, after reading Pauling's *Vitamin C and the Common Cold* book and trying vitamin C, discovered that he could control a recurring infectious illness acquired in childhood. After reading all he could on the subject, he began treating patients with "bowel tolerance" doses of vitamin C. In 1981, after observing 9,000 patients (today after observing more than 20,000 patients) on high dosages of vitamin C, Cathcart describes the bowel tolerance phenomenon. Patients whom can only tolerate 4-15 gm of vitamin C per day when well, tolerate much more vitamin C when ill or when their bodies are otherwise under stress. The proponents of the 60 mg RDA of vitamin C have yet to explain why the human body seems to require ascorbic acid in such large magnitudes for these temporary periods, while under stress. They have had 16 years to formulate their response. However, medical science responds with silence. **The important work of Cathcart is ignored by the mainstream.**

Furthermore, on the vitamin C front, it is important to summarize the findings of one physician who accidentally discovered some of the most important medicinal properties of ascorbic acid. Frederick Robert Klenner, MD wrote in a 1974 paper SIGNIFICANCE OF HIGH DAILY INTAKE OF ASCORBIC ACID IN PREVENTIVE MEDICINE as reprinted in Roger J. William's Handbook of Orthomolecular Medicine,

"A few grams of ascorbic acid, given by needle, while [physicians] waited for laboratory procedures or examination to fit their schedule, could have saved their lives. I know this to be a fact because I have been in similar situations and by routinely employing ascorbic acid have seen death take a holiday. In a paper title "An Insidious Virus," I reasoned that it should be a maxim of medicine for large doses of vitamin C to be given in all pathological conditions while the physician ponders his diagnosis. The wisdom of this dictum is backed by many hundred cases under our supervision…"

According to Klenner, the importance of daily high intake of ascorbic acid in preventive medicine has no limits. Klenner recites, among some 28 papers that he wrote on his clinical experience, the litany of human illnesses he was successfully able to treat with administration of large doses of the vitamin.

The illnesses that Frederick Klenner, MD, found that he could treat with high dosages of vitamin C include most viruses, (e.g. the common cold and the flu), crib deaths (commonly attributed to suffocation), crib syndrome, viral encephalitis, herpes simplex virus, diphtheria, hemolytic streptococcus and staphylococcus infections, trichinosis, measles, herpes z. (chicken pox), herpetic lesions, sub clinical scurvy, elevated cholesterol, heavy metal poisoning, monoxide poisoning, pseudamonis, shock, hepatitis, mononucleosis, urethritis, chronic cystitis, simple stress of pregnancy, glaucoma, schizophrenia, arthritis, tooth decay, abdominal wounds, rheumatic heart, tuberculosis, pneumococci, heat stroke, chronic myelocytic leukemia, pancreatis, severe burns, and several others. He also reported reductions in kidney and gallstones, and dramatic improvements in coronary artery disease. **– Lendon Smith, Clinical Guide to Vitamin C**

Much of his experience has been clinically confirmed by the few physicians who employ so-called 'megadoses' of vitamin C; one of these being Dr. Robert Cathcart, III. Klenner's papers include detailed and sound medical reasoning why ascorbate is so effective in treating each of these illnesses. This 1974 summary paper stated that

"The potential is so great and the employment so elementary that only the illiterate will continue to deny its [vitamin c] use."

> **"The proposition is so very manifest that it seems ridiculous to take any pains to prove it; nor could it ever have been called in question had not the interested sophistry of merchants and manufacturers confounded the common sense of mankind."**

E. Cheraksin, M.D., D.M.D., in his recent book Vitamin C: Who Needs It? states that,

"So, what do the experts tell us about a vitamin C connection in the control of sugar metabolism?

We turned to five of the leading textbooks dealing with diabetes mellitus published during the last five years. Would you believe? There was not one word indicating any connection — or a lack of correlation — between ascorbic acid and carbohydrate metabolism!

This is even more incomprehensible when one realizes that reviews of the literature as far back as 1940 showed that blood sugar can be predictably reduced with intravenous ascorbate."

In this decade, one of the greatest minds of all time is now labeled a "quack" because of his efforts to bring this, and the 10,000 various other scientific studies and reports, to the attention of the medical profession and mankind.

It is probable that the suppression of this knowledge, as practiced by The Stooges and their ilk, continues to perpetuate great harm upon mankind.

According to Dr. A. Hoffer, MD, Ph.D., in his recent article *THE VITAMIN PARADIGM WARS*, folic acid is another safe water-soluble vitamin (*thus one The Stooges have maintained is only necessary in the amount that prevent its deficiency disease*) and one where the cost of not using it can be calculated. According to Dr. Hoffer,

> *"folic acid has been used in doses up to 15 mg daily. There has been a report that this dose caused gastrointestinal disturbances but in another study with the same dose this was not seen. Most patients do not need more than 5 mg.* ***Recently it has been proven that women will give birth to babies with spina bifida and similar Neural Tube Defects (NTD) much less frequently if they take supplemental folic acid, 1 mg per day****. I generally recommend 5 mg daily. Dr. Smithells[25] in 1982 showed that giving pregnant women extra folic acid decreased the incidence of NTD's. Before that he had measured the red cell folate and white cell vitamin C levels of mothers who had babies with NTD's and found they were lower in both.* ***It was thus known since 1981 that a multivitamin preparation containing folic acid would decrease the birth of these damaged babies.***
>
> *The immediate reaction to the original findings was one of strong disbelief and hostility, and the establishment refused to advise women to take folic acid until the requisite*

number of double blind experiments was done. ***At last they are satisfied 11 years later, culminating with a report in J. American Med Ass in 1989. Folic acid provided protection for most causes of the defect****. Even in women with a family history, the frequency of babies with the defects was more than five times greater – 18 per 1000 against 3.5 per 1000, in women who did not take the vitamin in the first six weeks of pregnancy.* ***How many babies could have been saved by such a simple solution? Even if the original findings had been wrong, what harm would it have done to have advised them immediately about this very important finding?*** *I was astonished in 1981 at the vehemence of the reaction by physicians and nutritionists, and I am still astonished.* ***The recent studies showed that folic acid decreased NTD's by 75 percent. If all the other vitamins were used as well I am certain that figure would be closer to 100 percent.***

I cannot recall in the past 40 years a single female patient of mine on vitamins giving birth to any child with a congenital defect. *I have been able to advise them all that they not only would not harm their developing baby by taking vitamins, but that their chances of giving birth to a defective child would be greatly diminished. I was frequently asked this by my patients who had been told by their doctors that they must stop all their vitamins while pregnant. They looked upon vitamins as toxic drugs. I am still asked the same question for the same reason today.*

However, governments can learn and respond. It is now official that pregnant women should take extra folic acid in order to prevent spina bifida and other birth defects*. The U.S. Public Health Service has issued the following advisory: "In order to reduce the frequency of NTD's (neural-tube defects) and their resulting disability, the United States Public Health Service recommends that: All women of childbearing age capable of becoming pregnant should consume 0.4 mg of folic acid per day for the purpose of reducing their risk of having a pregnancy affected with spina bifida or other NTD's".* ***This amount will not be provided by most diets and requires supplementation.*** *Apparently the US Public Health Service is considering fortifying bread with folic acid. Folic acid is destroyed by heat but some will survive.*

In USA about 25,000 babies are born each year with spina bifida. *In Canada it has been estimated that each of these children will have cost about $40,000 by the time they are 14 years of age. Giving women folic acid early in their pregnancy would have avoided perhaps 3/4 of these births.* ***Over ten years, while the cautious scientists were discussing whether folic acid was safe enough and was effective, 250,000 children were born at a total cost of 10 billion dollars*** *(over ten years).*

Folic acid for pennies per day could have saved the United States public 7.5 billions dollars over this ten year period. The saving in public health dollars will be enormous. The waste in this long delay is inexcusable, since folic acid is totally safe and could have been given to all pregnant

> ***women over ten years ago. This is the cost of inactivity, of the conservative stance of the profession when it comes to the super safe vitamins."***

We then proceed to Vitamin E, Vitamin A, the various B vitamins, the amino acids, and so on. Hundreds of books could be, and have been, written describing this research. **The only people who do not seem to know about it are the traditional allopathic medical doctors.** Their ignorance is, in large part, due to the conscious activity of The ***Stooges*** over the years.

There can be little doubt that Linus Pauling saved lives and helped countless people improve their lives. The enormous loss of life, which this author attributes to the "super-quackery" of The Stooges for the pharmaceutical industry, can be measured. Had they not tried to influence medical thinking against the vitamins and other nutrients through propaganda aimed at pre-medical programs and text books, more people would have postponed premature death, felt better, been healthier, avoided birth defects and a myriad of other illnesses.

MOTIVE

One may ask, what motive could there possibly be to keep this knowledge from the medical profession? For sake of argument, lets assume Linus Pauling was absolutely right and that Hoffer, Klenner, Stone, Cheraskin, Cathcart, *et. al.* are correct also. Lets assume that every disease these pioneers discovered could be treated with large amounts of vitamin C, because they are actually caused by inadequate vitamin C in the body because of a genetic defect. What would this mean to the pharmaceutical industry and allopathic medicine? **This author hypothesizes that it would bring absolute devastation**. By any calculation, the numbers approach the national debt.

Heart disease alone is reported to cost the U.S. around 100 billion dollars a year, or almost a trillion dollars since Pauling/Rath announced it can be 'completely controlled.' There are equally outrageous sums paid every year to treat cancer, arthritis, the common cold, viral infections, diabetes, allergies, and so on.

If you have heart disease today, it may be fair to put some of the blame on The ***Stooges***. If you have cancer today, a large part of the blame could lie at the feet of The ***Stooges***. If you suffer from, or know of any person who suffered or died from any of the illnesses that Dr. Fred Klenner discovered could be treated with vitamin C, one could also blame The ***Stooges*** and their ilk.

The ***Stooges*** have no interest in science, unless a particular study seems to prop up their side; and little interest in the welfare of the average patient. They do not appear to be interested in evidence. If they can't attack people's work, they attack people's credentials or defame them. They are name callers. No M.D. or medical researcher

wants to bear the label “quack,” and The ***Stooges*** do their best to keep ordinary MDs from straying too far from the party line. As Dr. Whitaker pointed out in his letter, these individuals don’t even pretend to consider the merits of opposing views. They appear afraid of debate. They appear to have no interest in the truth. They are in place for one primary reason, in my opinion, to influence the thinking of new doctors entering the medical profession. Their web site has no other purpose than this end. They influence “old” doctors, as well. Doctors must be told there is no value in nutrients as long as the fiction can hold out, because there are no good economic alternatives for the allopathic medical profession or their pharmaceutical benefactors.

WHAT ABOUT A VOLUNTARY FINANCIAL DISCLOSURE?

For the record, this author is willing to examine the proposition that he is wrong; that The ***Stooges*** are top-notch medical professionals with no monetary incentive whose only objective in life is the betterment of public health. Maybe they really are who they purport to be; humanitarians who, although misguided or poorly trained, really believe what they write and say?

As Dr. Matthias Rath might say, “How can we prove this?”

One way would be a full voluntary public disclosure of their financial records! Perhaps The Quack Busters/ Stooges, as men of integrity with nothing to hide, would be willing to publicly disclose their financial status and especially sources? Such an act would engender the utmost respect and help them meet the AMA Disclosure criteria.

Therefore, I issue the following formal public challenge to The Stooges:

Because the understanding of financial motivation is fundamental to whether or not your interpretations of medicine and nutrition can be believed, and in order to encourage the early release of this vital information, and if you expect the public to take your advise seriously, you should be willing to provide a complete financial disclosure statement. Please identify the sources and amounts of all grants, gifts, fees, payments etc. you and your NHACF and other related organization have received over the past 15 years. The public is interested as far back as 1984. Please post this disclosure on your web site. Also, please provide the name of your auditing/accounting firm.

P.S. We are all very interested in your supplemental vitamin intakes as well.

CONCLUSION AND CALL TO ACTION

> *"There is a principle which is a bar against all information, which is proof against all argument, and which cannot fail to keep a man in everlasting ignorance. That principle is condemnation without investigation." –Herbert Spencer*

It must be admitted that there are quacks in the medical profession. That said, upon reading the quack list, the normally pejorative term "quack" has taken on a benevolent meaning for me; it now summons to mind a doctor who is open-minded, who is focused on prevention, who is leery of drugs and surgery unless absolutely necessary, and who prefers a nutritional or holistic approach. The "quack" does not follow blindly the dictates of his or her profession. When he or she knows of a treatment that might help the patient, although currently not accepted in the profession, he or she offers it nonetheless.

However, it is unthinkable that name-calling is tolerated by the medical profession and especially medical researchers. Only in the medical profession, to my knowledge, is this behavior the norm.

The NCAHF and their "quack database" is not about medical quackery. It is about the suppression of an alternative medical viewpoint because it threatens the economic base of a powerful segment of society.

In fact, never have so few stood to lose so much as they do if the medical professional dam against the mega-vitamins breaks.

The ***Stooges*** waited until after Linus Pauling passed away to publish their defamation of him. If the American scientist Linus Pauling can be intimidated by these people, that means that any researcher, any where, and at any time can also be intimidated. **This article took the unusual step of "name calling" in hopes that it will stimulate researchers who are "on the fence" or on the other side to find the research and prove me wrong**.

So, what if anything can be done to limit the influence of The Stooges?
Abraham Lincoln said that you can fool some of the people all the time. The people that this author worries most about are young medical students. One would hope that medical doctors from United States medical schools would not graduate ignorant. Therefore, this author suggests that the 2,500 "quacks" blacklisted file a class action suite against The Stooges for restraint of trade, if not outright Racketeering. Such action would be a great service to their profession. The Stooges web site makes a strong case that can be used against them in the court of public opinion, if not a court of law. Their web site does not meet the AMA criteria. Their "quack list" proves that they employ unethical, unprofessional, and unscientific practices.

There is a cancer in the medical profession, which now requires surgery. All previous "non invasive" procedures, such as logical arguments with a gentlemanly approach, have failed. The 2,500 quacks listed can take further action to improve the

public perception of the medical profession by filing complaints and bringing The Stooges before their state medical boards. This author believes that these measures are indicated, especially since the physical damage done to the people The ***Stooges*** have led astray can be measured.

Owen R. Fonorow

Monitor the War Between Truth and Medicine
Current Status of the Quackpot Menace by Tim Bolen

Chapter 4 – The Great Prescription Drug Hoax

vitaminccures.com/blog/index.php/2017/06/02/chapter-4-the-great-prescription-drug-hoax/

OwenFonorow



"At least 70 pharmaceutical drugs are on the market after passing clinical trials based on fraudulent data provided by a California doctor," said **Kurt Eichenwald**, an investigative reporter for The New York Times…

An opinion

by

Owen Fonorow – **Vitamin C Foundation**

Doctors' Strike in Israel is Good for Health, Bad for Funeral Homes

MAY 1999: An ongoing strike by medical doctors in Israel has put a severe economic strain on the funeral business in that country. The dramatic decline in the death rate is prompting the burial association to ask the Government to approve an increase in doctors' pay. According to the newspaper **The Jerusalem Sun, death rates have dropped considerably in the past three months in most of the country since physicians in public hospitals implemented a program of sanctions, according to a survey of burial societies.**

> *"The number of funerals we have performed has fallen drastically," said Hananya Shahor, the veteran director of Jerusalem's Kehilat Yerushalayim burial society. "This month, there were only 93 funerals compared with 153 in May 1999, 133 in the same month in 1998, and 139 in May 1997," he said. The society handles 55% of all deaths in the Jerusalem metropolitan area. Last April, there were only 130 deaths compared with 150 or more in previous Aprils. "I can't explain why," said Mr Shahor."*

Meir Adler, manager of the Shamgar Funeral Parlour, which buries most other residents of Jerusalem, declared with much more certainty, "**There definitely is a connection between the doctors' sanctions and fewer deaths**. We saw the same thing in 1983 [when the Israel Medical Association applied sanctions for four and

a half months].” Sources tell this author that the same phenomenon occurred in British Columbia during a doctor’s strike in Canada (**Lancet Article: http://www.bmj.com/cgi/content/full/320/7249/1561**).

Are Prescription Drugs Designed to Make People Sick? A Deduction

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> *“Dec 2003: Senior executive Allen Roses, of GlaxoSmithKline, is quoted in a national newspaper as stating that more than 90% of drugs only work in 30-50% of people.”*

Medicine, impersonating science, has co-opted the word “proof” to provide comfort to the gullible; and in so doing it has tarnished the reputations of science as well as of medicine. When the medical profession pretends that there is such a thing as scientific proof, labeling their remedies as proven and decrying unproven alternatives, it seems unaware that in physical science there are only guesses, hypotheses, theories and few laws. Only repeatable experiments determine truth. To the degree that medicine relies on carefully conducted experiments and collects data without preconceived notions, which can be duplicated and criticized by other scientists, it follows generally accepted scientific principles. Conclusions may be drawn, but to imply that there are proven methods for controlling disease, is to lie.

WHEN MEDICAL PROOF MEETS REALITY

The problem with a medical system based upon “proof” is that, over time, people discover that unproven remedies work and so-called proven remedies may not. The common cold is a good example. Millions have discovered that there is a simple “cure” for the common cold, before the virus takes hold. The public may not be able to verify for themselves whether or not medical “science” is right about the likes of heart disease and cancer, but thanks to Linus Pauling, many have discovered that it is easy to stop the cold virus in its tracks.

The public is becoming increasingly aware that something is rotten in the state of medicine. Generally, doctors are well educated in the arts that do not directly compete with prescription drugs, e.g., diagnosis, surgery and trauma treatment. Regrettably, doctors receive little or no training in non-prescription substances, which are ignored by medical authorities as unproven. When proven remedies fail, and unproven remedies easily succeed, the reputation of all scientists is unfairly harmed.

Linus Pauling is the prime example of a scientist whose reputation has been unfairly impugned. The void in medical school surrounding the therapeutic uses of nutrients, especially vitamin C, is conspicuous and can hardly be accidental. The result is that medical doctors are losing their good reputations and fewer patients are tolerating this

nutrition-ignorance. **In 1998, the AMA revealed that Americans made more visits (above 100 million more) to alternative practitioners than regular doctors.**

Most people, and almost all medical doctors, still believe that prescription drugs are based in good science, and that pharmaceutical companies offer them in good faith. The truth, however, is not difficult to uncover. Many top selling prescription drugs are useless; *some even cause the disease for which they are prescribed.*

CLEANSING THE MEDICAL MIND

Doctors take lives into their hands, and people want to believe that medical care is infallible; despite all evidence to the contrary. We wish to believe that science has proven remedies. It isn't pleasant to hear drug company senior executives tell the world that clinical trials are "generally useless," and that most drugs do not work on most people as advertised. Nor is it pleasant to learn that many common medical procedures were never "proven" before becoming adopted and generally accepted by the medical profession.

It has been easy to condition the masses to accept much nonsense in the name of science. Those who believe that science has not discovered the cures for primary chronic diseases, probably believe that the following 'truths' are self-evident,

1. *Cholesterol is the enemy.*

2. *Medicine/Cardiology is based upon strict science.*

3. *Medical Doctors, cardiologists and pharmaceutical companies always behave in the patient's best interest.*

4. *There is no connection between Heart Disease and Vitamin C*

The problem is that doctors graduate from medical schools convinced that there is little or no proven therapeutic value to anything other than "scientifically tested" prescription drugs. Why is it that such bright people, skeptical about almost everything, are not skeptical about the claims made for the drugs they push? Are deliberate prevaricators in control of medicine and medical curricula?

One thing is clear; orthodox medical doctors do not offer better, more effective, safer and cheaper options for treating chronic disease because they lack that particular training and appear to have little respect for the value of "unproven" antioxidant, vitamin, mineral, amino acid, and enzyme supplementation.

Any "conspiracy theory" implies that it has been possible to deceive an entire profession, and to brainwash the public, simply by the frequent use of the word "science." There are the 'Quackbusters,' who work to discredit alternatives to prescription drugs; including those who advocate such alternatives. (It is difficult to believe that the 'Quackbusters' influence medical classrooms and texts). It hardly seems likely that medical education could be so tightly controlled, that all doctors are cut from the same mold. In any case, the nutrition-vacuum in orthodox medical education is pervasive, serving more than one master. The legal right to prescribe drugs, after all, is what separates MDs from chiropractors and other physicians.

Whatever the reason, medical students truly believe that their education is based upon the pursuit of truth. However, the author has observed the mind-control techniques used in medical schools, most notably during classes on nutrition. These techniques are often adopted and used by medical authorities and writers in the media.

The first technique is to present any benefit of any non-prescription substance in a way that casts doubt upon its value. Authorities use the words "may" or "might" in conjunction with any nonprescription substance and a therapeutic value. The positive clinical responses to drugs are rarely qualified, leading to a biased and highly distorted view of the medical universe.

Nutrients are often ignored entirely in medical school course materials, but if they must be covered the professor will phrase sentences that create doubt in the student's mind, such as "*Vitamin C **may** reduce endothelial dysfunction*."

They cast little doubt as to the possible side effects of vitamins., stating that " *Vitamin C **causes** kidney stones*."

In an early nutrition class, there was a checklist on quacks included with the course materials. This material implied that anyone who prescribed more than the 10-times the Recommended Daily Allowance (RDA) of a vitamin was, by definition, a quack. However, vitamin C may be a poor example. The reason for taking another class was to learn 'therapeutic nutrition', however, vitamin C was not mentioned once during the entire semester!

Another common technique is to imply that large, extended and expensive studies are required before a medical finding becomes is 'proven.' Medical students are told repeatedly that pharmaceutical medications are products of extensive research, and that only such findings should be trusted. For a detailed account of how far medical "science" has veered off track, see the Hickey/Roberts book **Tarnished Gold: The Sickness of Evidence-based Medicine**. For example, small studies can notice a large effect. Large studies are required to notice small effects.

Professors and medical textbook writers express little doubt about positive clinical results of prescription drugs, stating that "*cholesterol drugs **are proven** life savers.*"

Again, even suggesting to medical students that anything can be "proven" in science is a lie to begin with; but this is what is taught. This conditioning by medical authority figures during their schooling builds confidence in prescription drugs and reinforces the idea that medical education is scientifically based, and that the science of nutrition is second-rate or even fraudulent.

To the medical student, remarkable claims for vitamins and antioxidants seem fantastic and are easily dismissed and curiosity, fundamental to good science, is suppressed. It is ironic that medical doctors consider themselves firmly grounded in science, and are generally looked upon as authorities in the field of human health.

These techniques work because no one wants to believe: a) medical students are being brainwashed (*certainly not those misinformed medical students*), b) new graduates are incompetent, or c) pharmaceutical companies would promulgate known untruths regarding matters so fundamental to human life and health.

This unfair treatment; the absurd force-feeding of 'selected' information surrounding nutrition science, the main competitor to prescription drugs, occurs in medical schools presently, and an enormous amount of dangerous legal drugs are sold as the result.

This deliberate withholding of beneficial information has harmed all human beings.

FAKE PRESCRIPTION DRUGS

"The Big Lie is a finely tuned technique used with great success by totalitarian regimes. A complete falsehood is repeated. People come to believe it, despite all arguments or evidence to the contrary. Repetition is essential."

Most people believe it reasonable to think that science has failed, in that the cures for cancer and heart disease are unknown. There are a growing number of concerned scientists who question the claims being made regarding pharmaceuticals, which generally treat rather than cure disease. This skepticism of the interpretations of medical science used to sell drugs is bolstered from the observance that truth in prescription drug advertising would irreversibly erode sales.

The dilemma facing pharmaceutical executives is real. **They are forced to lie rather than telling the truth, as the truth would most likely lead them to go out of business**. Medical doctors, conditioned to accept pharmaceuticals as products of rigorous science, have become pawns of the pharmaceutical companies. Doctors that legitimize the marketing and sale of ineffective and dangerous prescription drugs, perhaps unknowingly, cause injury and death of millions.

ANTACIDS – ONE $20 BILLION MARKET BEGETS ANOTHER $20 BILLION MARKET

The popular antacid drugs, which block the formation of stomach acid, are an example of prescription drugs that may cause harm. Could the evolution of human beings be so imperfect that we require a drastic reduction or elimination of stomach acid? Drugs such as Prilosec® and Nexium® earn their makers $20 billion. These "nuclear" acid-blockers cause additional health problems by interfering with normal digestion, problems that few would connect to the antacids.

Research has substantiated the finding that antacids interfere with digestion, cause poor nutrient absorption, and interfere with the "acid barrier" that keeps lower tract bacteria in the lower tract. Jonathan Wright, MD, claims that acid-blocking drugs lead to increased rates of infection, nutrient deficiencies and possibly blindness in his book **Why Stomach Acid Is Good for You: Natural Relief from Heartburn, Indigestion, Reflux and GERD** (Jonathan Wright with Lane Lenard).

Whether intentional or not, poor absorption of minerals and other vital nutrients caused by the use of antacids creates another $20 billion market, the antidepressant prescription drug market. For example, low stomach acid leads to poor vitamin B12 absorption. When vitamin B12 is not absorbed, depression is often the result.

THE GREAT STATIN DRUG HOAX

The most dangerous hoax has been the "statin" cholesterol-lowering drugs. These drugs are sold to more than 25 million people worldwide, earning their makers more than $20 billion dollars annually. Touted as "life saving," statin drugs can actually cause heart disease. These drugs weaken muscle, leading to heart failure; and at high enough dosages without antioxidant support, could lead to a need for heart transplant. These drugs are the wrong prescription for anyone, much less heart patients.

U.S. doctors are not warned that artificial HMG-CoA reductase inhibitors (statins) also inhibit the synthesis of coenzyme-Q10. With high statin dosages, serum levels of CoQ10 inevitably decline, which causes muscle myopathy in many patients. The Merck pharmaceutical company, which sells Zocor®, has several 1990 U.S. patents protecting the means to correct this serious problem. Canadian advertisements for Lipitor® and Zocor® contain a warning about CoQ10 depletion, however these warnings are noticeably absent in the United States' advertisements.

Most medical doctors do not know what coenzyme Q10 is, so they don't know of its great importance in cardiovascular health.

It is known that the millions of statin users and their doctors are unaware that ascorbic acid (vitamin C) is important in the regulation of endogenous cholesterol synthesis in humans. It has been known since 1986 that this vitamin, like the statin drugs, block the same HMG-CoA enzyme that is required for the body to mass-produce cholesterol. Vitamin C deficiency induces the body to produce more cholesterol. In 1992, the world's only twice-unshared Nobel Prize winner, Linus Pauling, made a video where he has stated, "*heart disease is a chronic vitamin C deficiency*." Pauling's thesis is compelling

and supported by conclusive laboratory experiments. **His brilliant, patented, nonprescription cure for cardiovascular disease is readily available to the public.**

It is difficult for reasonable people, especially medical doctors conditioned to believe that prescription drugs are well researched, to believe that pharmaceutical companies would hide the truth about matters of life and death, or that the FDA would stand by and permit it.

It is common sense to question the need for lowering cholesterol. As the human species evolved to produce cholesterol in large quantities, why does the liver make more cholesterol as the intake declines? If these statin drugs are so beneficial, why is cardiovascular disease still the leading cause of death in the United States, and why do the authors and researchers of the most recent statin studies keep their raw mortality data secret?

If one stops and considers these findings, he/she may realize that artificial cholesterol lowering, by itself, is unlikely to improve health or increase their longevity. Studies have shown that these statin drugs, as is the case with many prescription drugs, do more harm than good. Better results occur with concurrent antioxidant usage, but this knowledge is deliberately kept clouded. **Statin cholesterol lowering drugs are products of the best science money can buy. They seem to have been designed to create an even larger market for medical care. Their marketing, which doctors fail to question, contains distortions, half-truths, and deceit.**

PHARMACEUTICAL ADVERTISING IS SICK

> *LOS ANGELES, 2000: Mark Hughes, the 44-year-old founder of Herbalife International Inc. was found dead in his bed May 21. He died from a combination of alcohol and the prescription anti-depressant Doxepin (Reuters).*

How can we protect our children from the new wave of prescription drug advertisements on television? **According to the American Medical Association, adverse reactions to prescription and over-the-counter pharmaceuticals are a leading cause of death and injury in the United States.** The massive propaganda ad campaign on TV teaches everyone, especially kids, that drug use is okay. No wonder so many kids think it is okay to use illegal drugs! How are they supposed to tell the difference? As of this writing, there is a doctor's strike in Israel. The death rate has fallen so sharply during the strike that the Israeli funeral parlors and burial societies are complaining. One of the reasons the Japanese live so long is that prescription drugs are considered a last resort in Japan.

Prescription drugs are dangerous and extremely hazardous to one's health. Children watching television in the United States are being trained to think otherwise. In the absurd dreamland of a TV prescription drug commercial, there is a pill for every ill.

Parents may laugh at the side effects, but it all becomes normal to a child. Where is the D-chip to protect our children from "ethical" drug ads?

If the truth was known, our children would be asking us how and why drug companies are allowed to sell cholesterol-lowering drugs that at normal dosages cause cancer in laboratory mice.

Not all pills are created equal. Recently, the U. S. National Academy of Sciences announced that it has increased what used to be called the Recommended Daily Allowance (RDA) of vitamin C and vitamin E. While this seemed to be good news on the surface, the council spoke with a forked tongue. These meager RDA increases were announced in an alarming press release. The council wrote that the mounting evidence for higher antioxidant vitamins is "flimsy." Taking high amounts of antioxidants might be harmful, or so the council claimed; ignoring a mountain of recent evidence to the contrary.

The National Science Council's reasoning is why we as laymen get lost trying to follow medical thinking. As far as anyone knows, there hasn't been a single death caused by an overdose of either vitamin C or vitamin E. For that matter, one can find no evidence that any person has ever died taking too much of any vitamin or amino acid. It is now reasonably well documented that the vast majority of "ill effects" comes from taking too little of these and other vitamins. However, all dangers increase while taking prescription drugs. When the medical profession acts like a business, it cautions us about taking antioxidants, while pushing dangerous prescription drugs down our throats.

Is population control the hidden agenda?

The National Academy of Science could cite no evidence that taking too much vitamin C causes harm, but prescription drugs are another matter. As reported on June 16, 2000 by Rueters, Mark Hughes, the 44-year-old millionaire and the founder of Herbalife International Inc., was found dead in his bed on May 21. He died from an "accidental overdose of alcohol and the prescription anti- depressant Doxepin." According to the Los Angeles County Coroner, who ruled out foul play, "Mr. Hughes was taking Doxepin to help him sleep."

A recent study by Dr. Bruce H. Pomeranz, the principal investigator and neuroscience professor at the University of Toronto, sheds light on this phenomenon. Dr. Pomeranz estimated that bad reactions to prescription and over-the-counter medicines kill more than 100,000 (76,000 to 137,000) Americans and seriously injure an additional 2.1 million every year. Such reactions, which do not include prescribing errors or drug abuse, rank between fourth and sixth among causes of death. **His study was published in the April 15, 1998 Journal of the American Medical Association (JAMA), but garnered little publicity.**

One month later, the same American Medical Association explained why Americans are following the Japanese lead and have turned in massive numbers to the so-called Alternative Medicine. **The surprising answer? People think it works better!** The surprising study appeared in the May 20, 1998 JAMA entitled WHY PATIENTS USE ALTERNATIVE MEDICINE (p. 1548-1553). Stanford researchers, on the basis of a National study, estimate that Americans made 425 million visits to alternative health care providers in 1990, a figure that exceeded the number of visits to allopathic primary care physicians during the same period by almost 100 million visits! **47% of these physicians also reported using alternative therapies themselves, while 23% incorporated them into their practices.**

The reasons people gave for using Alternative Medicine are surprising. According to the JAMA article, the two most frequently endorsed benefits are, "I get relief for my symptoms, the pain or discomfort is less or goes away, I feel better," and "The treatment works better for my particular health problem than standard medicine's." **According to the study author, these responses were unexpected and suggest that the most influential or salient factor in people's decision to use alternative health care may be its perceived efficacy.**

One may ask, where's the catch?

Drugs kill. Vitamins, amino acids, herbs and minerals are not only safe, easy to obtain, and far less expensive than prescription drugs; they also seem to promote health and make many pharmaceuticals unnecessary. The clinical experience of medical doctors, e.g., Robert C. Atkins in his recent book VITA- NUTRIENT SOLUTION, confirms the Stanford survey. **Many vitamins, minerals, herbs, amino acids and various other non-toxic vital substances are more therapeutically effective at high dosages than their dangerous drug counterparts!**

COMPARATIVE CAUSES OF DEATH. ANNUAL AVERAGE IN THE U. S.

Adverse Drug Reactions: 100,000 to 140,000
Automobile Accidents: 39,325
Food Contamination: 9,100
Boating Accidents: 2,064
Household Cleaners: 74
Acute Pesticide Poisoning: 12
All Vitamins: 0
Amino Acids: 0
Herbal Products: 0

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*Sources Data as of 1995 from American Association of Poison Control Centers, National Center for Health Statistics, Journal of the American Medical Association, Centers for Disease Control, March of Dimes, Consumer Product Safety Commission, FDA Reports.

We now know why the pharmaceutical industry feels compelled to spend massive money on drug advertising aimed at our children. The future survival of these two industries, funeral parlors and pharmaceuticals. are at stake!

For more information:

Doctors Strike in Israel: http://www.bmj.com/cgi/content/full/320/7249/1561
Herbal Life Founder Overdose: http://news.excite.com/news/r/000616/18/people-hughes
RDA increase: http://www.vitaminCfoundation.org/RDA.htm

Tenet Healthcare Paying $54 Million In Fraud Settlement

By KURT EICHENWALDAUG. 7, 2003

The Tenet Healthcare Corporation agreed yesterday to pay $54 million to resolve government accusations that doctors at a hospital in Northern California conducted unnecessary heart procedures and operations on hundreds of patients.

The settlement is the largest in a case involving what is known as medical necessity fraud, or billing government health programs for tests and treatments that the patient's condition did not require.

The settlement pre-empts any civil and criminal charges by the Justice Department against Tenet, its hospital division and the hospital itself, which did not admit wrongdoing. Nevertheless, in settling, Tenet signaled it would rather pay a record fine than argue in court that there was a medical reason for the patients to undergo the procedures or operations.

Under the agreement, the Department of Health and Human Services is allowed to continue its own inquiry to determine whether Tenet and its hospitals should be barred from federal health programs, including Medicare. Criminal and civil investigations of individuals are continuing. Moreover, former patients can proceed with their lawsuits against Tenet, the hospital and the doctors.

Owen R. Fonorow

Chapter 5 – The Greatest Medical Tragedy of All Time

vitaminccures.com/blog/index.php/2017/06/06/chapter-5-the-greatest-medical-tragedy-of-all-time/

OwenFonorow



CoQ10 and Statins: *The Vitamin C Connection*

An opinion by

Owen R. Fonorow © 2003 – **Vitamin C Foundation**

> "We are now in a position to witness the unfolding of the greatest medical tragedy of all time – **never before in history has the medical establishment knowingly created a life threatening nutrient deficiency in millions of otherwise healthy people**." Peter H. Langsjoen, MD

Ubiquinone (CoQ10) is a popular heart medication. Until 2001, it was only available by prescription in Japan. Much of the public is unaware that an increasingly popular class of cardiovascular drugs called statins (HMG-CoA reductase inhibitors) interferes with the body's synthesis of CoQ10. Top selling statin drugs, such as Lipitor® and Zocor®, earn their makers over 20 billion dollars per year. These drugs lower the endogenous production of cholesterol and are often touted as "life saving" by cardiologists and the media.

Are the statin drugs really good for us, or are cardiologists mistaken? How can drugs that lower the body's production of CoQ10, a co-enzyme required for energy utilization, benefit heart patients? Are the health benefits attributed to CoQ10 supplementation hype, or is it that there is something fundamentally wrong with the thinking and science being used by those who market statin drugs?

COQ10 BASICS

Coenzyme Q10 is a vitamin-like fat-soluble antioxidant found in the body, and the highest concentrations have been measured in vital organs such as the heart and pancreas. At age 20, the heart has a higher CoQ10 level than other major organs. At age 80 this is no longer true, as the heart levels reduce by more than half. Over 35 controlled clinical trials in Japan, Europe, and the U.S. have proven that CoQ10 therapy is highly

effective in treatment of congestive heart failure, angina and ischemic heart disease, and myocardial infarction. **It is now believed that CoQ10 is the key nutrient for generating 95 percent of the total energy required by the human body.**

A healthy, youthful human body can make its own CoQ10. Endogenous production or biosynthesis of CoQ10 has 17 steps, requiring at least seven vitamins (vitamin B2 – riboflavin, vitamin B3 – niacinamide, vitamin B6, folic acid, vitamin B12, vitamin C, and pantothenic acid) and several trace elements.

Merck, a pharmaceutical giant, has known for more than 15 years that statin drugs interfere with CoQ10 biosynthesis, which leads to low serum levels. Low serum levels can cause damage to one's body, specifically causing muscles (and internal orgams) to atrophy. The following claim from a 1990 Merck patent (4,933,165) discusses the addition of CoQ10 to statin drugs, in order to overcome statin induced myopathy.

> "A pharmaceutical composition comprising a pharmaceutical carrier and an effective antihypercholesterolemic amount of an HMG-CoA reductase inhibitor and an amount of Coenzyme Q.sub.10 effective to counteract HMG-CoA reductase inhibitor-associated skeletal muscle myopathy."

This invention has never been implemented, most likely because the entire world supply of CoQ10 is limited, and current production would only supply one-sixth of the world's statin users.

VARIOUS HEALTH BENEFITS ATTRIBUTED TO COQ10

The CoQ10 science has accelerated from its discovery in 1957 until the present day. The following headlines summarize the many clinical studies that have shown CoQ10 supplementation beneficial in disease conditions ranging from Parkinson's disease to cataracts. Dosages studied range from 30 mg to 1200 mg daily. Higher dosages have generally been found to be more beneficial.

1. **CoQ10 gives complete protection against stroke**

Since 1972, in studies of stroke in three animal models (dog, rat, gerbil), ubiquinone (coq10) was the only agent giving complete protection. This was over two times more often than the next best agent (naloxone) of the many tested to date. – John Ely

2. **CoQ10 benefits patients with cardiovascular disease**

CoQ10 levels in heart tissue decline disproportionately with age. CoQ10 pioneer Karl Folkers (1985), in agreement with earlier Japanese studies, found lower CoQ10 levels in patients with more severe heart disease and showed that CoQ10 supplements significantly raised blood and heart tissue levels of CoQ10 in these patients.

3. **CoQ10 improves high blood pressure**

“At least six clinical trials have shown a blood pressure-lowering effect of CoQ10.

4. **CoQ10 for Parkinson’s disease**

“Less disability developed in subjects on CoQ10 than in those on placebo, and the benefit was greatest in people receiving the highest dosage (1200 mg).”

5. **CoQ10 benefits people with kidney failure**

“Because CoQ10 has the potential to revolutionize the treatment of chronic renal failure, a large-scale, long-term study should be initiated as soon as possible.” -Alan Gaby

6. **CoQ10 for youthful skin**

“Just recently scientists have also discovered that this natural supplement may even slow down the skin’s aging process. Gerson Unna confirmed that, like vitamin E, Co-Q10 slows down tissue damage by decreasing the effect of free radical molecules. In a placebo-controlled study, researchers at Beiersdorf discovered that after six weeks of daily treatment on crow’s feet (eye wrinkles), wrinkle depth was reduced by 27 percent; after 10 weeks, fine lines and wrinkles were reduced by a surprising 43 percent. The enzyme also has been effective in the reduction and fading of age spots and is touted by Beiersdorf for its lack of toxicity.”

7. **CoQ10 Effective for Migraine Prevention**

8. **CoQ10 Therapy can improve glucose control in Type 2 diabetics**

9. **400 mg CoQ10 reportedly induced cancer remissions.**

These are just a few of the benefits that scientists uncovered when supplementing with CoQ10.

COQ10 SUPPLEMENTATION IS NECESSARY AS WE AGE

The late Dr. John Ely of the University of Washington believed that CoQ10 supplementation is essential in the aged. Most people make approximately 500 mg of Coq10 daily in the body, at least up until age 21. Between ages 21 and 30, levels of CoQ10 begin to drop, perhaps because of aging. This causes the degeneration of cells, which may contribute to age-related diseases and conditions such as high blood pressure, arthritis, heart disease and the breakdown of skin tissue.

Statin drugs and deficiencies in several other vitamins also cause blood levels of CoQ10 to drop.

According to the late Dr. Ely,

> "Possibly the most important details not reported previously are those related to CoQ10 body pool and turnover rate that mandate human supplementation. Adult human body pool has been found to be approximately 2 grams and requires replacement of about 0.5 grams/day based on its average turnover rate of about 4 days in various tissues. This must be supplied either by endogenous synthesis or from exogenous sources. Synthesis decreases progressively in humans above age 21. Furthermore, the average ubiquinone content of the western diet is less than 5 mg/day. Thus, ubiquinone supplementation appears to be the only way for older people, and certainly the ill, to obtain the major proportion of the 0.5 gram/day need. Failure to supplement by the aged, ill or stressed, can have tragic consequences in the form of irreversible damage in the brain, other organs and mitochondria everywhere" (http://faculty.washington.edu/ely/turnover.htm).

CoQ10 pioneer Karl Folkers claimed that the primary source of CoQ10 in man is biosynthesis. **Folkers argues that "suboptimal nutrient intake in man is almost universal causing subsequent secondary impairment in CoQ10 biosynthesis."** According to CoQ10 expert Peter H. Langsjoen, MD. "This means that average or "normal" levels of CoQ10 are really suboptimal and the very low levels observed in advanced disease states represent only the tip of a deficiency iceberg."

THE VITAMIN C CONNECTION

Vitamin C is a "natural" HMG-CoA reductase inhibitor. It was observed experimentally that when vitamin C levels are low, cholesterol becomes elevated; and when more vitamin C is consumed, cholesterol levels decline. The mechanism by which vitamin C lowers cholesterol was discovered circa 1985. High vitamin C levels inhibit the same the HMG-CoA Reductase enzyme as statin drugs. The inescapable conclusion is that vitamin C does what statins do, lowers cholesterol, without side effects. If the statin drugs were patterned after vitamin C, they lack many other benefits of the vitamin. **For example, vitamin C promotes the production of coenzyme Q10 and lowers Lp(a).**

It is interesting that in addition to vitamin C, our bodies require many B vitamins to synthesize CoQ10. Voluminous research has found beneficial effects from ascorbic acid supplementation similar to the effects found from smaller dose CoQ10 supplementation. For example, in a recent study, hydro soluble CoQ10 supplementation was shown to lower circulating levels of Lp(a). One could speculate that some of vitamin C's similar effects may be due to increased endogenous CoQ10 synthesis, induced by the ascorbic acid along with generally better nutrition.

Every human body makes up to 500 mg of CoQ10 daily, and no human body can make vitamin C. As important as CoQ10 is for health, vitamin C is even more important, perhaps an order of magnitude. Most mammals synthesize ten times more vitamin C than CoQ10, when adjusted for body weight. Under normal circumstances,

the daily amount of ascorbic acid produced by mammals lies between 3,000 mg and 15,000 mg, with an average of 5,400 mg, when adjusted for comparison to the weight of the average male human being.

The Vitamin C Foundation concludes that everyone should supplement 3,000 mg to 6,000mg vitamin C daily from birth, including during pregnancy. On the other hand; healthy, well-nourished children will usually synthesize their own CoQ10. With the possible exception of athletes, persons taking vitamin C should not have to supplement CoQ10 until the fourth or fifth decade of life (*unless they are taking several drugs, including statins*). Athletes have a high requirement for CoQ10 and may benefit from supplementation earlier in life.

THE STATIN DILEMMA

The question persists, how can statin drugs that deplete levels of CoQ10 be "life saving?" Not only do statins used to treat elevated blood cholesterol levels by blocking cholesterol biosynthesis also block CoQ10 biosynthesis, most CoQ10 and vitamin E molecules circulate through the bloodstream attached to LDL particles.

> According Dr. Langsjoen,
>
> "The resulting lowering of blood CoQ10 level is due to the partially shared biosynthetic pathway of CoQ10 and cholesterol. In patients with heart failure this is more than a laboratory observation. It has a significant harmful effect which can be negated by oral CoQ10 supplementation."

So, are "safe" statin drugs the next "aspirin?" There is considerable hype in reporting the science behind cholesterol lowering drugs. We found, by chasing down many of the media stories which suggest benefit, that most stories are either hoaxes or highly speculative. In the world of media hype, an estimated 0.4 % reduction in plaque creates worldwide news. Furthermore, it is difficult to formulate an overall theory that explains the reported benefits.

The first "red flag" one encounters researching the statin studies is that the raw mortality data is being kept a closely guarded secret. The data is summarized, but it is surprisingly hard to inspect the raw data of studies published in peer-reviewed journals. This mortality data allegedly supports the "life saving" claims made for statins. This is true of the Heart Protection Study (HPS) managed by Oxford University.

According to Candian statistician Eddie Vos, after millions of statin pills, the studies that have summarized or released the data have reported no change in mortality curves. Within these studies, the graphs of the placebo and statin groups touch.

"Massive benefits proclaims Oxford University about its 2002 HPS study, "the world's largest cholesterol-lowering trial". 75% of heart attacks still happen and 300 people on

the drug for 12 months to postpone the death of just 1 of them. Massive drug use, few lives saved. The next European study claiming benefit in high-risk elderly, PROSPER, found 6 lives saved but 24 more cancer deaths, and more new cancers in each of 4 years in a group with 52 fewer smokers. Zero "anything" benefit was next found in the ALLHAT trial in 10 year younger North Americans: 1 death postponed per 1.1 million $3-pills taken! Next was Lipitor's ASCOT study: also no mortality benefit. From 10 years ago: cholesterol lowering by any means caused 150 more deaths per 100,000 patient-years of intervention" (www-health-heart.org).

The HPS paper published in the Lancet medical journal could cause one to be wary of the claims made by the authors. HPS reportedly had four study groups, 1) a placebo group, 2) a placebo-plus-antioxidant-vitamins group, 3) a statin group and 4) a statin-plus-antioxidant-vitamins group. A second paper devoted to the antioxidant vitamins was published; implying that claims of "massive benefit" in the first paper is between the statins and placebo. However, the paper is written without even a summary of the supporting data, and these results could very well have been between the statins-plus-antioxidants group 4 against the placebo group 1. The authors appear to carefully avoid this issue.

The HPS paper does not discuss the differences between the statins group 3 and statins-and-antioxidants group 4 versus placebo, a point of interest to many. Instead, they published the second paper diverting attention from this issue. **The refusal to publish and share the data may indicate that there is something to hide**.

British author/researcher Malcolm Kendrick, MD, comments about HPS study,

> "In the Heart Protection Study (HPS), a major study in which the rate of deaths was (reportedly) reduced in patients taking a statin (simvastatin), at post-mortem, the people who had been taking the statin had bigger and more complex plaques than those who had not."

VITAMIN C AND MORTALITY

Vitamin C's proven effect on mortality stands in stark contrast to the statin drugs. According to author Bill Sardi,

> "Vitamin C is the only vitamin repeatedly proven to increase the human life span when taken in doses that exceed dietary levels of this vitamin."

This observation was recently confirmed again in Britain.

CONCLUSION: Low blood vitamin C concentrations in the older British population are strongly predictive of mortality.

Antioxidant vitamins and mortality in older persons: findings from the nutrition add-on study to the Medical Research Council

Trial of Assessment and Management of Older People in the Community.

In November 2003, the British Centre for Ageing and Public Health, London School of Hygiene and Tropical Medicine, United Kingdom published their findings of a direct correlation between low vitamin C and increased mortality.

> "We found a strong inverse relationship for blood ascorbate (vitamin C) concentrations with all-cause and cardiovascular disease mortality, which were only marginally reduced after adjustment for confounders or supplement use. Those in the lowest fifth (< 17 micromol/L) had the highest mortality, whereas those in the highest fifth (> 66 micromol/L) had a mortality risk nearly half that (hazard ratio = 0.54; 95% CI: 0.34, 0.84). Similar r
> esults were found after the exclusion of those subjects with cardiovascular disease or cancer at baseline (hazard ratio = 0.51; 0.28, 0.93). In fully adjusted models, there was no evidence for an influence of alpha-tocopherol (vitamin-E), beta-carotene, or retinol (vitamin-A) on total mortality. Dietary antioxidants measured by the food-frequency questionnaire were not associated with all-cause or cardiovascular disease mortality" (astrid.fletcher@lshtm.ac.uk).

ADVERSE SIDE EFFECTS OF STATIN CHOLESTEROL-LOWERING DRUGS

The following headlines from HEALTHFREEDOMNEWS reveal the many little-known side effects of the 'artificial' Statin drugs. Some of these side effects are required to be reported in Canadian statin drug ads, however this is not required in the U. S. medical journals.

Possible Side Effects of Statin Cholesterol-Lowering Drugs:

1. *Deplete the ubiquinone (vitamin-like) Coenzyme Q10 causing cardiomyopthy and heart failure*

2. *Change, weaken, damage or destroy muscle (depending on dose and concomitant use of other drugs)*

3. *Do not slow atherosclerosis*

4. *Induce sudden total memory loss*

5. *Increase eye cataract risk*

6. *Suppress immune function*

7. *Are linked to cancer*

8. *Have been linked for 10-years with Rhabdomyolysis and Myoglobinuria*

9. *Have been linked with elevated transaminase (indicator of liver and kidney damage)*

10. *Are linked to nerve damage*

11. *Induce muscle pain*

12. *Do not extend life*

13. *Increase serum Lp(a) concentrations** (Increasing odds of heart attack or stroke up to 70% SOURCE: CIRCULATION)*

14. *Reduce left ventricular function*

15. *Elevate the lactate to pyruvate ratio*

16. *Enhance LDL cholesterol oxidation*

17. *Would be expected to interfere with any function (e.g. sex hormone production, hair growth, sleep, or proper brain and nerve function) that depends on cholesterol or CoQ10*

18. *In 2003, are prescribed to 13 million (in the U.S., 25 million worldwide) creating a $20b market*

19. *Will cause 65,000 predicted myopathies Source: Merck Patent (NOTE: Biopsy is the only reliable test for statin induced myopathy)*

Supplemental Vitamin C and CoQ10 are completely nontoxic and would lessen or eliminate most of these statin-induced effects.

Headlines from **BolenReport.COM** illustrate the health benefits of Vitamin C:

1. **HARVARD: VITAMIN C ONLY 1 OF 880 SUBSTANCES TO REGENERATE HEART MUSCLE FROM STEM CELLS**

2. **15-YEAR HARVARD STUDY OF 85,000 FINDS SINGLE VITAMIN C PILL REDUCES HEART DISEASE ALMOST 30%** (Saving 300,000 lives)

2. **THE RISK OF STROKE WAS 70% HIGHER AMONG THOSE IN THE LOWEST QUARTILE FOR SERUM VITAMIN C THAN AMONG THOSE IN THE HIGHEST**

3. **VITAMIN C INHIBITS LIPID OXIDATION IN HUMAN HDL**

4. **MORE VITAMIN C AS PILLS REDUCE CATARACTS BY 77%**

5. **HIGH-DOSE VITAMIN C COMPLETELY PREVENTED DRUG-INDUCED AMNESIA IN MICE**

6. **CARNITINE, WITH ITS BUILDING BLOCKS VITAMIN C AND LYSINE, INCREASE MUSCLE STRENGTH**

7. **MATTHIAS RATH, MD, CLAIMS CANCER GROWTH HALTED WITH VITAMIN C/LYSINE/PROLINE AND GREEN TEA EXTRACT**

8. **VITAMIN C BOOSTS IMMUNE SYSTEM IN AS LITTLE AS 5 HOURS (NIH)**

9. **VITAMIN C PILLS EXTEND LIFE 6-YEARS (USC)**

10. **VITAMIN C (AND LYSINE) HALT ATHEROSCLEROSIS (unpublished)**

11. **IV VITAMIN C REVERSES ENDOTHELIAL DYSFUNCION**

12. **VITAMIN C – NEW TREATMENT FOR OSTEOPOROSIS**

13. **VITAMIN C CAN (1) PREVENT THE DETERIORATION COMPLETELY; AND (2) CURE EVEN LARGE AORTIC ANEURYSMS WITHOUT SURGERY.**

CONCLUSION

A 20 billion dollar market may have blinded some scientists. Merck and the other pharmaceutical companies have known about the CoQ10 biosynthesis "issue" for more than a decade, though few medical doctors in the U.S. are aware of this problem. There exists no theory that justifies the use of statin drugs. This author has seen no data or evidence that demonstrates any real health benefit for statin drug use that overcomes the proven detriment of hampering the production of CoQ10.

How could the FDA have approved the statin drugs, despite the existing claims? Apparently, the dosage of a statin is important. At lower dosages, the negative side effects are reduced such that the mortality curves between the control and statin groups are similar. The studies rarely quantify muscular aches and pains, and instead usually focus on lowered cholesterol as the end-point. Ergo, if the drug lowers cholesterol, beneficial effects on heart patients are assumed.

According to Dr. Langsjoen,

"In my practice of 17 years in Tyler, Texas, I have seen a frightening increase in heart failure secondary to statin usage, "statin cardiomyopathy." Over the past five years, statins have become more potent, are being prescribed in higher dosages, and are being used with reckless abandon in the elderly and in patients with "normal" cholesterol levels. We are in the midst of a Congestive Heart Failure epidemic in the US with a dramatic increase over the past decade. Are we causing this epidemic through our zealous use of statins? In large part I think the answer is yes. We are now in a

position to witness the unfolding of the greatest medical tragedy of all time – never before in history has the medical establishment knowingly create a life threatening nutrient deficiency in millions of otherwise healthy people."

POSTULATE:

No human who consistently consumes 10,000 mg or more Ascorbic Acid (vitamin C) and 300 mg or more of ubiquinone (CoQ10) daily has heart disease.

PREDICTION:

Studies that purport to show that statins benefit heart patients either has mischaracterized the data, or will be shown to be fraudulent.

We defy any researcher to find a contrary example to our postulate, and we stand by the prediction. Cardiologists, as a rule, are highly trained professionals, yet they are being duped by drug company efforts to expand markets. They love these statin drugs, and why not; patients keep coming back!

It is unconscionable that editors of mainstream medical journals and elements of the U. S. government and the news media continue to hide the explosive research results on vitamin C and CoQ10 from U.S. doctors. Disregarding malpractice, this author believes that the continuance of ignoring vitamin C and CoQ10, while marketing and prescribing statin drugs for heart patients, is criminal.

Owen R. Fonorow

Addendum

Group Asks FDA to Ban New Crestor® Cholesterol Lowering Drug...
Public Citizen Sites Safety Concerns

> "A 39-year-old woman has died of a muscle-destroying condition linked to the controversial new anti-cholesterol drug Crestor, a consumer group said Thursday, citing 16 cases of serious side effects in urging a ban of the drug."

Editor's note: The following examples are "news" stories from 2004. The links are no longer valid.

MONITORING THE BIG PHARMA PROPAGANDA MACHINE

> Listed below are some recent propaganda examples that promote the sale of just one class of top selling prescription drugs, statin cholesterol-lowering drugs. These stories all appeared in February and March of 2004. Author's notes on these articles are listed below each article.

> Statin Drugs Reduce Strokes…
> These are the same researchers who keep their "heart Protection Study" mortality data secret. This stroke result could very well be for statins + antioxidants. They don't (and won't) tell us…)
> Scientists overturn accepted theory of disease
> (Tell that to Ames' rats. Why attack antioxidants? Hmmm… let me think)
> Statins reduce sepsis in ITU patients…
> (Huh?)
> Cholesterol-lowering drug greatly reduces the risk of stroke and heart attack…
> (Small, one-year study. This report is printed in various forms, designed to look like multiple studies. Apparently news "reporters" care little about perspective.)
> Heart patient's lives saved by cheap four-drug combo
> (Don't bet your life on it.)
> More Potent Therapy Slows Plaque Build-Up..
> (These drug companies can afford advertising. But they get these free news stories all the time…)
> HDL Cholesterol
> (Must perpetuate the myth that cholesterol causes heart disease…)
> Atkins diet dangerous for kids.
> (High fat diets cause public to question the entire cholesterol-causes-heart-disease myth.)
> Diabetic women heart attack deaths drop dramatically…
> (Maybe cardiology IS doing something right? Nah.)
> Sleep Soundly for Heart Health… and Post-Traumatic Stress Boosts Heart Attack Risk…
> and Walking good for the heartand Eating fiber reduces risk of Heart Disease…
> (Ever wonder why there are so many confusing reports about Heart Disease? Deliberate confusion provides cover for cardiology and the medical profession. Doctors can later say with a straight face, "How were we to know which claim was real?", especially after the Pauling/Rath heart disease theory and cure becomes public and undeniable…)

The following material is reprinted from the Pauling-therapy Handbook Volume 1. ***The Irrational Fear of Cholesterol***

THE TRUTH ABOUT CHOLESTEROL
Compiled by Owen R. Fonorow, 2003

"At Framingham, we found that the people who ate the most saturated fat, the most cholesterol and the most calories weighed the least, were more physically active and had

the lowest serum cholesterol levels." –William Castelli, M.D., Director of the Framingham Study. The Archives of Internal Medicine, July 1992, Vol. 152, pages 1371-72

EVERYTHING WE KNOW IS WRONG

> "Much of what we are told by our most trusted authorities turns out to be the exact OPPOSITE of what is true and what should be heeded. "Avoid foods that are high in cholesterol." This is yet another example of thoroughly misguided advice from our so-called health authorities."– Thomas E. Levy, MD JD

CHOLESTEROL PRIMER

> Far from being a health destroyer, cholesterol is absolutely essential for life.
>
> Although most people think of it as being "fat in the blood," only 7 percent of the body's cholesterol is found there. In fact, cholesterol is not really fat at all; it's a pearly-colored, waxy, solid alcohol that is soapy to the touch. The bulk of the cholesterol in the body, the other 93 percent, is located in every cell of the body; where its unique waxy, soapy consistency provides the cell membranes with their structural integrity and regulates the flow of nutrients into and waste products out of the cells.
>
> "In addition, among its other diverse and essential functions are these: Cholesterol is the building block from which you body makes several important hormones: the adrenal hormones (aldosterone, which helps regulate blood pressure, and hydrocortisone, the body's natural steriod) and the sex hormones (estrogen and testosterone). If you don't have enough cholesterol, you won't make enough sex hormones." — Michael R. Eades, M.D., and Mary Dan Eades, M.D.
>
> "Cholesterol is the body's natural detoxification mechanism High cholesterol levels develop in response to the presence of toxins; the toxins are neutralized by the cholesterol. When patients with high cholesterol levels (over 240 mg%) had their mercury amalgams and sources of dental infection removed, these levels usually dropped dramatically within a few days When toxin levels have been minimized, most people's cholesterol levels will be between 160 and 220mg%" — Thomas Levy, MD, JD, Optimal Nutrition for Optimal Health.
>
> "The concept that cholesterol can inactivate or neutralize a wide variety of toxins is not new; researchers have identified cholesterol as an inactivator of multiple bacterial toxins. Other researchers have shown that elevation of serum cholesterol actually served as a marker for various toxic exposures. The toxicity of pesticides reliably elevates the cholesterol levels of those exposed individuals and one researcher showed that dogs exposed to low levels of methylmercury developed progressively higher levels of cholesterol in the blood over time." — Thomas Levy, MD, JD, Optimal Nutrition for Optimal Health, pg. 89-91.

CHOLESTEROL'S ROLE IN THE BODY

- Cholesterol is a precursor of vitamin D in the skin. When exposed to sunlight, this precursor molecule is converted to its active form for use in the body.
- Cholesterol is the main component of bile acids, which aid in the digestion of foods, particularly fatty foods. Without cholesterol we could not absorb the essential fat-soluble vitamins A, D, E and K from the food we eat.
- Cholesterol is necessary for normal growth and development of the brain and nervous system . Cholesterol coats the nerves and makes the transmission of nerve impulses possible.
- Cholesterol gives skin its ability to shed water.

- Cholesterol is important for normal growth and repair of tissues since every cell membrane and the organelles (the tiny structures inside the cells that carry out specific functions) within the cells are rich in cholesterol. For this reason newborn animals feed on milk or other cholesterol-rich foods, such as the yolks of eggs, which are there to provide food for the developing bird or chick embryos.
- Cholesterol plays a major role in the transportation of triglycerides — blood fats — through the circulatory system.

> "A quick review of this list should give a better idea of what cholesterol does and to dispel any notion that it is a destroyer of health to be feared and avoided at all costs. Far from being a serial killer, cholesterol is absolutely essential for good health; without it you would die. Without cholesterol we would lose the strength and stability of our cells, rendering them much less resistant to invasion by infection and malignancy. In fact, a grave sign of serious illness, such as cancer development or crippling arthritis, is a falling cholesterol level." –Michael R. Eades, M.D., and Mary Dan Eades, M.D., PROTEIN POWER, 1996.

CHOLESTEROL DOES NOT CAUSE HEART DISEASE

The International Network of Cholesterol Skeptics, a steadily growing group of scientists, physicians, other academicians and science writers from various countries, are questioning the common dogma that dietary saturated fat and cholesterol cause heart disease. Not only is there no proof to support this hypothesis, says spokesman Dr. Uffe Ravnskov, of Lund, Sweden; but the available scientific evidence clearly contradicts this claim.

Ravnskov says that the accumulated evidence from nine dietary trials, presented by a group of British researchers in the March 31, 2001 issue of British Medical Journal showed that not a single life has been saved by dietary changes to reduce fat intake that went far beyond the official recommendations.

Dr. Walter Willet, chairman of the department of nutrition at the Harvard School of Public Health, is the spokesman for the ongoing longest running, most comprehensive diet and health study ever performed, which involved nearly 300,000 subjects. As he recently noted, data from this study clearly contradicts the low-fat-is-good-health message, and "the idea that all fat is bad for you; the exclusive focus on adverse effects of fat may have contributed to the obesity epidemic" (www.redflagsweekly.com/Thursday_report/2002_sept05.html).

DANGERS OF CHOLESTEROL LOWERING STATIN DRUGS

There is little evidence that lowering cholesterol protects human beings from heart disease. According to the Life Extension Foundation, of those who suffer heart attacks under age 50, more than 50 percent have no recognized risk factors (www.lef.org).

According to noted nutrition expert Earl Mindell in his recent book Prescription

Alternatives, ***"There is absolutely no evidence anywhere that normal cholesterol floating around in the blood does any harm. In fact, cholesterol is the building block for all your steroid hormones, which includes all the sex hormones and the cortisones. Even slightly low levels of cholesterol are associated with depression, suicide, and lung cancer in older women. . . For most people, eating high cholesterol foods does not raise cholesterol***."

Earl Mindell stated that "while a cholesterol-lowering drug will usually do a very good job of lowering your cholesterol, there's scant, if any, evidence that it will help you live longer or reduce your risk of heart attack If the American public had even a clue of how destructive these drugs are, they wouldn't touch them. . . Every information sheet on the most commonly prescribed cholesterol-lowering drugs will tell you that they cause cancer in rodents when taken long term in relatively normal doses. It's also well known that they can cause severe emotional imbalances in men, along with a wide array of life-threatening side effects. . . The wisest course of action is to avoid these drugs…"

CHOLESTEROL LOWERING DRUGS LINKED TO CATARACTS

Richard Cenedella, Ph.D., announced that a recent multinational scientific study supports his hypothesis that brief exposure to very high levels of some statins may irreversibly damage the lens of the eye. The study by Christopher Meiers of the University Hospital of Basel, Switzerland, suggests that taking the antibiotic erythromycin in combination with the popular statin-cholesterol lowering drugs may increase the risk of cataracts. Erythromycin slows removal of most statins from the body and can greatly increase blood levels of these drugs. The study results published in Archives of Internal Medicine, indicate that a single course of antibiotic, typically 10 days, appeared to double the risk of cataracts and two or more courses tripled the risk (Richard Cenedella, Ph.D.).

CHOLESTEROL LOWERING DRUGS LEAD TO INCREASED CANCER RISK

"All members of the two most popular classes of lipid-lowering drugs (the fibrates and the statins) cause cancer in rodents, in some cases at levels of animal exposure close to those prescribed to humans" (JAMA on-line).

"New research indicates that besides lowering levels of cholesterol, the statin drugs may also promote the growth of new blood vessels, which may not necessarily be such a great thing. Although this effect may help to prevent heart attacks and other forms of heart disease, it may have the potential to promote cancer growth as well" (Joe Mercola,).

FEEDING THE IRRATIONAL FEAR OF CHOLESTEROL

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I admit my surprise when the public school Physical Education Department asked my permission to screen our eleven year-old child for elevated cholesterol. I then thought, one can never be too young to learn the health benefits of the cholesterol-lowering drugs. Since the faculty at our local grade school is obviously "cholesterol challenged" and may actually believe that such tests could in some way have value and benefit for sixth grade children, my concern that these tests might inadvertently brainwash them about the "hazards" of cholesterol is probably misplaced. Call me what you will, but I do not believe the public schools should act like marketing arms for pharmaceutical companies.

So what is it about "cholesterol" that strikes such fear into the hearts of men, women and children? In 1998 the American Medical Association (AMA) held a press conference and told doctors that public concern over elevated cholesterol was not warranted. In the same year, the AMA also warned that common cholesterol lowering drugs (statins) are carcinogenic.

> "All members of the two most popular classes of lipid-lowering drugs (the fibrates and the statins) cause cancer in rodents, in some cases at levels of animal exposure close to those prescribed to humans." [JAMA Ref]

More recently, one of these drugs, Baycol, was linked to hundreds of deaths and removed from the market by the US Federal Drug Administration (FDA). [ABC News Story]

Far from being something of concern, much less fear; ordinary cholesterol is a miracle of evolution. Vitamin-like, cholesterol is a very important substance that makes it possible to transport life giving fat-soluble substances throughout the body, using the water of the blood stream. With it, our bodies make essential hormones and vitamin D (with sunlight). Low cholesterol is a symptom of depression and cancer. It is so important that if cholesterol intake is restricted, our livers make more to supplement.

WHY DOES CHOLESTEROL ACCUMMULATE IN THE ARTERIES?

Drug company advertising for cholesterol lowering drugs gives the impression that excessive cholesterol in the blood simply deposits on the artery wall, and that lowering cholesterol levels stops that process. We agree with Mindell, Pauling and others that high cholesterol is a symptom of an underlying nutritional deficiency and/or toxicity that damages the arteries, not the cause.

ONE PHARMACIST'S VIEW OF CORONARY HEART DISEASE: COMPARING THE "LIPID THEORY" WITH THE "UNIFIED THE

ORY”

ARE CHOLESTEROL DRUGS A DEATH SENTENCE?

Lipid lowering drugs inhibit the formation of cholesterol by the liver, and some might say they “damage” the liver. This mechanism also has other unwanted effects.

“In 1987, Merck made headlines when it came out with Mevacor (lovastatin), the first cholesterol-lowering statin drug. Statins block enzyme pathways involved in the production of cholesterol, thereby lowering cholesterol levels. But that’s not all these drugs do. The same enzymes that are involved in the production of cholesterol are also required for the production of an essential compound called coenzyme Q10; not surprisingly, lower cholesterol levels in statin users are accompanied by reduced levels of CoQ10.”

Coenzyme Q10 — also called ubiquinone, which means “occurring everywhere,” plays an important role in the manufacture of ATP, the fuel that runs cellular processes. Though it is present in every cell in your body, it is especially concentrated in the very active cells of your heart. Depriving the heart of CoQ10 is like removing a spark plug from your engine. It just won’t work. Low levels of CoQ10 are implicated in virtually all cardiovascular diseases, including angina, hypertension, cardiomyopathy and congestive heart failure.

Merck knew that statins deplete CoQ10, and knew that this could contribute to heart disease. In 1990, this drug manufacturer sought and received a patent for Mevacor and other statin drugs formulated with up to 1,000 mg of coenzyme Q10 to prevent or alleviate cardiomyopathy, a serious condition that can cause congestive heart failure. **However, Merck has not brought these combination products to market, nor has this drug company educated physicians on the important of supplementing CoQ10 to offset the dangers of these drugs to the heart**. Because they hold the patent, other drug companies are prevented from coming out with a statin/CoQ10 product.

If you’re taking a statin drug (Zocor, Provacol, etc.), don’t wait for your doctor to warn you of the substantial risks. **Consider this fact: in the last 15 years (roughly the time that statins have been on the market), the incidence of congestive heart failure has tripled.** If you want to avoid becoming a statistic, it is imperative that you take 200 mg of coenzyme Q10 daily.

LOW CHOLESTEROL LINKED TO STROKE

According to Dr. Joseph Mercola, “High cholesterol is a well-known risk factor for stroke. But new research suggests that low levels of cholesterol in the blood may also increase stroke risk. The study linking low cholesterol to increased stroke risk was

presented recently at the 24th American Heart Association Conference on Stroke and Cerebral Circulation, which was discussed in last week's newsletter. About 80% of all strokes are ischemic, and 20% are hemorrhagic." [Read more]

Lp(a): THE REALLY BAD CHOLESTEROL

Much evidence is accumulating that so-called "bad" (LDL) cholesterol is no more dangerous than calcium. However, there is a component of cholesterol, a lipid that used to be grouped with LDL, that does signal danger when it is elevated. Linus Pauling and Matthias Rath singled out lipoprotein(a) or Lp(a), as the significant risk factor in heart disease. Under their theory, Lp(a) acts as a surrogate for chronic low vitamin C (see www.PaulingTherapy.com). Unfortunately, lipid-lowering drugs do not lower Lp(a). **An Oxford meta analysis (September 2000) found that people with elevated Lp(a) are 70% more likely to suffer a heart attack or stroke**. [ref]

The Vitamin C Foundation has been investigating reports that high amounts of vitamin C, lysine and proline will lower elevated levels of Lp(a) in the blood after several months.

CHOLESTEROL SCREENING IN KIDS IS MADNESS

With this information in mind, I volunteered to address the Junior High School student body so that the students might hear another point of view. I even offered to show the student body Linus Pauling's video, Heart Disease: A Unified Theory. I believe that our children should know that not everyone agrees that elevated cholesterol is to be feared, or is the cause of heart problems. So far, there has been no response to my offer.

Chapter 4 – The Great Prescription Drug Hoax

Chapter 6 – Report from the The Twilight Zone (Coming Soon)

Chapter 6 – A Report from the Twilight Zone

vitaminccures.com/blog/index.php/2017/06/09/chapter-6-a-report-from-the-twilight-zone/

OwenFonorow



Life in the Twilight Zone: An Opinion

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> "Harvard found a 30% reduction in heart disease by taking a SINGLE daily vitamin C pill, meaning one pill would save more than 300,000 lives per year! One pill. Yet, medicine needs more "studies" before recommending vitamin C, and the 'polypill' becomes the big news…"

This author believes that pharmaceutical companies lie because they cannot tell the truth and stay in business.

On July 15, 2003, I began to realize just how far my life had transmuted into the Twilight Zone. This thought struck quietly in the back of the room at the Wisconsin Department of Licensing and Regulation (DORL) headquarters in Madison. I had finally met Tim Bolen, who was working for an alternative doctor who had been attacked by the Wisconsin state medical board. I watched and listened intently as the crowd swelled while the subject of the cross examination, the state's star witness, and current President of the National Council Against Health Fraud (NCAHF) testified under oath that he had, in fact, collided with cars on two separate occasions while jogging.

Dr. Robert Baratz, MD, DDS, PhD testified that after both incidents, he had attempted to collect damages. Unfortunately, the 70-year old Dean of Tuft's University Law School was driving the second car he ran into. Baratz not only lost the case, he was also ordered to pay the Dean's legal fees.

Thinking the testimony couldn't get any stranger; frail, mild mannered, 120 lb and 70-year-old Florence Wilson, MD entered the room. The elderly lady had been flown in for this occasion. It seemed that Dr. Baratz and Dr. Wilson once worked for the same institution, and that there had been an "altercation." Dr. Wilson had "tugged" at his arm, causing it to lose function. Baratz subsequently sued Wilson for 3 million dollars

in damages. This disability was what he claimed kept him from the practice of medicine in recent years. Under oath, testimony was given that Dr. Baratz lost the lawsuit, but apparently he filed a workman's compensation claim to "protect his rights."

Dr. Baratz's CV claims that he is a consultant to Congress. Under oath, it turned out that his consultancy was "testimony before a congressional AntiAging Committee against 'anti-aging' quakery." There was a notable gasp from the audience after he testified that the "skin rejuvenation clinic" he owns and runs brags about the clinically proven power of antioxidants in the skin creams he sells." He also testified that he had seen the studies supporting these statements.

For me, it was just another day in the Twilight Zone.

The disturbing part of my life that makes me certain I am somehow trapped in the fifth dimension is that I now know how to, and routinely show people how to, cure their heart disease.

In America, thanks to Big Medicine and Big Pharma inspired laws, such "criminal" knowledge put one at risk of incarceration, however I also have the enormous satisfaction from former heart patient's gratitude. I imagine that this is missing from the lives of ordinary cardiologists.

I find that helping people cure themselves, sometimes only in a few days, is highly satisfying. This kind of satisfaction only comes from talking to formerly ill heart patients who report having become well in weeks, sometime a matter of short days. It seems that the dosage has much to say about the length of time that it will take for the patient to be cured. I am also satisfied when I hear that someone's "untreatable" Angina has disappeared, but returns shortly after stopping the therapy.

For me, there is a thrill in seeing EKG printouts that doctors tell me "don't look like the same people" when comparing the printouts from before and after the therapy. These EGKs show damaged hearts that have somehow miraculously healed, that the dead muscle's cells are now alive.

Cardiology and the American Heart Association routinely advise against taking extra vitamin C. Recently, the admittedly preliminary Harvard finding that only one of 880 substances tested will stimulate undifferentiated mouse stem cells to differentiate into heart muscle cells did not make headlines. One reason for this is that vitamin C would compete with cholesterol drugs that now earn over $20 billion.

The story behind this cure for heart disease is simple. This author recommends that people do the opposite of what cardiology and the American Heart Association routinely advise, and take vitamin C, the amino acid lysine, and a few other orthomolecular nutrients.

The world's only 2-time unshared Nobel Prize winner, Linus Pauling, has created a video outlining this information. This information has been readily available since 1993,

but has never been reported in a mainstream news outlet or studied by medical science. Unfortunately, Cardiology and the American Heart Association, Big Medicine and Big Pharma do not want the public to know that curing heart disease is easy. People do it all the time.

Maybe I'm living in the 10th dimension?

MORE VIRTUAL REALITY

A recent vitamin C study conducted by the Harvard School of Public Health found that in 85,000 women over 15-years, a single small vitamin C pill (360 mg) taken daily reduces heart disease by 30%. The same effect was not found from the vitamin C in foods, only the pills.

Despite this data, the chance to save more than 300,000 lives (30% of the reported 950,000 annual heart related deaths) combined with the utter nontoxic nature of the vitamin was not enough for medicine to recommend that everyone take a vitamin C pill. The paper said more studies are required.

This author's experience over the last seven or eight years has led him to recommend 10-20 vitamin C pills daily, paired with an equivalent number of lysine pills, in order to completely eliminate the risk of heart disease.

One could fear that Linus Pauling would roll over in his grave if he was alive to read the criticism of the Harvard Nurses Study, criticism posed by the current head of the Linus Pauling Institute. Showing his disrespect for the nurses' abilities to keep proper records in the study, LPI's Dr. Balz Frei commented on why pills (supplements) might have showed the profound decrease in heart disease, but not vitamin C in the diet, by stating that "*its easier to keep track of the supplements you take, than to remember what you eat.*" Using Frei's logic, if they forgot to list foods with vitamin C, then one could surmise that the case for pills is even stronger, and the nurses in the "low intake group" were getting even more vitamin C in their food than reported. The difference becomes even more striking.

The Harvard study, published in the July issue of CIRCULATION, does prove how damaging vitamin C really is, however damaging only to the bottom line of the pharmaceutical companies' marketing of statin cholesterol lowering drugs. Not one trial of any of the statin drugs has ever shown a significant change in the overall mortality rates, when compared to placebo. According to Eddie Vos at health-heart.org, in all cases, after millions of statin pills, the mortality curves once graphed "touch" in both groups.

Unfortunately, this is not reported in the mainstream media; despite the media pushing a hypothetical "poly pill."

The Long Neglected Theory of Cardiovascular and Heart Disease

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> "Vitamin C has been under investigation, reported in thousands of scientific papers, ever since it was discovered (circa) fifty years ago. Even though some physicians had observed forty or fifty years ago that amounts a hundred to a thousand times larger (than the RDA) have value in controlling various diseases, the medical profession and most scientists ignored this evidence" (Linus Pauling HOW TO LIVE LONGER AND FEEL BETTER, 1986, pg 106).

We often hear about theories in the media that attempt to explain what causes cardiovascular disease (CVD), which often leads to heart attack and stroke. There is a cholesterol theory, a fat (saturated and polyunsaturated) theory, the long neglected Dr. Kilmer McCully homocysteine theory, an oxidized cholesterol theory, a free-radical/heavy metal theory, and even a microbe theory. Each of these theories attempts to explain what causes the lesion in the artery that is the precursor to CVD.

At least one major theory is never mentioned in the medical journals or lay media. This theory is the vitamin C theory. Linus Pauling and Matthias Rath, MD, jointly identified the great problem of cardiovascular disease as a vitamin C deficiency disease; chronic rather than acute. This idea has yet to be seriously investigated by modern medical science.

Cardiologists routinely tell their patients that there is no "proven" value in taking vitamin C for heart disease. Technically, this statement may be accurate, but it is misleading. The implication is that experiments have been run that prove high-dosage vitamin C (with lysine) has no value. No such experiments have ever been published. On the contrary, all research and experiments we know of provide evidence that vitamin C does, in fact, have great value[1].

It is incredible that after more than two decades since Pauling and Rath first published their Unified Theory, modern medicine and its schools, pharmaceutical companies, and the United States government have failed to make the slightest effort to investigate the effects of large amounts of vitamin C and the amino acid lysine in relation to CVD and heart disease. **This is even more surprising when one considers that there are no proven treatments for heart disease.** According to Dr. Julian Whitaker, heart by-pass operations and angioplasty were never clinically "proven" before being adopted by the medical profession.

The neglected vitamin C theory, proposed by Nobel Laureate Linus Pauling and his associate Matthias Rath, MD, is a unifying theory that encompasses homocysteine, lipid imbalances including Lp(a) excesses, infections and stresses, diet, free-radicals, lesions, and lack of CVD in most animals. The theory raises the important issue of mechanical stresses in the blood stream. The arguments are straightforward and most people can understand them. If more cardiovascular patients could learn about the Vitamin C

Theory, this author believes that much suffering would end. Pauling's recommended high-dosage treatment is having spectacular success among the lay public who have discovered it.

Jeff Fenlason, The Two Day "Miracle" Recovery

Jeff Fenlason, age 55 of North Carolina is but one of thousands of people who have experienced the Pauling Therapy miracle. His case provides clear and convincing evidence in favor of the Vitamin C Theory. Jeff has allowed his real name to be used and his case is included in Volume One, and his entire testimony is posted at vitaminCcures.com. Fenlason is somewhat unique in that he did not have Chelation or any other alternative therapy before adopting the high-dosage Pauling therapy. His "two day" reversal was after ten years under the care of modern cardiology as a military veteran. His first testimonial can be found below.

July 11, 2001

> My name is Jeffrey Fenlason. I'm 55 years old and I have had Cardiovascular/Coronary Artery Disease or CVA for 10 years. Within two days after starting the high vitamin C/lysine Pauling Therapy (14 g vitamin C) I felt like a new man. Here is my story.
>
> I was first diagnosed with CVA in 1990 at the VA hospital in Richmond VA. In 1991, four of my arteries were by-passed. After the operation I was in worse condition than before it; I had angina daily and took oral nitro almost every day. The angina lessened after a year and it was possible for me to go days without the nitro for almost 7 years. In 1998 after moving to North Carolina my chest pains returned on a regular basis so I went back on the pills and then was on a daily time release Nitro. I had resigned myself to the fact that there was nothing that would improve my condition even though I was on several medications to help relieve my angina.
>
> On June 20, 2001 I had three episodes of severe chest pains and went to the hospital. They kept me over night and ran the usual test to determine if I was having a heart attack. (I had been through this experience many times in the past.) The next day I went home with all new meds and an appointment for stress test the following Tuesday; I was also placed on a Nitro patch .4 mg an hour that I could only wear for 12 hrs a day. Within an hour of removing the patch I would again need to take oral Nitro pills.
>
> I was back in the hospital early Monday morning, I was in constant pain even after several oral nitro pills. After the first test the doctor told me I was having a heart attack. I was admitted to the ICU and setup for a heart cath the next morning. **After the cath the doctor told me that two of my four bi-passes were entirely blocked and that the disease had progressed to the point that it was inoperable.** Also the third graft was partially blocked and he wanted to do the balloon angioplasy to try to open it. A deep depression sank in immediately. I stayed in the hospital until Thursday and then returned home with all new meds. Now I was on 50MG TOPROL XL, 60GR ISOSORBIDE ER,

> 50MG ALTACE and 40mg of LIPITOR. You can look these up on-line, I did so Friday morning and I wasn't impressed with what the doctor ordered to treat my condition. While sitting there at the computer, feeling really defeated, I ask half out loud, "GOD IS THERE ANOTHER ANSWER! THIS CAN'T BE HOW I AM SUPPOSED TO SPEND THE REST OF MY LIFE."
>
> That is when I did a search for CAV; the first sight I went to was www.paulingtherapy.com. I called the 1-800 number after reading everything on the site and left a message. Within a very short time I received a call from Lunes . He explained to me the Linus Pauling Vitamin C/L-lysine therapy. I started taking the cure that day.
>
> I was to be in Charlotte for the balloon on Monday morning, but I overslept (for the first time in years I will add) and was awakened by a call from the hospital. I was already an hour late and they wanted to know if I was coming or would reschedule. I told them I would reschedule. Then I went back to sleep (another thing I hadn't done in years). Again the phone woke me. This time I was told, if I could make it in less than an hour and a half they could still do the angioplasty procedure. I thanked them for the offer, but told them I would rather reschedule. I was then told how important it was for me to get this operation done. I still haven't called to reschedule.
>
> **Within two days after this call I felt like a new man**. My friends started saying things like "WOW you look great" or "Man I haven't seen you this active in months" I had previously stayed home a lot when my wife went visiting. The most common words out of my mouth had been "I'm tired." Well, since taking the Pauling therapy I am not tired all the time. After only a week I stopped taking the Meds that the doctor had prescribed when I left the hospital. **It has only been 12 days since I started and I DO NOT HAVE ANY CHEST PAIN.** If that isn't proof enough for anyone with CVA to start taking Paulings therapy, then check back as I will be updating this report often. In the mean time GOOD LUCK!
>
> P.S. – Another startling occurrence in the last week, I have had joint pain in both hips for years and I have tried many treatments for the pain. It was just difficult walking around Wal-Mart. Well, for the past 5 or 6 days I have had no pain in either hip and I am walking quite a bit. And, no, I am not taking any type of pain pills.

Alternative doctors, who routinely offer their patients nutritional support, are not likely to witness a Fenlason-style miracle. However, others have witnessed this "miracle" almost every time a patient under the care of a modern cardiologist begins the vitamin C therapy, most likely because these people are routinely told there is no value in taking extra vitamin C. A rapid "cure" requires 5-6 g of the amino acid l-lysine with at least the same amount of vitamin C daily. (Note: Fenlason reports that he immediately adopted a 14 g daily amount of vitamin C, along with 5-6 g lysine.)

The wisdom of Linus Pauling bears repeating:

> "Although physicians, as part of their training, are taught that the dosage of a drug that is prescribed for the patient must be very carefully determined and controlled, they seem to have difficulty in remembering that the same principle applies to the vitamins" (Linus Pauling, HOW TO LIVE LONGER AND FEEL BETTER, pg 142).

WHAT ARE THE FACTS?

How do scientists or the lay public choose among competing theories? The first step is to analyze the mass of data and try to identify facts. For the purposes of this discussion, we focus on cardiovascular disease, and not necessarily myocardial infarction, or heart attack. The Pauling/Rath Vitamin C Theory is about the cause of and treatment for occlusive cardiovascular disease.

Lets begin by reviewing what we think we know about cardiovascular disease:

1. **CVD leading to Heart Attack is the leading cause of mortality in the USA** (Source: American Heart Association http://www.amhrt.org/catalog/Scientific_catpage70.html)
2. **In the USA, the mortality rate from CVD increased from a very low rate at the beginning of the 20th century to its peak in the 1960s/1970s**. (Source: MMWR, February 16, 2001 / 50(06);90-3, Mortality From Coronary Heart Disease and Acute Myocardial Infarction — United States, 1998 http://cisat.isciii.es/mmwr/preview/mmwrhtml/mm5006a2.htm)
3. **The CVD mortality rate has declined 40% from its peak (circa 1970) in the USA.** (Source: From Pauling's 1986 Book HOW TO LIVE LONGER AND FEEL BETTER, the number of heart related death in 1970 was around 740,000. The American Heart Association places the number of deaths in the year 2000 between 400,000 and 500,000. Note: the larger population in 2000.)
4. **After Pauling's first book on Vitamin C was published in 1970, vitamin C consumption increased 300% in the USA, and the USA has been the only industrialized country to experience the 40% reduction in heart disease mortality. (**Source: Linus Pauling Institute of Science and Medicine.)
5. **Most high order mammals a) make their own vitamin C in high amounts (3-11 g daily) in their livers (or kidneys) and b) do not suffer the same type of cardiovascular disease as humans.** (Guinea pigs do not make vitamin C and do suffer the same CVD if vitamin C is restricted in their diet.) (Various sources including Linus Pauling HOW TO LIVE LONGER AND FEEL BETTER 1986 and the Pauling/Rath Unified Theory)
6. **The Enstrom analysis (1992) of NIH data showed that vitamin C supplements of only 500 mg increased longevity in men by 40% (or almost 6 years)** and a somewhat lesser improvement in woman. (Source: Enstrom, Epidemiology 1992)

7. **Homocysteine levels rise when vitamin C levels are low**. Dr. McCully is cited in the Pauling/Rath Unified Theory paper because of his experiment that showed homocysteine levels rise in scorbutic guinea pigs and not controls. (Source: McCully KS, Homocysteine metabolism in scurvy, growth and arteriosclerosis. Nature 1971;231:391-392 from Pauling/Rath Unified Theory. See www.orthomed.org)
8. **Repeatable experiments with guinea pigs show that depriving the animal of vitamin C causes atherosclerosis which is quite similar to the human lesion**. No plaque forms in the control group getting "adequate" vitamin C. (Source: The Reversibility of Atherosclerosis, G. C. Willis, Canad M. A. J, July 15, 1957,
Vol 77)
9. **Pauling and Rath showed the apo(a)/Lp(a) increased in the animals deprived of vitamin C, but not in the controls**. (Source: Immunological evidence for the accumulation of Lp(a) in the atherosclerotic lesion of the hypoascorbemic guinea pig, Pauling/Rath, Pro. Nat. Acad. Sci USA, Vol 87, pp 9388-9390, Dec 1990, Biochem)
10. **The heart disease process begins with a lesion in the artery**. (Source: Brown-Goldstein Scientific American 1982, and Linus Pauling Heart Disease Video)
11. **Veins, in general, do not suffer plaque deposits**. (Source: Common knowledge from the medical Literature)
12. **Plaques are often localized to areas around the heart** (coronary arteries or carotid arteries). (Source: An Experimental Study of the Intimal Ground Substance in Atherosclerosis, G. C. Willis, Canad M. A. J., July 1953, Vol 69, pg 17)
13. **Vitamin C is required (and used up) making collagen – the most abundant protein in the human body.** (Source: Roger J. Williams, Nutrition Against Disease, 1971, Linus Pauling HOW TO LIVE LONGER AND FEEL BETTER, 1986)
14. **Scurvy is caused by a deficiency in making collagen which is in turn caused by a lack of vitamin C.** (Source: James Lind, 1753, Linus Pauling HOW TO LIVE LONGER AND FEEL BETTER 1986)
15. **The Beisiegel studies in Germany of post-mortem human aortas in 1989 determined that plaque consists of Lp(a) and only Lp(a) – no ordinary LDL.** (Source: Morphological detection and quantification of lipoprotein(a) deposition in atheromatous lesions of human aorta and coronary arteries in Virchows Arch A Pathol Anat Histopathol 1990;417(2):105-11, Niendorf A; Dietel M; Beisiegel U; Arps H; Peters S , Wolf K; Rath M and Lipoprotein(a) in the arterial wall. Beisiegel U; Rath M; Reblin T; Wolf K; Niendorf A, Eur Heart J 1990 Aug;11 Suppl E:174-83)

16. Elevated cholesterol has been correlated with CVD, but many studies were conducted before Lp(a) was known, Lp(a) was lumped in with LDL. **In September, 2000, an Oxford meta-analysis of 27 large studies showed that people with elevated Lp(a) are 70% more like to suffer a heart attack or stroke.** (Source: Circulation Sep 2000)
17. **According to the Life Extension Foundation, 50% of all individuals 50 years or younger who die from heart disease, succumb without any established risk factors.** (Source: Life Extension Foundation Treatment Protocols, Fibrinogen and Cardiovascular Disease, See: www.lef.org/protocols/prtcls-txt/t-prtc149a.html)
18. **Elevated Homocysteine is considered a leading risk factor for (has been correlated with) Heart Disease**. (Source: Life Extension Foundation Treatment Protocols, Fibrinogen and Cardiovascular Disease, See: www.lef.org/protocols/prtcls-txt/t-prtc149a.html)
19. **Primate experiments indicate that a vitamin B6 deficiency in these animals causes atherosclerosis** (Source: Roger J. Williams, Nutrition Against Disease, 1971.)

We are not aware of any contradictions to the above list, and we welcome suggestions for additional assertions of fact for purposes of debate. There are also common observations that may be relevant. The cardiovascular disease process seems to be accelerated in older people, in people who consume polyunsaturated fats without adequate vitamin E, and in people who undergo common heart by-pass surgery or angioplasty. Popular writers such as Adell Davis in the 1950s, 1960s and 1970s and forward have helped disseminate the scientific knowledge of the health value of supplemental nutrition, especially vitamin C. As the knowledge became more widespread, the CVD mortality rate has stopped increasing and began to decrease. Young people are known to have CVD and people in their 30s die from Myocardial Infarction or heart attack. Older people do suffer peripheral arterial disease, but CVD is generally localized to the coronary and carotid arteries near the heart. A frank copper deficiency has been implicated in atherosclerosis. **The author is not aware of any individual who regularly and consistently consumes more that 10,000 mg of vitamin C daily (along with 300 mg CoQ10) who suffers any form of cardiovascular disease**.

WHICH THEORY BEST FITS THE FACTS?

The two crucial observations or facts that may help out sort out the several theories are that animals do not generally suffer the same type of CVD as humans, and plaques formations are uniform, not randomized, and usually in arteries near the heart.

The first observation, that animals do not generally suffer CVD, indicates that there is a difference in the genetic makeup between humans and most other animals. We fail to see how any popular theory, save perhaps diet, can explain this phenomenon. **One of**

the largest differences between most animals and humans is that we humans are virtually alone (with the guinea pig) in that we do not make any vitamin C in our bodies. Other mammals make 3000 to 11000 mg of vitamin C in their livers (adjusted for body weight), which goes directly into the blood stream. **Humans can not make a single molecule of vitamin C.**
The second observation, that plaque deposits are uniform close to the heart, tends to rule out poisons circulating in the blood (e.g. oxidized cholesterol, fats or homocysteine) as being the primary cause of CVD, although these substances probably aggravate or accelerate the disease. **The cholesterol, homocysteine, oxidized cholesterol, microbe, fat, and even heavy metal/free radical theorists have yet to explain why plaque deposits are not randomly distributed throughout the blood stream.**

One must ask why infarctions do not occur in the ears, nose and fingers if something in the blood, such as fat or homosysteine, causes the lesions leading to CVD. The Vitamin C Theory explains these observations as the effects of mechanical stress on arteries without sufficient collagen to remain strong and resilient. Lesions or cracks develop that attract Lp(a).

The vitamin C (collagen) Theory of atherosclerosis explains the vitamin B6 connection and copper, which are both required to produce collagen. Usually the deficiency of vitamin C is the primary factor. For example, vitamin B6 and copper are not usually implicated in scurvy.
Vitamin C's antioxidant properties and ability to support the immune system are well known, which may also explain away the oxidized cholesterol findings as well as the microbe theory. Irwin Stone has suggested that vitamin C is really not a vitamin, and is better classified as the 'Missing Stress Hormone' in humans.
Finally, McCully has shown the homocysteine levels are elevated in the scorbutic guinea pig, perhaps even initiating atherosclerosis in the absence of vitamin C.

The latest research from Dr. Maththias Rath's group on so-called transgenic mice (mice genetically engineered to not make their own vitamin C) now provides virtually ironclad "proof" that low vitamin C, leading to elevated lipoprotein(a) causes heart disease.



Watch Video At: https://youtu.be/VERKQsI2Kzg

CONCLUSION

The common theories for heart disease fail when faced with two simple observations. **Plaques do not generally form in animals that make their own vitamin C, and plaques do not form randomly in humans throughout the blood stream.** These two observations are the cornerstone of the Pauling/Rath unified Vitamin C theory. The Vitamin C Theory, which holds that Lp(a), an LDL variant, acts as a surrogate for vitamin C, also fits all other known facts and most observations. It makes sense, and is almost too simple. It is hard to believe that medical science could have overlooked it, but this is precisely the reason Pauling himself gave for writing his first book on Vitamin C. He wanted to counter the medical profession's bias against the vitamins, especially ascorbic acid (Linus Pauling in his Own Words, Edited by Barbara Marinachi).

Others may offer additional facts and observations, however this author is convinced, now after more than twenty years recommending it to heart patients, that the Pauling/Rath theory is essentially correct, and that the Linus Pauling's *high-dosage* vitamin C/lysine therapy is the cure for CVD.

The author does not understand why humans evolved so differently from most animals. How did we survive as a species without the ability to manufacture our own vitamin C? One is reminded of the fictional "Lysine Contigency" in Jurassic Park. There is little doubt that this great deficiency in our genetic makeup, the lost ability to produce the enzyme L-gulonolactone oxidase in our livers, an enzyme that would otherwise allow us to convert ordinary glucose (sugar) into ascorbic acid, is what ultimately causes many ills of humankind.

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VITAMIN C AND MAGNESIUM USED AS PLACEBO IN CHELATION STUDY

New Study Based on Pauling/Rath Theory submitted to NIH
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“Would it surprise you to learn that drug companies make their own placebo pills for research purposes? And that THEY choose the ingredients? And sometimes they purposely put ingredients into the placebos that match those in the drug and will affect the outcome of the trial. And they are not required to disclose the ingredients they use.” (Jenny Thompson, Health Sciences Institute, http://www.hsibaltimore.com/ea2002/ea_020725.shtml)

The Houston-based Vitamin C Foundation has applied to the U. S. National Institutes of Health (NIH), and the National Center for Complimentary and Alternative Medicine (NCCAM) for a grant to study 6 g vitamin C and 6 g lysine as a therapy for heart disease. If funded, the study would be the first-ever clinical trial in humans of the high oral vitamin C and lysine intervention, first suggested by Linus Pauling in 1994.

The study design is somewhat unusual, in that there will be one study group with elevated serum Lp(a), but there will be no placebo. Because the Vitamin C Foundation and its investigators cannot deprive patients of vitamin C for a lengthy period, the pilot study will first monitor Lp(a) and other assessments for all study participants during a two-month baseline period without any intervention. These two months will act as the control on which to base the statistical analysis.

This method is designed to overcome some of the more obvious objections to a long-term trial. These objections include the subjects having to take a ‘useless’ placebo for 6 to 18 months. Also, this design overcomes many of the problems that A. Hoffer, PhD, and others have written about, both ethical and otherwise. These problems include the patient being deprived of a therapy that may work, the difficulty of preparing a proper placebo for megadose therapies, the fact that patients do not like to cooperate in double-blind experiments leading to the high drop-out rates, the lack of physician time to perform realistic monitoring, the fact that patients may “switch” formulas with each other, and more.

Doctor A. Hoffer, one of the pioneers of the double-blind method, having run one of the very first trials beginning in 1953, wrote in Vitamin C and Cancer,

“In Sum, I believe that the validity of the double-blind method has been grossly overvalued; iIt has only limited utility. In my opinion it does not reliably prove that

effective treatments are effective or that ineffective ones are ineffective. Elsewhere I have examined the reasons why it is such a limited method. The main reason is that it violates the doctor-patient relationships and therefore creates a model that is too far removed the real clinical relationships" (A. Hoffer).

We do not believe that the lack of a "placebo controlled group" will lessen the value of the Pauling therapy study. In the proposed study, serum Lp(a), homocysteine and ordinary lipids will be monitored as often as funds allow. Brachial arterial stiffness (ASI) and blood pressure will be measured weekly using FDA-approved CardioVision®. The Foundation has asked the NIH/NCCAM to fund an 18 month pilot study of 30-40 subjects. More than 100 persons in Silver Springs, Florida, have already volunteered to participate. The proposal can be read at **http://vitamincfoundation.org/NCCAMgrant/**

There is anecdotal evidence, and thus some reason to believe, that the elevated Lp(a) levels in the Pauling Therapy group can be lowered to zero (less than 3 mg/dl). Dr. R. F.., a biochemist from New Jersey, reported the following during his personal experiment. He added 0 .5 g proline when a blood test revealed elevated Lp(a). This was the only change he made in his daily regimen, which already included supplements and vitamin C and lysine. Doctor R.F. reported that after six months of adding proline his Lp(a) dropped by 40% and that after 14 months there was no detectable Lp(a) in his blood serum.

Other physicians familiar with the Pauling therapy report similar effects. Warren Levin, MD, has written a letter to the Journal of the American Medical Association (JAMA) about lowering Lp(a) with high-doses of vitamin C, lysine and proline.

If this effect could be monitored in a controlled setting, perhaps across some or most of the entire study group, it would be an outstanding result which we hope would merit further investigation by the National Institutes of Health (NIH) and other medical authorities and researchers.

Editors Note: It is a matter of public record that the U.S. government denied this grant proposal, as well as an earlier proposal by the Foundation that would have investigated vitamin C and lysine and its effect on Lp(a) in heart patients.

PLACEBOS IN THE JAMA CHELATION TRIAL

It is interesting that organized medicine may have already run a similar trial on one-half of the so-called Pauling Therapy, i.e. 5 g vitamin C. During this 'placebo' controlled trial, both groups were given IV vitamin C and magnesium. **While ethical, this approach of giving multivitamins and the vitamin C IV to the placebo group affected the conclusion.**

The fact was obscured, evidently, that a statistically significant result supporting the Pauling/Rath theory had been produced. This is not an argument for inert placebos but

one for making fully correct and less sweeping conclusions in papers.

In the JAMA study referred (Chelation Therapy for Ischemic Heart Disease: A Randomized Controlled Trial, Knudtson, et al. JAMA, Jan 23/30, 2002 – Vol. 287, No 4. pp. 481-486), **5 g of vitamin C and 750 mg of magnesium were given intravenously to both the EDTA and the control , or placebo, groups**. The study paper, seemingly written to debunk EDTA chelation for heart disease, concluded that there is "no benefit of EDTA chelation over placebo." However, the text in JAMA states that the sample size was chosen as follows:

"A sample size of 40 per group was chosen to provide 90% power to detect a 60-second difference in mean change in exercise time from the baseline to the 27-week follow-up."

The study was designed to detect a 60-second improvement in treadmill exercise time in a statistically significant way.

Again from the text, "The 500-ml. infusion solution of 5% dextrose in water… Each treatment solution also contained 750 mg of magnesium sulfate, 5 g of ascorbic acid, and 5 g of sodium bicarbonate…"

Vitamin C and magnesium were given to both groups.

According to their own paper, "Both study groups were able to significantly (P<.001) increase their exercise time to ischemia at the 27-week treadmill test."

Thus, using vitamin C and magnesium in the placebo obscured the statistically significant increase in treadmill exercise time in both groups, including the EDTA group. Unfortunately, the JAMA author's conclusions overlook this statistically significant benefit and called it a "placebo effect." The possibility that it was a placebo effect is unlikely, based on a meta-review of other Time to Ischemia treadmill studies in MEDLINE. See references.

While this author agrees with Hoffer that therapies and interventions are not "proven" by a double-blind placebo controlled trial; on the basis of generally accepted medical terminology, this trial "proves" the significant value of vitamin C in heart patients.

As alternative doctors know, "spontaneous remission" usually means that the patient did not tell the doctor about the supplements that were taken. We now know that 5 g of vitamin C is quite the "placebo" for ischemic heart disease. (Several drugs evaluated in a similar manner showed no increase in Time to Ischemia.)

In this author's opinion, based on the JAMA study, which said little about the value of EDTA for CVD and said nothing about the long-term benefits of EDTA; Chelation/ACAM doctors now have a moral obligation to add vitamin C and magnesium to their EDTA based on this "proven" result of the unified theory. Not all ischemia is

calcium-based; however, EDTA has a proven affinity for calcium. If a patient receives the contents of an IV bag for three hours, they ought to receive EDTA as well as ascorbate.

The air we breathe contains lead, our teeth are full of mercury, our foods and water contain aluminum and other metal and heavy metal toxins. EDTA detoxification has many proven beneficial effects. We now know that EDTA is even a better idea for heart patients when combined with supplements, especially vitamin C and magnesium.

Time to Ischemia References

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Chapter 7 – The Natural Pain Reliever They Don't Want You to Know About

Chapter 5 – The Greatest Medical Tragedy of All Time

Chapter 7 – The Natural Pain Reliever They Don't Want You to Know About

vitaminccures.com/blog/index.php/2017/06/13/chapter-7-the-natural-pain-reliever-they-dont-want-you-to-know-about/

OwenFonorow



An Opinion

by Owen Fonorow – **Vitamin C Foundation**

The number of people who experience chronic pain in their daily lives increases as the population ages. This pain equals profit for the drug industry, which sells an astounding number of pain relieving drugs such as Tylenol® or the Non-Steroidal Anti-Inflammatory Drugs (NSAIDS) such as Aspirin®. What most people don't know is that most of this pain and suffering is caused because our bodies are making a reduced amount of a natural hormone. This hormone is essential, without it humans would only live a day or two.

Many people, and most doctors, do not know that a simple and natural bio-identical hormone replacement would relieve the pain in millions of people who experience symptoms ranging from chronic fatigue syndrome (CFS), fibromyalgia, multiple sclerosis, rheumatoid arthritis, lupus, asthma, polymyalgia rheumatica (PMR) and other conditions mislabeled as "autoimmune" diseases. This kind of hormone replacement would relieve the pain from any disorder with symptoms caused by inflammation.

Small so-called physiological dosages of this natural hormone have been clinically effective in treating other conditions such as chronic allergies, various autoimmune disorders, ovarian dysfunction and infertility, gonadal dysfunction, allergic rhinitis, hyperthyroidism and diffuse goiter, chronic thyroiditis and diabetes mellitus, functional hypoglycemia, hirsutism, acne, and chronic cystic mastitis.

Taking this hormone is surprisingly safe, despite the fact that most medical doctors will tell you it is the most dangerous drug that they can prescribe. Unlike Tylenol®, which sends thousands to the emergency rooms with liver failure caused by glutathione depletion every year; or aspirin, which damages tissues in the stomach causing ulcer-like lesions, there are no adverse side effects of this natural adrenal-produced pain

relieving hormone. This is true at the safe physiologic doses that are ideally produced daily by our adrenal glands. Yet a deliberate campaign to steer doctors away from prescribing the hormone exists.

Part of the fear of this hormone is that like cholesterol, vitamin D, and other similar substances; this adrenal hormone happens to have a specific chemical configuration that makes it a steroid.

Like vitamin C, this essential hormone is inexpensive and threatens the profits of the drug industry. This hormone is one of several produced in every human body by the adrenal glands. Its discovery in 1949 garnered a **Nobel Prize in medicine** for the Mayo Clinic in 1950.

The adrenal glands also have among the highest concentrations of vitamin C of any tissues in the human body. Sometimes vitamin C can 'wake up' the adrenals, and thus persons supplementing vitamin C experience pain relief simply by taking high-dose vitamin C. One theory as to why vitamin C may have such a profound effect on the common cold is that higher dosages allow the adrenals to make more **cortisol**.

Cortisol, The Natural Steroidal Anti-Inflammatory

> "That cortisone and cortisol are normal hormones of the adrenal cortix implies that in physiologic dosages they must be safe" – William Mck Jefferies, **Safe Uses of Cortisol.**

Author's Personal Story:

During the summer of 2012, about one year after my brother and business partner Mike Till Sr. died, I developed a pain in my back and a shortness of breath that persisted. When I finally saw a doctor, my primary care physician suggested that I go to the emergency room. I was admitted for very low blood pressure. From an ultrasound, they determined that I had fluid in the pericardium, a sac that surrounds the heart. This fluid made it harder for my heart to beat. After an immediate surgical procedure to drain the fluid, I remained in intensive care for 10 days. A team of specialists tried to determine what was wrong. These experts suspected that I had a serious infection, but they could not culture any organism.

Before this episode, I had waited for a long time before seeing the doctor. I tolerated the pain in my back and shortness of breath. Around 30 days after I was discharged from the hospital, the same symptoms appeared again and this time I immediately went to the ER. Again, I was put into intensive care while another team of five specialists tried to figure out what was wrong, again suspecting that I had an infection. None was found. Having no idea what was wrong with me, I began documenting this experience at the Vitamin C Foundation's online forum.

I spent another 10 days in intensive care, the second 10 day-stay in the span of two months, and one of the more brilliant specialists decided to try some "high powered" IV

steroids; which I was told would elevate my blood sugar rapidly. Completely ignorant of steroids and cortisol, I resisted and asked my primary care doctor for intravenous vitamin C (IV/C) instead, and she ordered the IV/C at the hospital. However, as Dr. Levy points out in his book **Primal Panacea**, no hospital in the United States at that time utilized intravenous vitamin C. In my case, the pharmacy wasn't equipped, so I never received the vitamin C intravenously at the hospital and was discharged.

On exit from the hospital the second time, my primary doctor prescribed a methyl prednisilone (steroid pak). She hoped that these steroids would keep me out of the hospital for a third time. Like everybody else, I was afraid to take "steroids."

(*Note: This primary care doctor, the one who ordered the IV/C, was let go from her practice about two months later. Dr. Levy had worried that this might happen, but I was desperate.*)

Outside of the hospital, I immediately had a series of ever increasing vitamin C infusions, and may have reached 200 grams per session. I hoped and believed that it could cure whatever was ailing me; however vitamin C could not cure me. My ailment, general pain and malaise resembling Rheumatoid Arthritis, was not caused by an infection after all. I later learned that I had a serious adrenal hormone deficiency. **The hormone that I wasn't making enough of is the Steroidal Anti-Inflammatory cortisol**.

When the intravenous vitamin C didn't work, and with ever-increasing pain all over my body, I began taking the methyl prednisone pills that my primary care physician had prescribed. They worked, and quite fast. I started taking 8 mg of methyl prednisilone (*a concentrated form of cortisol, a drug on the order of prednisone*) and was "cured."

After this experience, I started reading about cortisol and scary effects of too much, as many authors characterize cortisol as the "stress" hormone, which it is because under stress we need and produce more. Eventually, I saw a reference to a book, **SAFE USES OF CORTISOL, 3rd edition**, by William Mck Jefferies, MD. This important book helped me to understand what was wrong and how to correct it.

"*Cortisol is the only essential hormone*," Jefferies begins his book by telling his readers. We can do without every other hormone for long periods, but if we are without cortisol, even for a single day or two, we die. What this means is that all of us are making some amount of cortisol, and we make more during the day and less during the night during sleep when levels of melatonin are high. However, if our adrenal glands are not able to make a sufficient supply (i.e., the amount the brain is currently demanding), the result is pain. Ever increasing pain occurs in the tissues that are deprived of this steroidal anti-inflammatory.

My body wasn't making enough of my own cortisol. In Jefferies' book, he discusses the bio-identical version of cortisol, hydrocortisone. I learned that the 8 mg of methyl prednisione I was taking was almost a total replacement dosage, as if my adrenal

function had completely shut down. (*Note that the dosage of hydrocortisone is different from the prednisone. The bio-identical hydrocortisone replacement dosage is something like 4 to 5 times that or 35 to 40 mg*.)

At the higher dosage, my blood sugar began to rise, so I had to cut back. Eventually, I was able to lower the dosage to about 2 mg of methyl prednisilone without chronic pain, which is roughly equivalent to 10 mg of hydrocortisone.

From this experience, I learned that most of the chronic pain suffered by humanity is caused by an adrenal malfunction that leads to less cortisol than the body requires. I also learned that today's doctors are misinformed that so-called glutocorticoids (e.g., cortisol/prednisone/methyl prednisilone) are the most dangerous drugs in their medicinal arsenal. I found it almost impossible to get a long-term prescription for a "natural hormone" that kept me out of a wheelchair and that I attribute to saving my life.

My mother spent most of her life in pain after she was diagnosed with Rheumatoid Arthritis. Her search for pain relief led her to Linus Pauling's book on vitamin C; and the rest, as they say, is history. For her, vitamin C was the only substance that helped mitigate her pain, other than one cortisone shot she received at the Mayo Clinic. Had my mother known what I now know, her life would have been pain free, and I would probably know nothing about vitamin C.

Does Cortisol Harm or Enhance Immunity?

> "We now know that the influenza virus attacks the human body by impairing the production of adrenocorticotropic hormone (ACTH), which, in turn, impairs the production of cortisol, the only hormone that is absolutely essential for life." – William Mck Jefferies,

Medical doctors are taught to be cautious of prescribing Cortisol-like steroids because of their negative effect on immunity. From my own experience, I now believe that doctors are trained incorrectly. This is yet another example where medical doctors are steered away from a lower cost alternative to newer, more expensive prescription drugs.

According to world expert endocrinologist William Mck Jefferies, MD,

> "Concern regarding the occurrence of respiratory illness in such patients was enhanced by the knowledge that large doses of glucocorticoids (prednisone, hydrocortisone, etc.) could impair resistance to infection while masking the symptoms.
>
> It was, therefore, a finding of some surprise and considerable relief that years passed with patients consistently reporting that they had either no common cold or only very mild attacks. Most of these patients had no symptoms even suggestive of such disorders; but when symptom did occur, a prompt increase in the replacement dosage of glucocorticoid was often followed by a disappearance of the symptoms with recurrence when the dosage was returned to maintenance levels. During this time, other members of the patient's families seemed to have the usual quota of respiratory illnesses, to the absence of such illness in the patients could not be attributed to lack of exposure to the viruses.
>
> An additional reassuring observation was that when patients with adrenal insufficiency developed respiratory infections, the increase in dosage of replacement gluccorticoid did not cause an increase in complicating bacterial infections such as sinusitis or bronchitis, and unless a bacterial complication developed, antibiotic therapy was not necessary" (Jefferies, pg 127 and 128).

The possibility that cortisol might enhance resistance to infection was so contrary to the well-known effect of its impairment that it was initially considered with skepticism. Yet, a review of the medical literature revealed an impressive amount of evidence that physiological amounts of glucotrticoid (e.g., cortisol) can have a protective effect against infection.

What Cured my Gerd?

Postulate: Gastroesophageal reflux disease (GERD, aka heart burn) is caused and/or magnified by low Cortisol levels in the blood/tissues.

My brother in-law, who is a few years older than me, was over for dinner. He has chronic heartburn or GERD, and has for years. **It was then that I realized that my own esophagus had recently healed, and I no longer had chronic GERD pain.**

Recently, I suffered a recent attack of low cortisol, caused by a massive lung infection. Again, I got to investigate a major hospital from the inside. I was diagnosed with sepsis, kidney failure, and low blood pressure, but this time (March 2017) the doctors knew exactly what to do. They gave me lots of IV steroids! I was only in intensive care one night. However, when they switched me to a regular room, the cortisol was accidentally dropped from my chart. The first symptom I experienced, not knowing this had happened, was heartburn; meaning that my GERD had returned. Later, with generalized pain, I started to question whether I was getting the cortisol. It turned out that I wasn't! This experience reinforced and educated me on how it feels when I am not getting this hormone. It is not a pleasant feeling, but one experienced daily by millions of older Americans.

At one point several years previously, I had an over night stay where I forgot my cortisol (methy prednisolone at that time). Because of this, I missed a day. I experienced very little pain, so I thought perhaps my adrenals were starting to work more normally, and only took 1 mg the next day. I was only 3 mg short for two days (0, 1, 2 instead of 2, 2, 2) but I paid the price for an extended period, i.e. a week to 10 days! Pain started in the fingers, typical rheumatoid arthritis-like pain, all because I missed 3 mg. The question then became, how much would I need to increase my dosage in order to compensate, given the potential ill effect of higher doses of this glutocorticoid on my blood sugar?

I have learned that the pharmacokinetics of methyl prednisolone are delayed, and pain relief is not like taking an aspirin for pain (the NSAIDS and hydrocortisone work faster, sometimes providing pain relief within 15 minutes. However, because of the nasty side effects, I don't take NSAIDS.) The increase in pain may be delayed 48 to 72 hours after the dosage is declined, but then restoring the dosage apparently cannot stop the inflammation. The pain may go on for weeks despite a normal cortisol dose! Ouch!

The bioidentical hydrocortisone has a more predictable pattern of pain relief, it takes less time to take its effect, more like a typical NSAID.

It causes me anger to think of all the people (including my late mother) who had no idea that medical science had discovered exactly what causes and how to stop the pain; simple, natural hormome replacement. With this angst off my chest, the following is a copy of the letter that I sent my brother-in-law about what I did to eliminate my own heart burn/GERD. I now wonder if my success would have been possible without cortisol supplementation; or whether a slight lack of cortisol might be responsible for the inflammation in the esophagus that causes GERD.

> "Dear brother-in-law,
>
> I could tell that you are still suffering from "heart burn"/GERD, and I know from experience it is like torture. While I may have told you some of this before, I want to review how I cured mine. I hadn't even thought about the fact that I now sleep through the night without any heartburn.
>
> There are two valves or sphincters in the stomach, one to the connection to the intestines, where digested food is supposed to go, and the other at the top of the stomach, connected to the throat/esophagus.
>
> It is the upper sphincter on top of the stomach that causes the problem. It is supposed to keep the acid contents of the stomach, in the stomach.
>
> The stomach is designed for high acid, but the throat/esophagus is not. If stomach contents backs up from the stomach through the open sphincter into the esophagus, it will burn and damage the throat. This is the cause of the pain. And "they" are right in the commercials, in that this must be allowed to heal. (I will get to how I got mine to heal).
>
> There is a book you should read entitled **WHY STOMACH ACID IS GOOD FOR**

YOU by Jonathan Wright and Lane Lenard. Surprisingly, LOW stomach acid often causes GERD because of poor digestion. The surprising fix, if this is the case, is to take stomach acid (Betaine HCL) with meals. Not intuitive, so read the book. Taking antacids interferes with digestion and turns the problem into a chronic condition.

What seems to happen when the stomach acid is low, is that the sphincter muscle relaxes. (This may be why the vinegar fix seems to work; the acid causes the sphincter to tighten. The only problem is, if the throat is already raw and inflamed, this will cause even more pain.)

The other thing I learned is that the stomach completely empties six hours after a meal, and when it empties, as the lower sphincter relaxes and opens, the upper sphincter may open too, especially if you are lying down. (You'll note the maximum pain and discomfort, like clockwork, is six hours after your last meal at night).

One idea that is not always easy, is to eat more than six hours before going to bed and/or lying down so that you are upright when the stomach empties into the intestines. Barring that, don't lie flat 6 hours after the night meal. When I felt the pain at night, I would immediately sit up for awhile, or if I lied down, I used enough pillows so I was at a 45-degree angle. This allowed gravity to help drain the stomach from the bottom sphincter.

I know that the throat/esophagus can heal, because mine has, and I now get through the night without any pain; especially if we eat early. But it can take some time, and while it is healing, you have to avoid spicy/acid foods. In fact, instead of taking ascorbic acid vitamin C (a mild acid) I switched to sodium ascorbate vitamin C which is non acidic.

So you have to avoid acid/irritants going down, and the stomach contents from coming up. You do this by keeping the sphincter tight, and proper acid in the stomach seems to be key to keeping the sphincter tight, unless there is something else going on. (If you remember our friend C., she had a huge hiatal hernia, which was surgically repaired and now she feels great.)

One other factor in the healing may be due to the low dose prednisone (cortisol replacement) I have been taking (since I figured out that low cortisol production by my adrenals caused all those hospitalizations a few years back.) It turns out that if you aren't making any cortisol, you die in 24-48 hours, so everyone has to be making some. It is not well recognized, especially by medical doctors, that as we age, like other hormones, we can make less cortisol.

Cortisol is the Steroidal Anti-Inflammatory (where aspirin is a Non Steroidal Anti Inflammatory NSAIDS). Cortisol stops and controls inflammation. Since the GERD pain is from inflammation of the esophagus, the reason mine cleared up may have something to do with restoring my cortisol levels to normal. It is something you could mention to your doctor, because a short course of prednisone during the attempt to heal the throat may make it go faster and easier."

Final Thoughts

I believe that there would be much less pain and suffering in the world if medical doctors were to read William Mck Jefferies, MD 's book, Safe Uses of Cortisol.

Furthermore, there would be more happy parents from those now considered infertile. The effectiveness and safety of this program of treatment has been clearly demonstrated in over one thousand patient years of experience, during which over 200 babies have been born to women taking small, physiologic dosages of cortisol or cortisone acetate throughout their pregnancies and postpartum periods, with no evidence of harm to either mothers or babies.

Saliva Testing

Cortisol levels in the blood vary throughout the day, rising from a low in the early morning to the highest level in mid-afternoon. Blood tests can be used to monitor the varying levels, but having blood drawn throughout the day is challenging to say the least. In my experience, all-day saliva testing is as accurate, if not more accurate than blood testing (although most doctors are taught the opposite – that hormone testing from saliva is unreliable.) A "ZRT" day-long series of saliva samples showed my endogenous cortisol levels to be 20% below the "low" on their assay. This lab result explained the replacement hydrocortisone dose that I required at that time to move my blood cortisol into the middle of the normal range. These tests are available online and do not require a prescription from a doctor. If you suspect that your pain is due to low levels of endogenous cortisol, you can easily find out. If your cortisol is inadequate, the problem will be finding a medical doctor willing to act on your lab result.

Conclusion

Vitamin C is a threat to the profitability of medicine. It is available without prescription, so medical doctors are deliberately made ignorant. They are not informed about any of the existing research or made aware of this essential substance's medical potential.

Cortisol is different because it is only available via prescription. It is also essential and poses a threat to the profitability of the drug industry, particularly the over-the-counter pain reliever industry. Even though cortisol is a natural, bio-identical hormone (as hydrocortisone) it is only available through medical doctors. In my opinion, medical doctors have been deliberately misinformed about the supposed dangers of "steroids" because a lack of cortisol in the human body creates a huge number of doctor visits.

Chapter 6 – A Report from the Twilight Zone

Chapter 8 – The 100-Year-Old, 100% Effective Cure for Cancer (coming soon)

Chapter 8 – The 100-Year-old, 100 Percent Effective Cure for Cancer

vitaminccures.com/blog/index.php/2017/06/20/chapter-8-the-100-year-old-100-percent-effective-cure-for-cancer/

OwenFonorow



Like a sword of Damocles, the 2017 United States Food and Drug Administration (FDA) edict and action against my companies and me has prevented our publishing of this comprehensive chapter on curing cancer online. Readers will have to wait for the release of book. (Note: Much of this information is available to registered members of the Vitamin C Foundation forum.)

In the meantime, below is a preview of the **preface** to the second book, entitled **The Great Suppression of American Alternative Medicine**.

PREFACE

A Message to the Overseers:

We say to those who pull the strings of Governments that use force to suppress alternatives to prescription drugs:

We the people will take it no more.

We will no longer listen to your propaganda or suffer from chronic disease, for which there have been cures known for decades. Nor will we tolerate those who are willing to maim and kill us, and especially those who knowingly and deliberately harm our children; injuring their brains for the rest of their lives in order to sell their wares. The world population is about to find out about what you are doing and how long you have been doing it. Having more money than God won't save you, after the masses know what we know. *Be afraid. Be very afraid.*

The downfall of Big Pharma isn't going to take a government edict, action of congress, or the attention of the President of the United States. People simply have to read the **VITAMIN C CURES** book series in order to learn the truth.

After one person reads **VITAMIN C CURES: Heart Disease**, that person will know. As more people read the series, more people will know. Every new reader of the book reduces the power of Big Pharma. At some point, enough people will have enough knowledge and truth to cause Big Pharma and the people who promote its Big Lie to dwindle into the ashes of history. Every reader of VITAMIN C CURES decreases the power of Big Pharma's mind and body control over humanity.

If you are reading this, there is a good chance that it is due to the tireless efforts of American's #1 Health Freedom fighter, Tim Bolen. Tim is a strong voice for truth and freedom. An American hero, his web site, the **BolenReport.com**, has a rather large audience; thanks to the mandatory vaccination law in California. Tim's web site has become a source for various alternative media, and he has the ear of top members of the new administration.

But the beauty, perhaps the divine inspiration, is that we the people don't need much help from any government. As long as the book exists, and can be downloaded and read by all people, governments can sit back and watch. The people will take care of what needs to be done, and they will ferret out the nefarious individuals behind this; no matter how rich and powerful they are at the present time.

I used to think we'd need a law to ban pharmaceutical advertising, to break the "70% of revenues" stranglehold that Big Pharma's ads have over the mainstream media. After what's coming, Big Pharma won't have any money to advertise. The problem will take care of itself.

Of course, the federal law classifying foods as drugs needs to change; but again, after people know, the public will demand that the law change.

Please sign our petition to change the law in order to make a drug a drug, and a vitamin a vitamin.

Owen Fonorow and Lunes Payling

Note: We are asking Erin Elizabeth (HealthNutNews.com) for permission to copy her 38 synopses of the strange deaths of alternative doctors since 2015.

Remembrance of Fallen Heroes

As reported by Erin Elizabeth on HealthNutNews.com, more than 60 leading alternative doctors have met their ultimate demise since early 2015. Some of these deaths are most likely from natural causes, however others seem far more suspicious. Perhaps the most questionable is the death of anti-vaccine doctor Jeffrey Bradstreet, who was murdered shortly after federal officials raided his premises. A most disturbing theory suggests that the murders are the work of a rouge element, or death squad, that operates within the United States government.

https://www.healthnutnews.com/recap-on-my-unintended-series-the-holistic-doctor-deaths/





Watch Video At: https://youtu.be/dREmueW1yDI

Chapter 9: Health Nuremberg, Vitamins Are Gene Therapy, Glucose/Ascorbate Antagonism and other Random Thoughts

vitaminccures.com/blog/index.php/2017/06/26/chapter-9-health-nuremberg-vitamins-are-gene-therapy-glucoseascorbate-antagonism-and-other-random-thoughts/

OwenFonorow



Fight “Bad Genes” with Megadose Vitamins

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> ### The Gene Blame Game
>
> There is a new tactic in the war of ideas between traditional and innovative medicine. The latest media propaganda blames incurable chronic disease on “faulty genes,” as if there are no treatments for genetic defects. What the public isn’t being told is that megadose vitamins are often the best answer to problem genes.

Misleading Medical News

While reading the medical news, one may notice the flood of stories crediting medical science with discovering a *gene* responsible for various medical conditions. The subliminal message seems to be that there is nothing that can be done right now; however, modern medicine is on the case. The apparent aim of these stories is to divert the public’s attention from medical science’s inability to find cures for these various medical conditions. Unbeknownst to those behind the media hype, high-dose vitamins can compensate for bad genes, and some vitamins already are known for their ability to repair damaged DNA.

Heredity and Protein

Our genetics and the vitamins we require daily for health are closely related. Genes contain the instructions that our body needs to make us physically who we are. Vitamins help genes carry out these instructions.

Our genes create proteins (technically, genes in our DNA contain a blueprint for a protein, and the nucleic acid RNA uses the gene’s blueprint to make various proteins).

Of the 50,000 or so proteins the human body produces, the vast majority are enzymes. Enzymes control the chemical reactions within the body.

Vitamins are usually specialized molecules called co-enzymes, which regulate various enzyme reactions. Generally, co-enzymes are not destroyed during reactions with their target enzymes. Small amounts of co-enzymes are usually sufficient for health. Vitamins may affect both the rate at which proteins (enzymes) are produced, and the chemical reactions controlled by the enzymes.

During evolution, human DNA lost the blueprints for all the vitamins as the result of genetic mutations. In each case, we must eat food that contains the vitamin (or else we must supplement the vitamin) to overcome the ancient mutation. If we don't eat each and every vitamin regularly, we will get sick and eventually die.

B-Vitamins Repair Damaged DNA

Although it isn't well publicized, the consumption of mega-dose vitamins has already achieved remarkable beneficial effects in numerous people with "faulty genes."

Dr. Bruce N. Ames, a world-renowned American biochemist and geneticist at the University of California at Berkeley, claims that his investigations have already proven that **more than 50 known genetic diseases can be effectively treated by high-dose vitamin therapy**. Dr. Ames' claims are based upon significant research focusing on the role vitamins play in the natural process of DNA repair.

Mega-dose vitamins not only repair faults, which appear in DNA strands with aging, but they also may compensate for heredity errors or mutations in our DNA. To understand how vitamins can accomplish this, lets first review genetics and the nucleic acids at the center of life: DNA and its cousin, RNA.

The Wonder of DNA

Human DNA consists of 3 billion nucleotides chained together. Every cell has one DNA molecule. If one strand of human DNA were straightened, it would extend approximately 1 meter or English yard. All the DNA from all the cells in your body, if stretched, would extend past the moon and back, several thousand times!

DNA must be tightly bundled to fit within a tiny cell. These bundles, called chromosomes, have characteristic shapes when viewed under a high-powered microscope. Each chromosome is composed of thousands of smaller sub-groupings called genes that control your inherited traits.

The Genetic Code is a Blueprint for Proteins

In addition to DNA, every cell contains RNA. The DNA and RNA molecules are called *nucleic acids* and they work together as partners. Simplifying greatly again, small

sections of the DNA strand called 'genes', are usually several hundred to several thousand nucleotides long. Each gene contains the information to build different types of long, linear molecule called proteins.

If the DNA is the genetic 'computer program' source code, then RNA controls the program's execution. The input to the genetic program is our diet. The output is protein.

Heredity experiments have shown that every gene controls one or more inheritance factors, such as the color of the hair or skin. The 20,000 to 25,000 "protein encoding" genes found in human DNA are estimated to make the more than 50,000 different proteins we must have to be healthy.

The Proteins We Eat Are Not the Proteins We Use

The food we eat can be divided into three broad categories based upon its chemical make-up: *carbohydrates*, *fats* (or lipids) and proteins.

The body tissues are composed mostly of protein and the body chemistry is controlled by enzymes (which are protein). Proteins are a kind of plastic, known as a polymer, that are made up of a small number of different molecular building blocks called *amino acids*.

The proteins in the food we eat are not the proteins our human body requires. We eat animal and vegetable protein for its building blocks, the amino acids. When we digest "foreign" proteins, they are destroyed during digestion. The resulting amino acids are absorbed and then reassembled in cells, according to our genetic protein-blueprints.

There are 20 different kinds of amino acids in human protein. The body can even make some of the amino acids it needs. The others our body cannot make are called *essential* amino acids, and they must be obtained from our food.

The color of your eyes, your sex, the size of your muscles, and the color of your hair are based on the different proteins that your different cells make, and of those proteins that were made previously in your parent's cells.

Our heredity is our DNA blueprint for the production of thousands of different proteins directed by our unique genetic code. How we implement the blueprint is our state of health.

Enzymes Control Body Chemistry

Many *hormones* are protein, meaning their chemical structure is directly encoded in DNA. These substances control and speed up countless chemical reactions in the human body, and life would be impossible without them.

Co-enzymes, unlike protein enzymes, are usually complicated particles that enhance the function of specific enzymes. Co-enzymes are required for life, and many combine

proteins with lipid (fatty) components and are known as lipoproteins. [1] Some inorganic trace minerals act as co-enzymes and are also required for life.

In general, the formula to produce a co-enzyme is difficult to encode in DNA. These particles are not pure protein and so the DNA must encode other enzymes that are necessary for the body to produce organic co-enzymes through a series of chemical reactions called a *metabolic pathway.* This complexity increases the likelihood that a mutation will interfere with the genetic instructions.

The vitamin deficiencies were discovered and isolated in the early 20th century because deficiencies kill people. Most vitamins, but not all, are co-enzymes. During the course of evolution, if the amount of the vitamin in the diet was sufficient to ensure survival, a species could lose its ability to make it. However, genetic accidents are usually detrimental. The accident of nature does not imply that the co-enzymes in today's food supply are adequate. Many scientists, including the late Linus Pauling and Bruce Ames, believe that more co-enzymes in the diet may lead to better health. Most vitamins are remarkable for their lack of toxicity.

Vitamin C is an unusual 'vitamin.' First, it is not a typical co-enzyme; instead, ascorbic acid (the technical name for vitamin C) closely resembles the simple sugar glucose. It is destroyed during the chemical reactions our body uses to make collagen.

Second, the DNA in most living beings on planet Earth still contains the blueprint for making vitamin C.

In fact, the genetic mechanisms that have been measured in most animals produce quite gram amounts of 'vitamin' C in the liver or the kidney. With respect to the need to ingest vitamin C as a vitamin, humans are a rare exception, not the rule.

Why isn't Coenzyme Q10 a vitamin?

Co-enzyme Q10 (CoQ10) is required for energy. Every cell in the body requires CoQ10 to make the cellular fuel (ATP) out of sugar (glucose). Yet, CoQ10 is not a vitamin because the human body still has the genetic encoding for creating this molecule, thanks to our DNA/RNA.

Our body can manufacture the vitamin-like fat-soluble CoQ10 using a complicated 17-step metabolic sequence, controlled by vitamins, co-enzymes and enzymes.

We may ask, why is coQ10 not a vitamin like many other similar co-enzymes? Why do we and all other animal species still have the very complicated DNA blueprint for CoQ10?

One reason is that our diets do not contain much CoQ10. Non-vegetarians ingest, on average, 5 to 10 mg of CoQ10 per day, vegetarians obtain even less CoQ10 in their diets. Scientists estimate that our bodies make 500 mg of CoQ10 per day. We can conclude

that the amount of CoQ10 available in the ordinary diet is insufficient to meet the energy needs of our species, or any species, even meat eaters.

It should be noted that, several dietary vitamins (as co-enzymes) are also required for our bodies to make its CoQ10.

How Can Genetic Defects be Treated or Cured with High Dose Vitamins?

Consider the dire consequences should a person not be able to make CoQ10. The ramifications of such a genetic mutation would be catastrophic. Persons unable to manufacture adequate amounts of CoQ10 would have extreme lethargy, muscle aches, inability to move their muscles, heart failure, and early death.

Such a horrible genetic fault could be easily "cured" by supplementing 500 mg of CoQ10 daily.

This is one hypothetical example of the paradigm by which orthomolecular (nontoxic) substances, usually vitamins, can overcome the genetic flaws in the blueprints for encoding proteins and enzymes.

Perhaps the greatest known actual genetic defect in humans is our inability to make vitamin C.

Most species on earth make vitamin C in their livers and kidneys out of glucose. Four enzymes, only three of which are present in human beings, accomplish this genetic miracle. Human DNA/RNA lacks the genetic ability to create the fourth enzyme, l-Gulono-gamma-lactone oxidase (GULO). The missing enzyme performs the fourth and final step in the conversion of glucose to vitamin C (ascorbic acid).

This genetic defect was first isolated to a mutation in a specific gene in 1959 by the biochemist John J. Burns. It is estimated that this mutation occurred forty million years ago. There are only four or five species that have survived to the present day having suffered a similar mutation. The vast majority of known animal species still retain the genetic code for vitamin C.

The lack of vitamin C in humans has probably caused more suffering than all other genetic defects combined. Scientists who have studied these matters have blamed heart disease, cancer and many other chronic diseases on this single genetic defect that caused our ancestors to lose their ability to make vitamin C.

Vitamin C is now inexpensive and plentiful, thanks to the combined efforts of countless brilliant scientists, starting in the 1930s. We are indebted especially to Noble Prize winners A. Szent-Gyorgyi and Linus Pauling, along with biochemist Irwin Stone, for their crusade to make the value of high-dose vitamin C better known among the public.

Oral vitamin C intake can compensate for our genetic fault because vitamin C is not

broken down in the stomach. While there is sufficient vitamin C in the ordinary diet to support life, most animals still make their own vitamin C in large amounts. Humans must supplemental vitamin C in order to achieve the same levels in the blood and tissues that are normally present in animals.

The improvement in health that can be achieved by taking vitamin C is similar to the health of animal species that make vitamin C. The best health is generally obtained by mimicking that amount the animals produce by ingesting gram amounts of vitamin C daily up to bowel tolerance.

Can every genetic fault, where life is still possible, be successfully treated in the same manner? Sadly, medical science is not investigating this question. The large pharmaceutical interests will not invest money to help determine the role of vitamins (and other low-cost substances) that cannot be patented. In fact, they try to steer researchers away from such questions.

Gene Therapy Through Targeted Nutrition

Often, genetic mutations can be corrected by targeted nutrition. In cases where the defect interferes with the production of a required substance, such as in the case of vitamin C, the oral consumption of the substance, or its precursors, can overcome the genetic fault. Every vitamin we must consume corrects an ancient genetic mutation in our DNA.

After science identifies defective genes and the proteins they produce, it may be possible to use vitamins at much higher amounts than normally found in the diet, to help improve the speed of “faulty” reactions that are dependent on the missing enzyme. This seems to be why high amounts of vitamin B3, for example, have such profound beneficial effects on people with schizophrenia. As the vitamins help our bodies produce more (or replace) the missing proteins, health improves.

As we age, many cells die or become less productive. Dr. Ames’ works helps us to understand how the various B vitamins “repair” damage that occurs in DNA strands as we age. Ames’s research has already shown that high dose vitamin therapy can overcome 50 genetic diseases.

Someday, when genetic engineering becomes a reality and science can safely correct DNA mutations, our progeny may regain the lost ability to make vitamin C out of sugar, like most species.

Every being is a great experiment. Outside of identical twins (or clones), no two beings are exactly alike. We are different than other species because our DNA encodes different proteins, and we are different than other humans because our cells produce our proteins at different rates. The complexity in our DNA reduces to protein, its nature and how much our cells produce. Together inside each cell, our RNA molecules guide the process of manufacturing proteins using the genes that our unique DNA encodes.

The next time you read a news story blaming a faulty gene for some medical condition, what they are really saying is that there is a problem with the instructions for making a human protein; most likely an enzyme that controls some of the body chemistry. A missing enzyme is why we can't make vitamin C. As you read such stories, ask yourself whether mega-vitamin therapy might be an effective therapy that overcomes the defective gene, and why isn't medical science doing more to find out?

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The Diabetic Double Whammy: Reversing Diabetes Type II, Glucose-Ascorbate Antagonism, and their Impact on Reversing Heart Disease

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> "If you are an American diabetic, your physician will never tell you that most cases of diabetes are curable. In fact, if you even mention the "cure" word around him, he will likely become upset and irrational" -Thomas Smith – **healingmatters.com**

Over the years, I was often asked by Medical doctors, "*If Linus Pauling was correct that a chronic vitamin C deficiency causes cardiovascular disease, why then do patients respond so well after we put them on Omega-3 fish oils?*" There answer to this question was found in the writings of Mr. Thomas Smith (**HealingMatters.com**). Mr. Smith was a Type II diabetic who cured himself in three months.

Nutrients Enter Cells Through Cell Membranes

Thomas Smith wrote that his cure was the result of his personal independent research of the history and science of diabetes. Smith began reviewing the scientific literature after conventional medicine failed him. His investigations led him to the conclusion that man-made, highly processed trans fatty acids (e.g. hydrogenated oils) are the root cause of the most common form of diabetes. Smith cites research showing that these toxins in the diet disturb cellular membranes. Cells begin to have trouble absorbing nutrients through the altered membrane, particularly the sugar glucose, which remains in the blood. The most noticeable symptoms of this condition are elevated blood and urine sugar levels. Patients are diagnosed Non-Insulin Dependent (Type II) diabetes (*Note: The disease condition is sometimes called Syndrome X. Conventional medicine claims*

that the cause is unknown and medical doctors do not accept Smith's etiology).

Even more astonishing, Smith asserts that the damage to cell membrane caused by a poor diet can be repaired and the Type II diabetic syndrome cured. He recommends eliminating all processed fats and oils. The protocol calls for supplementing high-dose Omega-3 fatty acids. As blood sugar levels begin to decline, healthful natural fats and oils are slowly added back to the diet.

Smith writes that after he adopted this protocol, his blood sugar dropped from 385 mg/dl to 85 mg/dl in 103 days. He claims that such reversals are possible in Type II diabetics because the body is continuously repairing cell membranes by using the fats and oils available in the diet. However, he says that the speed of recovery is related to the length of the illness (i.e., the number of damaged cell membranes). Some Type II diabetics may require up to one year for dramatic reductions in blood sugar. Note: There is nothing that prevents a Type I diabetic who is not making insulin from also becoming Type II by eating the wrong kinds of fats.

Vitamin C Competes with Glucose For Insulin Pumps

Diabetics are probably not absorbing other nutrients from the blood as well. Vitamin C is structurally similar to glucose, and the vitamin has a short half-life in the blood stream. It should concern medical professionals that vitamin C and glucose molecules share the same insulin-mediated tunneling mechanism into cells through the membrane.

In the 1970s, Emeritus Professor John T. A. Ely, University of Washington, proposed his Glucose-Ascorbate Antagonism (GAA) theory that predicts high glucose levels hinder vitamin C entry into cells. Animals that make their own vitamin C use dietary glucose as the raw material, and the ascorbate and glucose molecules are similar. The similarity extends past molecular structure to the way they are attracted to and enter cells. Both molecules require help from the pancreatic hormone insulin before they can penetrate cell membranes using special "pumps." The name for the process that propels glucose and Vitamin C (the reduced form) through cell membranes is Insulin-mediated uptake.

Ely studied the insulin-mediated uptake of glucose and vitamin C using white blood cells. White blood cells have more insulin pumps and they may contain 20 times the amount of vitamin C as ordinary cells. Dr. Ely explains that both glucose and vitamin C molecules compete, but all things are not equal. The evolutionary "fight-or-flight" response favors glucose entry into cells at the expense of vitamin C. Because of this antagonism between sugar and Vitamin C, Ely recommends a low-carbohydrate, low-processed sugar diet.

Professor Ely told this author that he had advised Linus Pauling of the GAA theory and its prediction that Vitamin C would be less effective fighting colds in those who did not restrict their sugar intake. Recently, Ely and associates conducted a study on the

common cold to test the GAA theory. Sugar and refined carbohydrates were restricted in the subjects. According to Dr. Ely, the remarkable (although never published) results showed an overwhelming preventive and curative property of vitamin C against the common cold in subjects with reduced sugar intake. (Presumably these subjects did not suffer the cellular membrane malfunction commonly diagnosed as Diabetes Type II).

The Diabetic Double Whammy

Combining these ideas, we postulate that cells that can't absorb glucose are not absorbing vitamin C either. As blood glucose levels rise, the GAA theory predicts that vitamin C uptake is greatly diminished throughout the body, even in cells with undamaged insulin pumps. Our conjecture is that the serious health consequences of prolonged diabetes, e.g. blindness, wounds that won't heal, limb amputation, etc., are exacerbated by the lack of vitamin C inside cells.

We may now more intelligently answer the question as to why heart patients do well on high-dose Omega-3 oil supplementation. Healthful omega-3 fatty acids, such as those found in flax seed and fish oils, promote healthy cell membranes; allowing more nutrients to pass into cells. Theoretically, there would be more benefit from Omega-3 supplementation after the primary cause of membrane damage, e.g., trans fatty acids, are eliminated from the diet. As cell membranes become permeable, sugar molecules leave the blood stream lowering blood sugar, making vitamin C more bio-available. Finally, we postulate that the cellular membrane problem hindering the uptake of glucose in diabetics also hinders their cells from obtaining vitamin C.

Heart patients whose condition improves on Omega-3 oils will improve even more as they eliminate processed foods, and follow Linus Pauling's **recommendation** to increase their vitamin C dosage to individual **bowel tolerance**.

HEALTH NUREMBERG

Crimes Against Humanity and The Secret Book: The Existence of Hidden Medical Knowledge is Revealed

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It keeps getting more and more curious…

Generally, health information that is repeated in the mainstream media is wrong. Journalists tell us that their stories are based upon reliable sources such as medical journals. Medical journal editors credit "peer reviewed" science for their articles.

If the journalists are right, it is medical "science" that is wrong. But why? The scientific

method is designed to minimize the chance of errors. Researchers are expected to challenge errors in the research of others. Yet, medical research always seems to be on the wrong path. Sun exposure is bad; no, good; causes cancer, prevents cancer. Table salt is bad; no, good for heart disease. Fat is bad; no, good. Saturated fat is bad; no good. Carbs are good; no, bad. Aspirin is bad; no, good; not so good. Antioxidant vitamins are good; no, they cause cancer. High cholesterol is dangerous. Low cholesterol is dangerous. The food pyramid is turned up side down. Common drugs are safe; no, dangerous. We get sufficient vitamins and minerals in our food, etc.

Something strange has happened to a branch of science. Medical researchers are highly intelligent, yet in recent times, **not one has discovered a cure for a single chronic disease**. How can a veritable army of well-trained, bright scientists always be on the road to failure? Statistically, the findings of medical science, according to media reports, are incorrect far too often for these failures to be accidental.

Is confusion in medicine just coincidence? The failure of medical research to find cures, according to Marcia Angell, a former Editor of the New England Journal of Medicine, has generated enormous profits for drug companies. Angell states "*The most startling fact about 2002 is that the combined profits for the ten drug companies in the Fortune 500 ($35.9 billion) were more than the profits for all the other 490 business put together ($33.7 billion). When I say this is a profitable industry, I man really profitable. It is difficult to conceive of how awash in money big pharma is*."

It is a sad fact that the richest corporations on the planet profit more by treating, rather than curing, chronic disease. This perverse economic effect can be compared to automobile repair shops that benefit only when cars break down. An unethical medical doctor can earn more by a botched treatment. Harmful prescription drugs create business for hospitals, doctors and pharmaceutical companies.

THE GATEKEEPERS

The author infers that medical research is being deliberately sabotaged. The question is, how could this be accomplished? Let's assume that there are people hired and trained by the pharmaceutical companies to protect pharmaceutical markets. These people would be the external force deliberately misdirecting medical research. But how would these gatekeepers know what to debunk? Which scientific work to reward, and which avenues to misdirect or attack?

Some of the more obvious propaganda does not require special knowledge. The general rule would be to debunk nutrients not able to be patented at every opportunity, while extolling the virtues of "modern" prescription medications. This media barrage might affect the efforts of some researchers, but not every one. How can all medical research always be misdirected from the truth all the time? What leads every researcher pursuing their life's work astray?

There can only be one answer. For medicine to always be wrong,

the existence of people who know all the right answers is revealed.

SECRET KNOWLEDGE

The failure to discover cures for disease has resulted in massive earnings for both medicine and the pharmaceutical companies. The only explanation for the failure of medical research, other than synthetic drugs manufactured under patent protection, is that the pharmaceutical companies have hidden knowledge that is provided to those willing to use it on their behalf. This hidden knowledge is used to poison medical research, medical thinking, medical training, and public opinion. Human beings are deliberately steering entire branches of medical research in wrong directions. These people are willing to use their mainstream media access to ridicule, suppress, or to simply ignore any research that might accidentally reveal the cause, and thus a cure, for a chronic disease.

As proof, consider a world where such knowledge does not exist. In this hypothetical world, nothing prevents some medical researcher from stumbling down the correct path. This hypothetical researcher would not be stopped. He would not be blacklisted, labeled a quack, or worse. His funding would not be cut off. A chronic disease might accidentally be cured. Pharmaceutical companies would stand to lose billions. This never happens. What other explanation can there be?

THE CONTENTS OF THE SECRET BOOK

The hunt begins for the secret book of hidden medical knowledge and the “human beings” who maintain it. Its existence is the simplest answer to the question why medical research never finds the causes, thus the cures, for heart disease, cancer, diabetes, arthritis or any other chronic disease.

They have been found, and then hidden.

We know that any book containing knowledge of the exact nature of many diseases and how to control them contains too much information to commit to memory. And it must be updated with new knowledge. Therefore the secret book must be kept up-to-date and maintained.

Its existence must be kept a tightly guarded secret. If such a book found its way in to medical schools, it would jeopardize billions in profits.

For the book to be useful, its knowledge must provide its owners with enough information to steer medical science down wrong paths on a regular basis. And, the right people must be able to easily access the information in the secure book. Medical

researchers must be kept on a tight leash, and led away from every avenue of research that might lead to a right answer.

For example, the Gatekeepers know that low-grade scurvy is the underlying cause of cardiovascular disease. Any researcher with the audacity to propose research around such an "outrageous" idea, that the lack of vitamin C causes heart disease, must be ignored or labeled a quack, depending on the situation. Researchers are ridiculed only after their ideas begin to take root. Funding is cut off. Every skeleton in his FBI file revealed publicly.

HEALTH NUREMBERG

What could be more horrible than knowing cures for diseases, and hiding them? What should the penalty be for the participants in this conspiracy? It probably isn't illegal to hide or deliberately distort knowledge about cures for diseases.

A conspiracy to keep health promoting scientific knowledge from the public would be the most heinous in history. Consumer advocate Tim Bolen (bolenreport.net) tells us that "We are heading to a Health Nuremberg." A worldwide public trial of the people in medicine and the pharmaceutical industry committing acts against humanity.

Exposing the secrets in the hidden book of true medical knowledge will make that day come sooner, rather than later. The secret book becomes strong evidence against those who hide and use this knowledge. Therefore, a high-priority goal of the health freedom movement must be to find, expose, and publish the secret book of hidden medical knowledge.

HACKERS – WE WANT YOU

Perhaps the pharmaceutical industry has been stupid enough to keep this book on a computer? A "Merck" manual describing the causes, and the cures, for chronic diseases. This information may be a complete description of what each nutrient actually does in the body, how much is really needed for optimal health, and what diseases are caused by restricting these nutrients.

Do Vaccines Cause Autism in our Children?

Despite the growing evidence that vaccinations in total, or in part, cause the epidemic of autism among America's children; the public still buys the party line, and most Americans who get their news from regular media outlets aren't convinced. This is so, even though whistle-blowing scientists employed at the United States Center for Disease Control (CDC) have, according to their own data, stated that vaccines cause autism.

Over the years, the Vitamin C Foundation has periodically delved into this question. While this author personally doesn't like to think about children being deliberately

harmed by an orchestrated campaign to keep truthful information from the American public, it should be undeniable in the year 2017 that Big-Pharma-controlled-FDA policies are decimating children, especially children in California because of the recent mandatory vaccination law enacted there.

Here are a few high points from The Vitamin C Foundation's forum discussions.

In the author's opinion, there is no doubt that a long series of vaccinations, especially, certain ones like MMR, has led to the increased incidence of Autism and mental disability; which is now estimated at 1 in 6. Long ago, when I was a child there were far fewer vaccinations and the rate of autism spectrum disorder was less then 1 child in 100. According to Drs. Hal Huggins and Thomas E Levy in their co-authored book UNIFORMED CONSENT, the rate of autism increased in the mid 1970s as the formula for mercury amalgams was changed; making fillings more toxic. Today the numbers are staggering at 1 in 68 according to the CDC (up from 1 in 150 in the year 2000 (https://www.cdc.gov/ncbddd/autism/data.html) The risk is especially large for an expecting mother with mercury amalgam fillings who has a flu-shot during her pregnancy (as flu-shots still contain mercury), and who isn't told how important it is to supplement vitamin C!

A foreign enemy couldn't be doing much more to harm America.

Why do I believe that mercury causes autism (and Alzheimer's Disease and other neurologic disorders), other than government scientists admitting that it is true?

A few years ago, a local mercury-free dentist Diane Meyer, DDS hosted a "Mercury Seminar" in Naperville, Illinois. The seminar speakers included some "big names" in the anti-mercury movement, including Hal Huggins, Boyd Halley, Mayer Esienstein, and more. (*Note: Dr. Meyers no longer practices dentistry. The state of Illinois took away her license*). The seminar was filmed by at least 2 separate film crews, but these films have never been released.

A top priority for the Vitamin C Foundation is to locate and publish those Seminar lectures on video, especially the lecture by Mayer Eisenstein, MD. Dr. Eisenstein was a pediatrician trained at the University of Illinois. In his lecture at the seminar **he explained why no child was vaccinated in his Skokie, Illinois "Home First" practice.** There was not one case of autism in his practice of 30,000 children. In Illinois, the good doctor simply wrote a "doctor's note" to the school district, which parents used to excuse their children from the shots. Unfortunately, the good doctor Eisenstein is no longer with us, one of the 60 dead prominent alternative doctors who have died since early 2015.

So, how did he keep is children well without vaccinations? Think vitamins D, C etc..

Eisenstein said that his University of Illinois medical school professor Dr. Robert

Mendelsohn, MD, who served in the U. S. Public Health Department, mentored him. Dr. Mendelsohn was a scholar and studied the vaccine data. Surprisingly, Mendelsohn's careful research found that there was no public health benefit with regard to infectious disease from vaccinations, as so often claimed. **The data did not support this assumption.**

Soon after taking that stance, Dr. Mendelsohn was "nudged" out of government and went back to teaching at the medical school in Illinois. Dr. Mendelsohn was not alone. Other scholars have also determined that there is no correlation between vaccinations and the incidence of infectious diseases. Their data suggests that better public health conditions, e.g. improved sewage and sanity systems, were correlated. Dr. Suzanne Humphries has co-authored a **book** documenting this data.

Dr. Esienstein became convinced that a) there is no public health or other benefit to vaccinations, which lead him to recommend against them, and b) the result was not one case of autism in his practice.

This may not proof, but a good start. We wondered if there is another group in America that isn't routinely vaccinated, and if so, might we find the number of diagnosed cases of autism for that group. It turned out that in one large Amish community, there were almost no vaccinations, and only one child was autistic; and that child had been vaccinated!

And now we find that the CDC knew this. After the CDC whistle-blower came forward, parents of autistic children camped out at the Congressman's office in his district, asking the Congressman to at least hold hearings, as that would have generated publicity. So far, no hearings have been held.

Think of the liability … Vaccines… Mercury in our teeth… Dr. Marik's Vitamin C Sepsis discovery. https://youtu.be/yfXVce34A78. The Cure for Heart Disease that nobody's ever heard of…