

Cancer It's Not Just Diet

Having worked together for some time we felt compelled to produce some practical guidance.

We have used a simple format so that patients may be guided through the minefield of cancer treatments safely and effectively.

Why yet another book on cancer? Over the years we have seen many patients so upset by the diagnosis of cancer that they have become confused and depressed. We felt that we must speak to them and answer some of the many questions that are repeatedly asked.

Dr. Aubrey Hill

Qualified in 1952 from St Bartholomew's Hospital. In general practice with an interest in cancer care and co-founder of 'New Approaches to Cancer' which brought cancer care groups together across the country providing information and support. Introduced Complimentary Cancer Care in Norfolk in 1987.

Susan Fletcher

A practising nutrition consultant of twelve years, major interest in the treatment of cancer and lecturing widely on the subject in both the UK and abroad.

Dr Aubrey Hill L.M.S.S.A.
8 South Street
Sheringham
Norfolk
NR26 8LL
Tel: 01263 824805
aubrey.hill@ntlworld.com

Susan Fletcher R.Dip.NC.
28 The Street
Sustead
Norfolk
NR11 8RU
Tel:0126376881
nutrifletcher@aol.com

CANCER

IT'S NOT JUST DIET

CHAPTER I	A Holistic Approach to Cancer
CHAPTER II	Exercise
CHAPTER III	Diet
CHAPTER IV	Healing
CHAPTER V	Putting it all Together
CHAPTER VI	Relaxation and Visualisation
CHAPTER VII	The History of Complimentary Medicine
CHAPTER VIII	The Wider Vision More things you can do to help yourself: Skin Brushing Herbal Tea & Infusions Essiac Tea Supplements Free Radical Damage & Natural Products Cook Book List

CHAPTER I

A Holistic Approach to Cancer

Why yet another book about cancer? The bookshops are already full of books about cancer, books bombarding the patient with advice and mostly proclaiming that their ideas are an improvement on all others. We have sought to clear a pathway and answer some of the questions that we are repeatedly asked, especially what is important and what is not.

When we have quizzed our newly diagnosed patients we have found that whatever the precise diagnosis, whatever the expected prognosis of the 'how long have I got' variety, they are all obsessed with the totally incorrect idea that they will soon be dead with a painful and debilitating disease. In many cases it is this phobia, this fear of the outcome that is instrumental in the patient doing badly. [The Oxford Compact Dictionary shows that the word Phobia is an *abnormal or morbid fear or aversion*] It is now realised that cancer phobia is so powerful that it must rank as one of the causes of death, that is, it is often not the cancer by itself that is fatal. *The fear of the disease has led to the 'disease' of fear.*

History should have taught us this lesson. If we go back to the middle of the 19th century tuberculosis was the most greatly feared disease, killing thousands and most of those, young people. It was no respecter of class or wealth and was thought to be a miasm; something mysterious to which there was no cure. Then in 1880 Robert Koch discovered the tubercle bacillus and the news that the cause of the disease was not some unknown and fearful mystery but a germ that could be seen under the microscope took some of the *fear* out of the situation. Almost immediately the death toll dropped, (some reports putting the number as high as one third) and this was years before antibiotics were introduced which, with changes in public health finally brought the disease under control. The fact that tuberculosis was an infectious disease stimulated the public health authorities to improve sanitation, housing and nourishment. These measures more than anything else brought the numbers of patients right down until the antibiotics ended the scourge and emptied the tuberculosis hospitals.

We are now in a similar position with cancer. Here we have a disease the cause of which is uncertain and because of the uncertainty we have cancer phobia, which like tuberculosis phobia before, is based on false premises. Very recent and ongoing research shows that treating the phobia by means of behaviour modification, otherwise learning, can and does alter the patients response from pessimism to optimism which has a profound and measurable effect on disease patterns including cancer. Interestingly and of great importance is the finding that the patients partner is often more distressed than the patient and helping the partner results in an improvement in both.

Further research shows that behavioural change can be used to treat one of the more difficult conditions, chronic obstructive airway disease and a recent report from Harvard Medical School where this disease is being treated shows and I quote *(We) suspect that attitude may somehow influence the processes in the immune system* and later *Through behaviour modification to change a persons outlook you can improve a persons mortality risk.*

So that is lesson number one, which we need to think about.

The media and the cancer industry itself feeds this obsession of the awfulness of cancer so much that a much greater share of the available resources are spent on cancer patients, despite the fact that heart disease is a far greater cause of death and heart failure is the most lengthy in terms of poor quality survival. Macmillan Cancer Relief charity commenting on health spending says *there is increasing evidence to support devoting a much larger proportion of the health budget to education and promotion.*

So that is lesson number two: despite all signs to the contrary, cancer is not the greatest killer.

And lesson three, Charles Mayo founder of the famous Mayo Clinic said that there are many diseases worse than cancer, but none are more feared. We started by saying this but perhaps we should spare a thought for some of those patients with these 'worse diseases'. The patients for example with muscular scleroses, motor neurone disease, severe strokes, Parkinson's disease, conditions which may drag on for year after wearisome year destroying the patient and the carers.

And finally many patients have told me they are going to die, and quote the statistics that three out of five of us or whatever the current figure is, are going to die of cancer. I have to point out that the other two fifths are also going to die, that we are all going to die, preferably not yet but sometime. It is the price of being alive and is lesson number four.

I have said all this not in any way to belittle the seriousness of the situation but to try to create in all this doom and gloom, a little window through which we can examine methods of coping which are low tech, homely and common sense, quite different from the million volt machines some of you may know or the gut wrenching chemotherapy which you may also know.

For many years medicine has been the study of parts dividing up the main corpus of knowledge into specialities and from this fractionation has come a number of important findings. But there has been a price to pay and we all have stories of patients who have been shunted from department to department to find a specialist who could provide the treatment required. Recently, however, there has been a welcome return to what is now described as holistic medicine: including the mind with the body in diagnosis and

treatment. Healthy mind, healthy body, except that we now know that these are not two things, mind and body, but only one thing, a new concept that needs a new word. I suggest 'bodymind'. *We can no longer say 'it's all in the mind' (psyche) nor can we say 'it's all in the body' (soma).*

All illness is therefore psychosomatic.

What was once a derogatory term is now the hallmark of good medicine.

To show the close relationship between psyche and soma let me repeat a story of Candace Pert, whom we shall meet later in her book *Molecules of Emotion*. Candace was giving a lecture on her work proving scientifically the body mind connection. The host, on introducing her, pulled out a student from the audience and told him, in front of over 200 people, that she was going to tell them something that was going to embarrass him tremendously. The boy instantly blushed profusely. Candace's retort was to say that her host had just demonstrated in two minutes what had taken her twenty years of laboratory work. The thought (psyche) had triggered off change in his body (soma) which was immediate and would have involved almost every cell in his bodymind. And for our own reactions: suppose that we are walking along a road watching a child in front of you happily skipping along. As you come alongside the child darts out into the road in front of a car. *Without thought* you rush into the road and drag the child back onto the pavement, a reaction so quick that it would be difficult to time it. The sight of the child at risk produces a chemical reaction that *instantaneously* primes the whole bodymind from the motor cortex to the adrenals, from the leg muscles to the heart muscles. The reaction is automatic and leaves us shocked with too much adrenaline which we then convert into anger and abuse the poor child. This is to reiterate that thoughts create chemical changes. Even more important in the context of healing is the

fact that some time later, often years later, just thinking about the incident will make our hearts race, the brow to sweat and a feeling of fear and anger return, as if we were still involved with the danger. *Thoughts, non-material, have produced a material reaction.*

I have a grandson who is quite oblivious to fear. Out for a walk with him round Caernarfon docks, I watched him walking along the edge of the dock, with the tide out and a twenty-foot drop into thick mud inches away. Unable to call out in case my shouting disturbed him I sweated the proverbial blood until he calmly came back to me. Writing of the incident now has made my knees feel weak and my stomach 'turn over'. Why after many years do I have the same feeling as I had then?

Consider for a moment a student approaching his final examinations. He is stressed and full of doubt and thoughts of failure. What will his parents say, what will his teachers say, what will his peers say if he fails. He rarely thinks of success, especially when he sees the pile of work he has to get through. He then gets glandular fever. Why? Because his immune system is functioning less well. Why? Because his negative thoughts of failure, of there being too much to do and too little time to do it, have produced chemicals which have hindered the effectiveness of his immune system. This scenario has long been accepted by main stream medicine, an acceptance that stress can have a negative effect on health. Why is it so much more resistant to the fact that a *healing* response is possible through the same mechanism in reverse? That is, a multitude of chemicals for a multitude of functions programmed in consciously by visualisation and repetition, or automatically by the healing response.

The net result of the students feelings of inadequacy have been translated into chemicals, which ensure that failure, becomes a real possibility. Note that the student did not sit down and say “ I am stressed therefore my immune system is going to run down, therefore I am going to become infected with something”. His thought were all of failure not illness, he unconsciously switched his immune system into a lower gear. Evans and Egerton at the East London Polytechnic showed that a family row could cause a cold four days later, presumably by the same process.

Some recent experiments have thrown some light on the question of why we experience the same feelings so long after the incident that first filled us with terror. Using the P.E.T. scan, which accurately measures blood flow in the brain, it can be shown that when an object is concentrated on for a short time, a pattern is set up in the brain to which the blood flow can be measured. If for example the letter A is shown to the experimental subject a pattern is set up in the brain and the blood flow measured. If then the experiment is repeated using the same person as before, the same blood flow pattern is created when the subject *imagines* that the letter A is in front of him. The brains response seems to be the same if there is an object to observe or if the object can be summoned by visualising it.

This has immense significance for all visualisation techniques. A truly relaxed subject can visualise being in a remembered place at a time when she felt happy and well and as she visualises the blood flow in the brain will alter into the same pattern as if she was really there, in person, at that time. The similarity in their feelings suggests that the bodymind is producing the same chemicals as it did before, apparently unable to differentiate between the reality ‘out there’ and the reality ‘in here’.

The power of visualisation to produce a material outcome should not be underestimated, whether that is the stressed student thinking himself into Glandular Fever or the subject visualising the letter A.

On a more sombre note, during the war I heard of a Laskar seaman who had been caught with another mans wife. He had been cursed. The curse was that before he saw Liverpool again he would die. A couple of days out from Liverpool he became ill and took to his bunk and died as Liverpool came into view. The cause of death was presumably fear, particularly when the fear is potentiated by the mans background and beliefs.

All of which and many other stories, some of which, we will tell you, confirms my most important point—*all illness is psychosomatic* and attending to the psyche at the same time as the soma is what we are about to do.

There is no reason why you should feel awful because you have cancer. There is no reason why you should not feel well. Of course if you have just finished a course of surgery, chemotherapy or radiation therapy you will feel as lousy as most people do after a similar course. But as we shall continue to say, cancer treatment is not just chemotherapy, surgery and radiation. And Susan, adds it is not all diet either.

There are six ways in which disease can be attacked or good health realised and those six ways are:

- (1) Intervention remedies, the triad of surgery, chemotherapy and radiation plus all the other things that other people do to you or for you, homeopathy, herbalism, acupuncture, massage, aromatherapy, electro-crystal therapy and the other, myriad treatments available.

The other five ways you do yourself!

- (1) Exercise
- (2) Diet
- (3) Relaxation
- (4) Visualisation
- (5) Healing--the laying on of hands, prayer, absent (distant) healing

Although we have made these six things individual for clarity, they all need to be thought of as parts of a single programme to be used concurrently with each other. The triad of main line treatments will come to an end and then you will be largely on your own. This programme has been worked out so that you can continue with meaningful and worthwhile treatment outside the hospital environment. Many patients have told us that when their hospital treatment was finished they were told to go home and lead as normal a life as possible. Having spent weeks or months in a carefully organised schedule of hospital visits and having placed all hope and trust in the hospital framework of specialists and high tech equipment, the kitchen at home may not seem to be the place to keep the good work going. ***You could not be more wrong!*** With the

techniques we will describe, you can not only feel well, you may in some instances alter the biology of your cells so that the circumstances that led to you to get cancer in the first place, may be altered.

Diet and exercise are concepts we are used to. Relaxation, visualisation and healing may be new to you, but the methods are as old as recorded history, mentioned in most religions and are safe and consume very little time each day.

Of course it will need a change in life style but that is part of the learning process, the behaviour modification we mentioned before. Then we quoted Harvard Medical School -*We suspect that attitude may somehow influence the processes in the immune system.* And that is precisely what we intend to do, to influence the processes in your immune system. And to do this simply, in your own home and in your own time.

At this point many patients tell us that they do not have the time to do anything at home, all their time is taken up already. May I tell you of my Mother, a typical product of the late Victorian age? She did her own housework, her own cooking and she cooked everything from pastry to jam, she washed and ironed and sewed and was even a keen gardener. If any one called she stopped to make tea, to listen, perhaps to make a few scones, above all to stop and welcome whoever called. She had no gadgets and no hired help. I have every gadget I can afford. If any one calls they interrupt my busy schedule, I have so little time to spare that I wish whoever calls would leave as soon as possible. Yet I produce much less in the course of a day than my mother. The answer is, and it is an answer we shall have to find, it is that her time was circular. For her spring followed

winter and the seasons continually followed each other as they had always done. Life followed death and death followed life in all living things. Time was hers.

For myself life is linear, stretched out in a straight line from the cradle to the grave. Every hour is marked on it with an expectation that something must be done at every mark- something produced something achieved. And for you, such a little change for such a mighty result. Perhaps ten minutes morning and evening, twenty minutes each day to *improve your mortality risk*.

CHAPERT II

Exercise

To start with exercise. It was J.P.McEvoy who, in 1938, quoted, without giving any references: *The secret of my abundant health is that whenever the impulse to exercise comes over me, I lie down until it passes away.* We shall have to do better than that! Where to start? Obviously the treatment we have received and our original diagnosis will give us a base line, but however much exercise we can do, fatigue must be avoided at all costs. Exercise of the 'no gain without pain' variety is not for us. Doing things you would normally do within the limitations of your treatment, but using a bit more energy to do them is about right. This might mean walking instead of using the car for short walks to the shops, walking up the last flight of stairs instead of always using the lift and involve your partner, take him dancing! Yoga under the direction of a competent teacher will not only help you physically but will also help in accordance with individual needs for prayer, devotion and the attainment of wisdom. Essentially Yoga will advise that there is no single way to enlightenment and all conditions of man can be accommodated and helped on all paths. Of the utmost importance, particularly if you do not have an instructor or coach, is to start gradually, to slowly build up to a level that you can sustain on a regular, if possible, daily basis.

Beware! Many years ago I treated a man who had had a massive heart attack so severe that I travelled in the ambulance with him to the hospital. He survived and on his discharge from hospital came to see me about what to do next. I advised graduated exercise and described exactly what I meant. The first day he was to walk to his front gate and then return. The next day he was to go out through the gate and walk up one length of pavement, and the next day two lengths of pavement increasing similarly each

day. I did not think to tell him where and when to stop and when I saw him to see if he was fit for work he was walking seventeen miles a day!

Apart from the physical improvement there are psychological gains to be made as well. Long distance runners go on a 'trip' often turning up with injuries that they have collected en route, of which they have been unaware at the time and which they can scarce remember now. This, so called 'runners high', is almost certainly linked to brain activity during exercise. For the rest of us, even exercise of the sort we have described alters our brain chemistry and elevates our mood. Researchers from Nottingham Trent University have shown that a chemical phenylethylamine, structurally related to amphetamine, is responsible for this elevation of mood. This is important, as research has shown that the diagnosis and treatment of cancer can have a negative effect on women's lives. Dr Amanda Daley from Sheffield Hallam University says, *Women recovering from the disease can experience depression, anxiety, low self-esteem, and sexual problems. They may also develop physical problems such as weight gain, insomnia, fatigue and poor fitness.* And Dr Mary Barrington of Cancer Research UK says *We think it is important to examine patients well being and quality of life after medical treatment as this is an area that is often overlooked.*

The time to start your exercise is right now. How you start depends on your state of health, but you don't have to be healthy to begin. Relaxed, repetitive, rhythmic movements, such as walking, are a good way to start. Remember that you are not competing, you are not trying to be the strongest girl in the neighbourhood, just slowly, gently, getting back your health and working out a programme you can stick to and, very important, you can enjoy.

We have spoken so far of exercise in relation to general health and especially in recovery from the treatment of cancer. However, there is a good deal of evidence to suggest that exercise has a part to play in the prevention of cancer. The research has produced divided opinions but there is no doubt that as a concomitant to other protective factors, such as not smoking, reduced alcohol intake and a low fat diet, gentle exercise is a proven help. Competitive, intense exercise may have an adverse effect and has not been shown to be helpful in breast or reproductive system cancers. The only exception seems to be that really high levels of exercise in young girls may protect against breast and reproductive system cancer, but this is almost certainly due to the fact of the delay in the menarche until 15-16 years, or even later. There is no doubt that the fewer menstrual cycles the body has to cope with, reduces the chance of breast and reproductive system cancer.

Studies of the effects of exercise on the survival of patients with cancer are hard to find. I have not found any well-constructed trial statistics, whereas there is a mass of literature on the benefits of exercise in the prevention of cancer. Why exercise, which has proved to be of help in resisting cancer should be scrapped as soon as cancer is diagnosed, beggars belief. Diet follows the same fate, what has been known to be helpful in prevention is scrapped as soon as the diagnosis is made, as if exercise, what we eat or think has no effect on cancer once it has become established.

From our own work we know that exercise, diet visualisation meditation and prayer are all of benefit both in prevention and treatment.

For many years I have waffled on about the benefits of exercise, gathering bits of information from a variety of sources. Recently, in March 2002, I came across an article magnificently named *Waging War on Physical Inactivity Using Modern Molecular Ammunition Against an Ancient Enemy*. Who could resist such an article printed in the prestigious Journal of Applied Physiology. Here I found that because we were not hunter-gatherers any longer, genetic information, which supported such physical activity, was no longer used and when physical activity diminished chronic health conditions arose. It became clear that females who exercised were more liable to have gaps in their periods, a late onset of periods, (menarche) irregular periods and are therefore less likely to develop breast cancer. We have already pointed out that women who have fewer periods are less likely to develop breast cancer, which this study confirms. Cancer of the colon, pancreatic cancer and melanoma are specifically mentioned in the research as being at least 50% less in those who exercised (mainly walking for 20 mins minimum daily) 5-7 days per week. Other chronic conditions, coronary thrombosis, angina, high blood pressure and stroke are benefited immensely by exercise, as is Type 2 diabetes. Use it or lose it seems to be the message here.

For patients who are immobilised by disease, assistance in moving all the joints gently through as full a range of movements as possible plus a little gentle massage or aroma therapy is helpful and very reassuring. I stress gentle massage, deep massage of areas of known cancer are best avoided but the comfort of gentle touch should not be withheld. The system of therapeutic touch (not to be confused with kinesthesiology) introduced by Dolores Krieger, professor of nursing at New York University is similar to hands on healing which we shall discuss later and, as practised by nurses, is of the greatest value

Let me end this part by again quoting Cicero (106-43 BC) from 'On Old Age'

Exercise and temperance can preserve something of our early strength even in old age -

-and we suggest, even in cancer!

CHAPERT III

Diet

Before diet we should look at digestion. In most respectable homes can be found, along with all the other patent medicines, some form or other of bowel-opening preparation, and perhaps one or two magazines in the bathroom.

For over a hundred years it has been observed by doctors that the most common factor associated with all forms of cancer is the condition of constipation. Two in five people who go to the doctor in Britain go with constipation. The British surgeon Sir William Arbuthnot Lane (1856-1943) repeatedly emphasised that he had never known a single case of cancer that had not been preceded by prolonged intestinal constipation. Professor Aviles of the Cancer Department, Guadalajara, Mexico, found out that of 7715 cancer patients examined over a 15 year period 99% had suffered from constipation and that the degree of malignancy was parallel to the degree of constipation.

Dr Denis Burkitt and Dr Hugh Trowell of England both spent 25 years as doctors in areas of rural Africa. These doctors observed over that time that constipation in these areas was virtually non-existent and so too was cancer. Dr Burkitt noted that the rural Africans passed about one pound of faecal matter each day, about four times the amount passed by English people and that the Africans faeces were soft, bulky and almost odourless.

Investigation showed another significant thing. The transit time from eating to elimination was, for the African, about 24 hours, whereas with the English it was three days or more. This meant that, even with a daily bowel movement, the wastes of food eaten by the English remained within them three times as long.

The obvious cause of these differences was the sort of food eaten. The average African villager ate mainly cornmeal, beans, bananas and potatoes. This diet was low in fat and animal protein, devoid of refined carbohydrate and contained about three times the amount of vegetable fibre of the English diet.

The researchers analysed countless medical records and this is what became evident:

1. Cardiovascular disease, the leading cause of death in Western countries, was virtually unknown in rural Africa.
2. The cancers of Western populations were also virtually unknown.
3. Diabetes, hypertension, appendicitis, haemorrhoids, diverticulitis, varicose veins, phlebitis, obesity and hernias were also virtually unknown. There was no such thing as constipation and there was no cancer.

Most of the (unhealthy) foods eaten today form mucoid (slimy) substances in the whole intestinal tract.

These mucoid substances accumulate to a build-up of stagnant matter in the intestines.

Stagnant matter can block proper elimination, inhibit proper re-absorption of nutrients and serve as a breeding ground for germs and parasites.

The result is pollution of blood and lymph and thereby a poisoning of the entire system.

There are two types of constipation – Constipation proper and ‘Hidden’ Constipation. 99% of people in Great Britain are considered to suffer from this second type. This is because the average person has 10-12 pounds of waste matter stuck in the inner walls of their colon. Which must be removed if good health is to be maintained. Toxins (Poisons) can pass easily into the blood stream from old waste deposits in the colon contributing to many diseases and illnesses as well as lowering the overall efficiency of the body. By cleansing the retained waste out of the colon the blood stream will become cleaner and cleaner and the whole body will become more efficient and healthy.

All parts of the body will benefit tremendously from this Colon cleansing routine – including the Liver, Kidneys, Circulation System, Reproductive Organs and all the muscles and joints. Many diverse ailments have been cleared up quickly and simply by thoroughly cleansing the Colon.

THE PARTS OF THE ROUTINE:

1. **BOWEL COMPOUND** or **COLON FORMULA**. This is a herbal tonic that is designed to make the muscles of the colon wall function better. In this way any waste matter stuck to the walls will be encouraged to peel off, and pass out of the body. Bowel pockets can form because of an initial weakness in the Colon muscle,

aggravated by repeated pressure from the Colon contents whenever you strain to pass a stool.

2. **PSYLLIUM HUSKS.** These are a natural fibre, which have been found to be particularly effective in treating the Colon. The husks provide excellent bulk for the Colon muscle to act upon, and are very soothing to the mucous membranes of the Intestines. They retain a lot of water whilst in the Colon, and water helps to dissolve hardened deposits on the Colon wall. They also absorb liquefied mucous and expel it from the Colon.
3. **ACADOPHILUS CAPSULES.** Certain bacteria should be present in the Colon to ensure its proper functioning. Most people are deficient in some of these beneficial bacteria especially in 'Lactobacillus Acidophilus' or simply 'Acidophilus'. Excess wind constipation and thrush may result from a deficiency. Acidophilus bacterial may be completely killed by a course of antibiotic drugs making it very difficult to restore balance without taking an acidophilus supplement.¹
4. **DIET.** Changing the diet will enable the Colon Routine to have an extra cleansing effect on the Colon, by helping to clear out waste matter. Much of this will have become stuck there as a result of eating sticky and mucous producing foods. For the best results you may like to avoid foods which add to the stickiness in the

¹ Colon Cleanse-Apitherapy Foods 01263 768891

5. Colon, and to increase foods which encourage the elimination of waste matter from the Colon.

Foods which clog up the Colon are, Dairy Foods especially milk, cheese, butter and flour products. e.g. Bread, pastries and thickened sauces. Most people are aware that cheese and milk tend to produce excess mucous in the throat – this also applies to intestines. Flour in the past has been used as wallpaper paste – the sticky property is due largely to the gluten in the flour. As well as reducing the intake of these foods, meat – especially pork and beef – and fish are best reduced to a minimum, as their digestion releases nitrogenous toxins whose removal creates much extra work for the body.

Foods, which help the Colon, are the high fibre foods, especially raw vegetables. Bran is not particularly recommended, as it scratches the Colon wall. A raw food diet, during which no cooked food at all is eaten, may be found very beneficial at this time or a diet of raw food with some cooked vegetables may be helpful. To drink, tea and coffee are best avoided. Herbal teas or hot or cold fruit juice may be drunk instead.

If this dietary program is too strenuous for you then stay as close to these recommendations as possible.

The more you can follow the recommendations the more benefit you are likely to derive from the treatment. If you find you are craving starchy foods during your diet, you may have a baked potato, or some Ryvita – Rye contains less gluten than Wheat. Wheat sprouts are good for satisfying cravings for starch. Soak some whole wheat in water

overnight. Drain next morning then rinse 1-2 times a day. When the sprouts are half an inch long, eat them in salads.

Anyone following a normal western diet for at least ten years will benefit from a Colon cleanse. People suffering from poor Colon health do not always know it but toxic build up in the body results in a number of common health conditions which can be alleviated by a colon cleanse, such as arthritis, migraine, headaches, weight gain, bad breath and flatulence, to name a few.

When men were first sent into space in the 1960's on the mission to the moon, it was discovered by testing their faeces upon their return, that we can carry small traces of things we ingest for many years in the colon. Our pipes are 30 feet long and most of that is wound up inside our abdomen. It seems strange that we keep our house outlets clean but don't give a thought to our own, unless we get constipated and then take something to purge ourselves. This unfortunately does not cope with removing impacted faeces, and this is what is often a contributory factor to altering the body's natural functioning with the result you get poor bowel action and nutrient absorption, toxins in the blood, slow lymph drainage and lowering of your immune system. The most instantly recognisable problems are constipation, poor and irregular bowel action, diarrhoea, intestinal gas and rumblings, stomach disorders, bad breath, vaginal infections and general 'under the weather feelings'. However, we still need to cleanse our colon regularly even if we don't have signs of constipation etc. Keeping a clean healthy intestinal system is an effective method of preventing ill health.

If you do have constipation you need more than a laxative, which is designed only to stimulate the movement of the bowels. Laxatives do not assist in the release and removal of stagnant material from the colon wall. Laxatives in fact can actually weaken the colon by causing over stimulation and irritation.

Kaspar Blond, an English cancer specialist, concludes that the problem of cancer is essentially a nutritional problem. In other words a 'problem of prevention'.

The National Research council for Diet, Nutritional and Cancer in the USA state:

"It is abundantly clear that the incidence of all the common cancers in humans is being determined by various potentially controllable external factors, because people in different parts of the world suffer from different kinds of cancer, depending upon their habits, diet and customs rather than on their ethnic origins. Thus, when people migrate from one country to another they tend to acquire the pattern of cancer that is characteristic of their new home. This is surely the most comforting fact to come out of all cancer research, for it means that cancer is, in large part, a preventable disease."

For example: Japan and Iceland both have low rates of goitre and breast cancer. This may be because their soils are rich in both iodine and selenium. Breast cancer has been linked to an iodine deficiency. Breast cancer is almost non-existent in Japanese women, who consume large amounts of Soya. Colon cancer rates in Japan are also low.

Let us take two women, one living in New York another in Tokyo. They both have high-powered jobs, an average diet and for good measure both have lousy husbands. The woman in New York is far more likely to contract breast cancer than her

counterpart in Tokyo. However, swap the two women over and get the American to live in Tokyo and the Japanese to live in New York and follow a western diet and the Japanese woman is more likely to contract breast cancer. Why? The American/Western diet is high in meat protein, fat & grain, as opposed to a Japanese diet high in soya.

Diet and Cancer

There is now overwhelming evidence that diet and cancer are related. Certain foods may make you more susceptible to cancer and others may protect you from it, which is why a Japanese woman who eats plenty of Soya products is less at risk of developing breast cancer but more at risk of stomach cancer due to her high salt diet, mostly cooked food and little fruit.

It is estimated by the World Cancer Research Fund that 40 to 60% of cancer is related to our diet. Of course the other 60 to 40% is related to exercise, relaxation, visualisation and healing which are all of great importance. But this section is about how to help yourself maintain optimum health. This is not a cookery book, more of a guide to a way of being. There is a list at the back of recommended reading.

With so much conflicting advise about, here are some basic principles.

Above all, look at the ideas here and enjoy your meals in a relaxed atmosphere.

Vitality Foods

- GROUP I** Green leafed vegetables; root vegetables, fruits, nuts, pulses, Cereals, grains – chiefly raw where practicable – as salads.
- GROUP II** Lightly cooked group I: i.e. Lightly cooked vegetables, steamed or stir-fried. Raw greens and cereals.
- GROUP III** Meat, fish, eggs, dairy foods, cooked grains.
- GROUP IV** Convenience foods, pre-packed processed with colouring and preservatives, devoid of nutrients: i.e. the unmentionables – if the label sounds like a chemistry lesson – put it back on the shelf!

Group I foods ooze with energy and life force.

Group IV vitality foods look dead and denatured.

Cooking Methods

Naturally in our climate we need some hot foods which also hold in some of the vital nutrients.

If you boil your vegetables all the goodness is going to go into the water. So liquidise them up and turn the water into soup. Potato is a great soup thickener and full of vitamin C.

Use only enamel, cast iron, glass or stainless steel cookware, not aluminium. Fry as little as possible using oil with a little water added to it so it doesn't burn and only heats to boiling point. Do not deep fry at all, re-used cooking oil contains carcinogens. Sweat rather than fry. If you are going to fry use only ghee made from unsalted butter or cold pressed oil.

- **Steaming** **All vegetables can be steamed over boiling water.**
They take just a little longer to cook.

- **Stir Frying** **Chop the vegetables into thin strips and toss in a**
large frying pan or wok in a little oil.

- **Oven Baked** **Again chopped very small and flavour with a dash of**
wine, a few herbs and Soya sauce.

- **Grilled** **Onions, courgettes, garlic, aubergine and tomatoe**
with a little olive oil makes a dry ratatouille – sprinkle
with chopped black olives. Fennel is another
vegetable that grills well.

Cooking Do's & Don'ts

- ❑ Try to use enamel, cast iron, or stainless steel cookware.
- ❑ Do not use aluminium pans or aluminium foil. It will contribute to heavy metal toxicity in the blood.
- ❑ Lightly stir-fry. Do not deep fry. Steam when you can rather than boil.
- ❑ Use herbs, spices and garlic for flavouring.
- ❑ Try to buy organically grown foods whenever possible.²
- ❑ Read all labels carefully for additives, preservatives, sugar and salt.
- ❑ Rinse fruit and vegetables in a tablespoon of cider vinegar diluted in a bowl of water, rather than peel them.
- ❑ Use only cold pressed or virgin olive oils (easily recognised being in a glass bottle as opposed to a plastic one).
- ❑ Wash cooking utensils in 'Ecover' detergent which is less harmful than other commercial brands.
- ❑ Do not buy foods that have passed their 'sell by date'.
- ❑ Avoid, as much as possible, microwaving foods.
- ❑ Do not use Clingfilm, it can raise hormonal levels if in direct contact to food, especially cheese.

² The Soil Association – The Organic Directory 0117 929 0661

The Basic Guidelines

Foods to cut back on:

Wheat

Coffee

Tea

Meat

Poultry

Fish

Shellfish

Dairy Produce

Margarine

Salt

Sugar

Smoked Foods

Foods to eat in abundance:

Wide variety of organic fresh fruit & vegetables.

Coffee Substitutes

Herb Teas

Soya Milk

Live Yoghurt

Tofu

Tahini (sesame butter)

Vitaquel-vegetable margarine which has been through fewer processes than most other margarines.

Honey

Nuts & Seeds

Breakfasts

Fresh fruit and vegetable juice

Juicing;

To make your own juices you must first obtain a juicer. There are several good juicers on the market. See the *Which?* report if you have a problem choosing.

Fresh fruit and vegetable juices are an excellent way to get vitamins, minerals, enzymes, and chlorophyll.

The fruit and vegetables should, if possible, be organic and should not have been stored because they then begin to lose their nutritious value.

Fruit juices are cleansing. You can use melons, apples, citrus fruits and berries. Many of which you can keep the peel on and you can mix and match them about. Strawberry and banana is a good combination as is orange and raspberry. The list is endless, as are the flavours to your taste buds.

Vegetable juices, which you may prefer later in the day, help build up your immune system and guard against disease. Try beetroot and carrot, parsley and spinach, celery and watercress, cabbage and cucumber. Or mix them up - pineapple and endive, beetroot and grape, celery and pomegranate.

Your body type may not last until lunch on fruit juice alone, so top it up with;

- Hot porridge with Soya milk
- Millet and dried fruits (prunes, apricots, figs, dates, raisins, apples, and pears)
- Toast piled with fruit and vegetables (banana, tomato, avocado)
- Toast and fruit with honey and bee pollen
- Honey
- Bee Pollen² can be sprinkled on fruit, cereal, and yoghurt or whisked into a healthy drink.
- Apimist, a combination of Honey, Bee Pollen, Royal Jelly and Propolis.

Scientific reports show the cancer fighting properties and immune enhancing ability of the four bee hive products. Available from Apitherapy Foods³

³ Apitherapy Foods: 01263 761525

Main Meals

Ideally, for your midday and evening meal, 50% should be raw - to ensure all the enzymes digest the vitamins and minerals.

It has long been established that five portions of fruit and vegetables reduce the risk of cancer dramatically. What is a portion? It's 4 oz or 100 gm. So well over a pound (half a kilo) each day. If you fit in all the positive foods there really isn't a great deal of room for the negative foods.

- ❑ Vegetables to steam and stir fry;

Courgette	Carrots
Broccoli	Fennel
Cauliflower	Asparagus
French Beans	Baby Corn
Cabbage	Garlic
Leek	Mushroom
Celery	Onion
Peppers	Mange Tout

Steamed Potatoes tossed in pesto

Add ginger to the carrots

Brazil nuts to the Asparagus

Orange and sesame seeds to the Celery

Serve with brown rice, couscous, Buckwheat spaghetti, lentils, bulger, buckwheat, rice noodles, millet flakes, tofu, and polenta.

Some people need animal protein and if you are losing a lot of weight, some fish, chicken or lamb may be necessary. Hear what your body tells you, ask at your Cancer Support Group and, again, don't worry - ideals are for striving towards but if you can cope straight away with the diet, fine.

Sprouting

Once sprouted they are delicious used in salads, stir- fries, a sandwich filling, or as a handful as a snack. They can also be used in bread recipes to add texture and flavour. There are lots of sprouting seed trays available but a good old jam jar does the job just as well.

Try organic:

- Mung beans
- Aduki beans
- Green lentils
- Chick Peas

Put 2 tablespoons of the beans into a jar and cover with warm water and leave in a warm and dark place. Cover the opening of the jar with muslin (or an off-cut from a pair of clean tights) and secure with an elastic band or piece of string then turn the jar upside down to drain off the excess water. Rinse and drain the sprouts through the muslin lid twice a day. Your sprouts will be ready to eat after about 4/5 days and will keep fresh sealed in a plastic container in a fridge for three to four days.

- Alfalfa seeds

The procedure is exactly the same as above except that you only need to use 1/4 a tablespoon of the seeds and they will be ready to eat in approximately three days.

Kitchen Sink Salads

Raw vegetables provide us with the all-important enzymes for digestion and a salad is essential to both the midday and evening meals.

No longer look at a salad as lettuce, cucumber and tomatoes which were previously a garnish to a portion of meat. Look at the salad as at least half of your meal - (with the dressings on the following pages) they will taste delicious.

Mix and match as many of the following as you like in a bowl, toss in a dressing (just before you eat) and if you like a little fish or chicken as an accompaniment. I prefer to treat meat or fish as an *accompaniment*, rather than the basis of the meal.

Chicory	Endive
Spinach leaves	Lambs lettuce
Rocket	Watercress
Raddichio	Chinese Cabbage
Grated Carrot	Grated Beetroot
Webb, Friesse, Cos, Round Lettuce	
Celery	Cucumber
Radish	Mange tout peas
Tomatoes	Spring onions
Red Onions	Bean sprouts
Avocado Pears	Mushrooms
Mustard Cress	Green/Red/Yellow Peppers
Cauliflower Florets	Cherry Tomatoes
Fennel	Shredded white Cabbage
Shredded red Cabbage	
Apples	Pears
Olives Green/black	Pineapple
Melon Balls	Strawberries
Oranges	Grapefruit

For example

- Friesse Lettuce Grapefruit Orange and Avocado
- Avocado Pear and Strawberry
- Melon & Tomatoes
- Grated Carrot Beetroot Red & White Cabbage
- Lambs Lettuce Green Peppers Spring Onion

Kitchen Sink Dressings

The same goes for dressings. Let your imagination run riot! No need for salt and sugar to taste - just use nature's natural selection of flavours. Bundle the ingredients into a jam jar, screw on the lid and shake.

Lakeland Plastics do a wonderful salad dressing mixer with various recipes on the side - the principles the same, just pop in the ingredients and shake.⁴

Dill	Lemon juice
Chives	Orange juice
Fennel	Soy Sauce
Basil	Apple Juice
Walnuts	Yoghurt
Almond	Tahini
Pine kernels	Honey
Mustard	Olive Oil
Crushed Garlic	Walnut Oil
Crushed Chillies	Sesame Oil
	Sunflower Oil

For example - Cauliflower and Radish with a Yoghurt and Tahini Dressing

⁴ Lakeland Plastics 01539 488 1000

Eating for Special Occasions

A good celebration - Christmas, Birthdays, Easter and Weddings with fine rich food (more often than not) should be a pleasure and not ruin our health maintenance programme. It's not what you do once in a while, but all the time that counts. I'm a great believer in Homeopathic Dr. Andrew Lockie's twice a week rule; i.e. break all the rules twice a week!

- Look for a light Bucks Fizz

- Tuck into the colourful garnishes - cherry tomatoes, green and black grapes, and sweet pepper sticks that everyone else leaves alone.

- Eat before you go out and enjoy the atmosphere. If you're doing the entertaining, emphasise the atmosphere.

- Take time to lay an attractive cloth, flowers and candles and you are more than half way to a successful party.

- Use Linda Lazares Gourmet Natural Therapy Cook Book.⁵

⁵ Gourmet Nutritional Therapy Cookbook, Linda Lazares. Waterfall 2000. London WC1N 3XX £11.99

Snacks

A healthy quick snack - and an orange with peel, pith and pips that leaves sticky fingers on the steering wheel of the car isn't always the automatic answer.

So they are processed, but let us look at the best of the bunch knowing that they are doing you some good and will satisfy a sweet taste.

- Wallaby bars - First choice as they have your daily RDA of Soya for balancing out hormones and fabulous flavour combinations -

Cashew and sesame

Apricot and Nut

Macadamia and ginger

Nut and fruit Yoghurt

- Honey Halva
- Kettle valley fruit snacks 100% dried fruit
- Jordans Frusli bar
- Whole bake flapjack with-

Coconut

Fruit and nut

Cranberry

Date and walnut

Apricot

For a savoury snack:

- Meridian - organic tahini spread

Almond nut butter

Hazelnut nut butter

Cashew nut butter

- Cauldron Foods specialise in all tofu products, tofu burgers, sausages, and tasty pate.

Parsnips and carrot pate

Asparagus pate

Chickpea and black olive pate

Spinach and soft cheese pate - better for you than cheese alone.

- Almonds and apricot kernels - high in laetrile B17 - a good anticarcinogenic.⁶

- Vegetable sticks - carrot, celery, cucumber, sweet peppers, radishes

⁶ Credence 01622 832386

Sugar

On average, we now eat in two weeks as much refined sugar as we did in a year 100 years ago. Sugar is devoid of all nutrients essential for metabolism and is a chief additive to most processed foods.

Avoid sugar substitutes such as saccharin and canderel. These are up to 300 times sweeter than sugar. Try and forget the sweet taste. Other sweet alternatives to first think of are fruits, and you have an endless choice of sweet tasting snacks. To satisfy a sweet tooth try the following:

- Apple and Pear Spread (Suma Foods)
- Honey
- Meridian Organic Jams – no sugar but with delectable flavours:

Wild Blueberries	Pineapple and Ginger
Blackcurrant	Peach and Passion fruit
Raspberry	Apricot
Strawberry	

- Sun dried fruits:

Papaya	Pineapple	Mango
Dates	Prunes	Apricots

In a 43-country survey by the British Cancer Institute, refined sugar featured as the primary dietary factor in breast cancer; fat was the secondary factor and protein the third.

The increased consumption of refined sugars and white flour products is closely related to the steady increase in diabetes, coronary thrombosis, atherosclerosis, cancer of the bowel, obesity, diverticulitis and varicose veins.

Weight reduction may lower cancer risk. The 12-year study of nearly a million Americans uncovered high cancer risks particularly among people 40% or more overweight.

Refined sugar is completely devoid of proteins, fats, vitamins and enzymes and has only infinitesimal amounts of minerals and no trace elements. Sugar has been refined to such a degree that it contributes only calories to the diet and is devoid of nutrients essential for its metabolism.

Salt

Salt is present in our body tissues and fluids (you can taste it in your tears). Salt is 40% Sodium and 60% Chloride.

We need sodium to regulate the body's fluids, transport nutrients and help muscles to work. *But*, we only need a very small amount. It is currently estimated that we are eating eight times the amount of salt our bodies need, 8gm as opposed to 1gm in a day.

Salt is a strong inhibitor of enzymes, causes fluid retention in the tissues and has been observed to increase the rate of cancer growth – it is because it is such a strong inhibitor of enzymes that it works so well as a food preservative. Even in small quantities salt has been observed to increase the rate of cancer growth, an event which is not surprising in view of the fact that homeostasis, (stable equilibrium), within the body is entirely dependent on a proper supply of enzymes.

Hundreds of processed products contain salt often even if they are not savoury. Take a look at the label. As a general rule 0.5gm of salt per 100gm is not acceptable.

- ❑ Use freshly ground pepper
- ❑ Celery seed
- ❑ Potassium salt
- ❑ Kallo organic low salt stock cubes
- ❑ Meridian reduced salt yeast extract

Why do we add sodium chloride to our foods, when fruit, vegetables and cereals provide all the vital mineral salts we need? Cooking modifies or reduces the flavours to such an extent through loss of these minerals (some of which are heat sensitive and may go down the drain with the cooking water) that salt is added to restore some semblance of the original taste.

So modern cookbooks include salt in their recipes when in fact a sound nutritional menu should never depend on or add salt. If we eat our food in a natural state, in an uncooked form, all added table or cooking salt is easily avoided and we enjoy the natural flavours which are not destroyed. For example salted butter alone contains thirty times as much salt as natural, unsalted butter.

Dr Maximum Gerson who claimed a 50% success rate in treating cancer patients given up as hopeless by other doctors was specific in his condemnation of salt. Although he accepted there were innumerable influences which combined can lead to cancer by way of slowly wearing out the liver and kidneys, he held that salt added to food was distinctly a major influence.

Drinks

Hot Tea and Coffee are best avoided as they reduce mineral absorption - especially Iron, Zinc, and Selenium.

Coffee substitutes include:

- 'Barley cup' Instant Chicory
- 'Bambu' 'Wake up'
- 'Dandex' Organic 'no caf'

Tea Substitutes include:

- Oriental Green Tea. A powerful antioxidant

- Rooibosch - grown from a South African Shrub and goes equally well with milk as it does with lemon. Milk can always be Soya Milk.

- Organic herbal Teas ⁷

- Herbal Infusions ⁸

- Essiac Tea ⁹

⁷ Hambledon Herbs, Court Farm, Thilverton, Somerset. TA4 1NE

⁸ Neals Yard Mail Order – 0161 831 7875

⁹ Essiac Tea. Susan Fletcher – 01263 768891

Cold Drinks

Tasty non-alcoholic and flavoured water drinks that are full of goodness too.

- Norfolk Punch
- Elder flower Cordial
- Elder flower Presse
- Ame
- Aqua Libra
- V 8 Juice (if your not squeezing your own)
- Meridian's Fruit concentrates with no added sugar.

- Flavours include delicious
 - Pear
 - Lemon
 - Cherry
 - Black currant
 - Apricot
 - Apple
 - Exotic Fruit

Water

The body is constantly crying for water. We are part of a living planet whose surface is more than 70% covered by water. The tissues of the human body are composed of more than 70% water and hold exactly the same proportions of minerals that come out of the primordial sea from which we evolved billions of years ago. A healthy person should ideally drink 1 fluid ounce of water for every 3lb of body weight. (and more if under stress or illness)

- Water is water - you wont fill the steam iron with coffee, wash your hair in orange juice or your face in tea
- Drink still water
- Fizzy water contains carbon dioxide which raises the pH of the stomach making it less acidic and less able to digest protein
- You can improve the taste of your tap water with a water filter
- Leave a jug of tap water to stand in the fridge - the chlorine will evaporate leaving a pleasant tasting water
- The only pure unadulterated water comes in bottles marked 'Natural Mineral Water' that comes from a protected source and is not treated. Other bottled water such as 'spring water' may have been chemically treated to make it 'safe' to drink!

A normal adult excretes two pints of water every twenty - four hours through the skin, two quarts through urination, one pint through the bowel and one and a quarter pint through the lungs by exhalation. Out of eight pounds of waste five pounds are excreted by evaporation though the skin.

Water is also the basis of the blood, without enough fluid the blood volume will decrease and the body will suffer. With insufficient fluids the glands become clogged, the skin becomes dry and toxins will circulate back into the bloodstream. The kidneys can also be put under excessive stress if they have to work harder to eliminate these toxins. Our glands are activated by water and the nervous system requires fluid to act as a conductor to carry messages. With insufficient water the body will extract moisture from the faeces (content of the bowel) which will be re-circulated and can poison cells. Chronic constipation can also arise from lack of fluid if there is not enough moisture in the motion to pass it.

The need to urinate frequently (especially at night) can be because the urine is not dilute enough. If it is too condensed uric acid can cause irritation of the bladder. Muscle spasm whilst playing sports is often due to lack of fluid; the body will extract moisture from the tissue in the skin and muscles which are the least vital organs, to give priority and protection to the vital organs of the heart, liver, etc. General aches and pains in the muscles can often occur for the same reason.

Would you fill the car battery with milk, the steam iron with orange juice, or wash your face in coffee? Your inside needs to wash in water the same way as your outside!

Vitamin C increases urine production and can sometimes be effective as a medicinal diuretic, it is less effective however if salt intake is high. To remove excess water from the tissue and get it back into the bloodstream it may be necessary to alter the diet so that the specific gravity becomes greater in the blood than in the tissues, this can be

done by increasing protein in the diet. If a person with excess fluid in the tissues is put on a high protein diet they will begin to urinate more since protein acts as a diuretic to draw excess fluid out of the tissues.

This is obviously not all that can be said about water. It is just some information to make you aware of how important it is to all forms of animal and plant life on our planet and to that end we should give it the importance it deserves.

Alcoholic Drinks

First the good news! Leading French Nutritionist Christine Joyeux quotes ‘wine is better than Coca Cola’. Of course it is! All the minerals in the soil come up into the grape and according to French Dr. Maury “wine is the best medicine”, it is in fact, mans oldest medicine. The Greek doctor Hypocrites prescribed wine in various formulations as an anti-nauseant, appetite stimulant, a tonic, and for diarrhoea and anaemia, amongst others.

In fact the doctor in charge of the first fleet in 1788 from Britain to Australia (surgeon John White) made sure there was enough wine on board ship to use as a medicine and prevent malnutrition on the long journey out.

Australia’s first wine doctor was William Redfern (after whom the Sydney suburb was named) and today there are 150 doctors with established Vineyards.

And the Wines to drink?

- The Pinot Noir Grape, which, of course, makes Champagne
- Avoid strong spirits and artificial mixers

Changing to a Healthy Diet

Because we get away with living on what we eat we describe our diets as ‘balanced’, and reasonable health is enjoyed so long as the organs can struggle against the overload.

Find time and then take time to change your diet slowly. Change is a stress on the system. Begin, perhaps, with something like cutting down on salt and sugar, rather than drastically having just fruit for breakfast, lunch and dinner – fruit that beforehand had just been an added bonus to the diet.

- STEP I** Cut down on salt and sugar, tea and coffee, before finally
Cutting them out altogether.
- STEP II** Reduce dietary fat – drastically – or eat the fat or oils raw
(as the Eskimos do) allowing the enzymes to digest it.
- STEP III** Reduce protein. On a typical vegetarian diet it is hard to get
Protein down to 10%
- STEP IV** Reduce grains – enzyme inhibitors – or eat them separately.

The human digestive system has not changed for millions of years, we were originally Hunter-Gatherers, living off fruits, nuts, seeds and shoots – and the occasional raw meat. This is the diet of our closest relative, the Chimpanzee, whose digestive system is almost identical to ours and who displays none of the diseases common to humans. The cooking of food makes the use of inedible and unpalatable food suitable to eat.

CHAPTER IV

Healing

When Susan and I are giving talks and broach the subject of healing we notice that some of our listeners become glazed and uncomfortable. They tell us that they are not members of any church, do not believe in any God and do not have any faith. They are sure that healing will not help. Prayer, either local as in our group, or distant, that is praying for someone not present, they say is a nonsense in our scientific culture. I try to point out that there is this *something* this *other* that we have spoken about which will not go away. We cannot demonstrate it, neither can we demonstrate gravity for example, although we all know that things fall. Electricity cannot be seen but we all know its effects. The same with prayer. Here we have something non material which has an effect that can be demonstrated and demonstrated by rigorous scientific investigation. Importantly I try to convince the unbeliever that belief is unnecessary, merely an acceptance that we are more than machines. The thing that makes us different from machines is something that I call spirit, but it's name is unimportant. Every culture calls it something different and every culture admits of its presence.

But I want to start this chapter simply and think about a few things we do not normally think about. We don't normally think about these things because we don't have to, they are always there, a part of our daily lives.

Spare a moment to discern what happens when a child falls over and grazes its knee. It cries, picks itself up and runs for it's mother. And what does the mother do? Firstly she

lifts the child up and hugs it. Then she kisses the knee better, the pain goes and the child runs off and plays once more. Kisses the knee better! What sort of medicine is that?

Part of the folklore of dentistry is that the toothache goes when you ring the dentists' bell. What sort of painkiller is that? My patients often tell me that they don't know why they have come--they felt better as soon as they had made the appointment, long before they have seen me. And it is not just humans, animals are affected as well. Thomas Merton the American trappist monk was returning to his hermitage one morning after mass when he saw an injured deer limping with difficulty across the field. This was at the time of the Vietnam war and Merton was distressed about the loss of young men for so little reason. The sight of the injured deer broke him and he wept. The deer stopped and looked at him and Merton stopped and looked at the deer. They looked at each other for a full minute or so. Then the deer turned and trotted away with no sign of a limp. What had happened? I don't know but I hope that you may come to accept that there are non-material things that have a material effect. As we keep saying, it is not all surgery, chemotherapy and radiation.

Recently I have been reading the life of Tenzin Choedrak, the physician to the Dalai Lama. His book *The Rainbow Palace* describes the unbelievable atrocities of the Chinese in Tibet but one of the medical stories before he was captured relates how he was asked to treat a poor woman's cow. Not being used to treating animals he prescribed a favourite remedy, rin-chen ratna sampel, called the precious pill. The cow recovered in a few days. I quote *The cow's owner, an old Tibetan woman, spread the word to the whole village about the blue pill that cured cows. Of course she did not know that it was the precious pill. During my entire stay at Bylakuppe, poor people*

kept coming to ask me, not for medicines for themselves but for some 'blue pills' for the cows. 'But who told you about that?' I asked them. A man answered me.

"It's Phunetsok over there, whose cow you cured and who has worn this pill round her neck ever since".

Bear with me whilst we look again at the child that has fallen over and grazed its knee. The child runs in to its mother who lifts it up, gives a hug and kisses the knee better. The child stops crying and runs off, pain free, to continue playing. What is happening in these two cases, certainly something non material, a system of healing which gets the cow or the child better without medicine, apparently by the power of the mind? This is a power we can understand in the healing of the child by its mother, we call it love. But healing an animal by the power of a human mind is a bit more difficult to accept. Unless of course 'mind' is not personal but is universal. In which case it must also be non-local, that is it is not solely in our head. Impeccable research which includes all the safeguards needed to protect from fraud or poor technique has shown that there is something *other* that must be included in our investigation. Seemingly your mind can affect my body and my mind can affect your body. How can it do this when we are not physically connected? Are minds not constructs of the brain, is the notion that the mind is in the brain wrong? If it is not in the brain, where is it? Does it float about and can it be directed out of my body into your body? Something of the sort must happen to explain many of the facts that are being revealed, for instance the cow which gets better because its owner wears a blue pill round her neck! Or the ability of the native Australians to send messages over great distances, an ability which is beyond doubt. It is not the smoke signal that is the message, the smoke merely alerts the person for

whom the message is meant. The message itself is mind to mind, person to person. There are many other instances of non-material things that have a material effect.

We have already quoted Harvard Medical School suggesting, as a result of their experience, that attitude may somehow influence the processes in the immune system

Let us stop thinking about cancer and disease for a moment and think about health.

Health is not just the absence of disease, it is a positive affirmation, we work towards being healthy with diet, exercise and rest until we feel well and notice the verb, to feel.

How is it that we can talk about feelings as if they were any help in our search for health? It is because our relationship with the world around us is dependent on our feelings, we feel happy or sad, rejected or loved. What strange non-material force causes these feelings? For example how can music affect our feelings alter our mood?

We speak of happy music or sad music but it's all music! We know that it is our reaction to it that makes it sad or happy. But what causes our reaction? Is there some strange force that alters our moods, It cannot be the arrangement of the notes on the manuscript or the type of instrument: violins are not always sad. Can we lock onto this force, does it in fact exist?

We have all known intuitively for many years that there is a healing force in which our feelings are involved. But not until an American biochemist called Candace Pert discovered the endorphins was there any scientific basis for those intuitions. The endorphins are the body's' natural painkillers, morphine like molecules which are released after injury especially when the injury is associated with emotion, such as on the Rugby field or other battle grounds. Often the pain is not felt until after the game is over! Candace described the endorphins as neuro-peptides, neuro because they are

related to the brain and peptides because they are proteins. Since then, she and her team have discovered over 200 of these substances now called informational molecules affecting every cell in the bodymind. I have already said that we feel well and what we now know is that these feelings are caused by a complex mixture of informational molecules controlling via an equally complex series of switches every action and reaction we make. The composition of the chemical soup which travels in the blood to all our cells varies with our moods and feelings and by altering moods we can alter the chemistry of the soup. It is to this fact that visualisation, by which we can alter our moods and therefore the chemistry, is so essential in our search for health. As we showed in Chapter one page 5, Candace Pert illustrated how an emotion can, almost instantaneously, affect the circulation of blood to the face. I have always thought that this story is a bit hard on the student, but it does illustrate well the non material suggestion which produces an immediate material effect.

Some years ago, I had as a patient, a young woman of 38 who presented with a lump in her left breast. She was a career woman who had done well as an accountant and had no time to be ill. I eventually persuaded her to see a surgeon who persuaded her to have a lumpectomy, a minimalist operation to remove as little breast tissue as possible. At operation it is not always possible and in this case the patient ended up with a partial mastectomy and the removal of three glands from under her arm. At no time was the patient co-operative and resented anything that she thought was dictated to her. I at first thought that she was a bloody minded patient and they usually do well, but I soon found out that the relationship between herself and her mother was full of vitriol and much of her energy was spent in trying to score points off her mother. After the surgery and radiotherapy the patient rapidly went downhill and I was convinced that this anger

towards her mother was blocking her chances of recovery. This I explained to her and said that unless she resolved this problem and forgave her mother and allowed her mother to forgive her she was going to die fairly soon. She replied that she would rather die than forgive - and die she did.

The other side of the coin is the patient who with a positive attitude puts her house in order leaving no unfinished business and then survives often in spite of her specialist's prognosis. Perhaps a word here on creativity, what has been called 'singing your own song'. If you paint, or write, or sew, whatever you want to do, now is the time to extend your skill. If you have or have had cancer, your problems have been reduced to one, all other problems pale into insignificance. So now is the time to do all those things that you have promised yourself to do, one-day. Accept the message that cancer has given you and enjoy what you have. It is well recognised that creativity releases healing power and couple that with my favourite aphorism

“if a thing is worth doing it is worth doing badly ” - just do it: you don't have to be the best in the world.

And, also importantly, *talk* about your cancer. The power of words should not be underestimated. Dean Ornish a renowned American cardiologist tried a new approach with a group of previously untreatable heart patients. These were patients with unstable angina, that is heart pain, which comes on with rest. Heart pain which comes on with exercise, angina, is a symptom of early heart disease. Heart pain which comes on whilst resting is a sinister sign of late heart disease formerly considered terminal and untreatable by either medicine or surgery. Dr Ornish started his group of untreatable

patients on a low fat diet, exercise which consisted of gentle yoga and walking, and this is the part which concerns us, group therapy when the patients and their partners discussed the meaning of their condition. It became clear that once the subject was confronted particularly in a group, some of the power of the words angina and chest pain was removed and recovery which had not even been considered before, started. After 4 years some patients were still alive after having previously been given a death sentence. This fits in well with what we know about cancer care groups, once the patient and their loved ones can confront and *talk* about their illness the relief is almost palpable. Here again is a non-material force acting in a material way. The English author and art critic John Ruskin 1819-1900 said *when love and skills combine, expect a masterpiece.*

And may I tell you about "A randomised, Controlled Trial of the Effects of Remote, Intercessory Prayer on Outcomes in Patients Admitted to a Coronary Care Unit"? This was a very large study, very carefully controlled which showed an improvement in patients who were unknowingly and remotely prayed for *they experienced fewer complications and had a shorter hospital stay than patients not receiving such prayer.* In India I visited the Global Hospital and Research Centre at Mt Abu, Rajasthan, the hospital of the Brahma Kumaris where I found that a similar large and carefully controlled experiment was taking place, where heart attack patients were treated in a similar manner but this time they and their spouses were also taught meditation, Raj Yoga meditation. I saw ECG's which were altering even on the 10th day.

Telling stories can be healing. We all have within us access to a greater wisdom and we may not even know that until we speak out loud. Listening to

stories can also be healing. A deep trust of life often emerges when you listen to other peoples stories. You realise you are not alone; you're travelling in wonderful company. Ordinary people leading ordinary lives often are heroes.

The connection to each other and to our soul and spirit is already there. During the times when we feel most vulnerable that which is invulnerable within us becomes uncovered, becomes more apparent. When our hearts begin to open, we are able to feel it, like opening the window shade and letting in the sunshine that's been there all along, waiting patiently to be allowed inside."

Written by Dean Ornish, President and Director of Preventative Medicine Research Institute, Sausalito, California.

So what is this non-material force? Call it compassion, spirit, energy, what you will. I call it love.

Tom's Story

Tom came to me in September 2000 with chronic fatigue and in very poor shape. To give myself a clear picture of the case I sent off a hair sample to a laboratory. Hair mineral analysis is an excellent screening tool that can reveal significant variations in nutritional and endocrine status before abnormalities in the blood can be found.

The results came back and his nutrient status was at an all time low, as was he! I prescribed the necessary tablets with a re-test arranged for three months time. The second result was not a great deal better than the first. I came to the conclusion that his energy levels, or vital force as we sometimes call it, were so low he was unable to assimilate the tablets.

I sent Tom to a local healer who had had much success with cancer patients. Tom went every week without fail for six months – the results came back, as did his bounce as you can see. *Dig.*

CHAPTER V

Putting it all Together

We have looked at diet, exercise, relaxation and visualisation and must now try to fit them all together to make something meaningful. What is it that responds to the mother's kiss, the prayer or the suggestion that this or that blank pill will heal? There is certainly nothing material *in* the pill to trigger the healing response. So the healing must be in us, only needing liberating to be effective. We have suggested in the chapter on relaxation and visualisation and the accompanying tape, that relaxation and visualisation is a way into this mystery, as a way of waking the sleeping giant of healing within us all.

Why do we need to relax and visualise? We need to relax to unload some stress. Stress is not *out there* it is *in here*, within us. It is our reaction to the circumstances, not the circumstances themselves. As it is our reaction we can change it. There is a large and burgeoning literature showing that certain types of stress, especially chronic stress, have a predictable effect on host defences, particularly by suppressing killer cell activity. This has been called the Damocles' Syndrome for obvious reasons, reasons which we referred to in chapter one when we spoke about cancer phobia. There is a further twist to that story for the distress level is often significantly higher in the partners of women with breast cancer than it is in the women themselves. A decrease in the distress level in one is likely to be followed by a decrease in the distress of the other. By helping both partners we may be further able to help the patient.

Relaxing regularly gives the bodymind, this new concept, a chance to relax, recoup and return refreshed.

We have already said that altering our moods alters the chemistry of the fluids surrounding each cell. If we can relax and visualise a place where we were happy and content and felt well, we can reproduce the body's chemistry of that time whatever the present circumstances. Further more we can persuade our bodies to produce more killer cells to combat the cancer by making up a scenario where the body does just that! What I am suggesting is that we can use visualisation in two ways, firstly to relax and unload some stress and return to the place where we were happy and well, and another scenario at another time where we visualise our own killer cells killing off cancer cell in any way you decide. More of that later. For the moment settle down and relax, for a pre-requisite of visualisation is that we must be relaxed in a quiet and safe environment .

Now the words. Heal, whole and holy are all probably from the same Saxon word, halig, which also contains the meaning, hale and hearty. In the introduction we suggested that as the mind and body could not be divided, an appropriate word to use would be ' bodymind '. Now when we are healthy everything this bodymind does, every reaction it makes, is to keep us healthy, to maintain health. For example there are the most sophisticated methods to control our temperature between very narrow limits despite changes in the outside temperature from the heat of the desert to the cold of the arctic wastes. There is a sensitive control of every other function as well to maintain 'homeostasis' a balance between the outside and the inside. The maintenance of health is automatic; we don't have to think about it. The bacteriologist Rene Dubos who invented the first commercial antibiotic, tyrothricin says, *You could guess that in all*

living things, humans included, there must be some mechanism for spontaneous recovery, because if it were not, no living thing could survive constant insults from the environment. It is the purpose of healing to assist the ‘ mechanism for spontaneous recovery’ without disturbing any other system.

But the ‘ bodymind ‘ is only part of the equation; there is now another factor we have to consider. Healing does not only embrace the physical ‘bodymind’ which can be examined by scientific methods, it also includes non-material things, things of the spirit, which are impossible to measure and therefore fall outside the remit of science. “ If you can’t measure it, it ain’t science”. But we cannot shrug the non-material side of life away; quantum physics has shown us that we are fields of energy and part of the total environment. We cannot separate mind and body neither can we separate spirit from the total of what we are. So here we have a system of immense complexity, self regulating and self renewing, locked, perhaps interlocked, into a series of environments of increasing breadth and depth, until the very cosmos itself is involved. To illustrate this, one of the most dramatic happenings in my lifetime was the return of the astronauts from the moon with the ‘moon dust ‘. It was brought back after the most stringent precautions had been taken to prevent leakage of, or contamination by, any extra-terrestrial organism, virus, radiation or other. After which it must have come as a giant anti climax to find that the dust was sterile and contained no elements except those found on earth. The dust could easily have come out of someone’s vacuum cleaner! This seemed to raise little comment at the time, but I thought that if that was all there was, then the rest of the universe was probably composed of the same elements, the same basic ingredients, and the same dust.

If there are no other building blocks in the entire universe, my dust must be the same dust as that in the furthest recesses of that universe (star dust?) and I am composed of the same molecules as the rest of the universe. It is this fact more than any other that persuades me that there is universality, a oneness, a seamless continuity between the totality that is me, and the totality that is the cosmos. The mystic Nagajuma said *things derive their being and nature by mutual dependence and are nothing of themselves*.
Everything is everything else

But, and it is a most important but, because the molecules are the same everywhere and our physical composition can be described in terms which are meaningful to the chemist and the physicist, it does not mean that that is all there is. The most important part of what we are, that is alive, cannot be found in, or described by, science. Life is qualitatively different from those facets of nature, which are measurable. The input of the mystic and the religious are as important as hard science in the description of living things, and neither excludes the other. Frijof Capra writes in *The Tao of Physics All natural phenomena are ultimately interconnected and in order to explain any of them we need to understand all the others, which is obviously impossible unless we acknowledge the mystics way of acceptance, rather than the physicists*.

Capra is himself a physicist!

I am hoping that you will accept that there is something 'other', something non-material, a power that can be turned on and utilised to heal if only we can accept that it is there. The healing effect lies dormant, a true sleeping giant, waiting for a cue to start healing, whether that cue is automatic, a mothers kiss, or prayer from an individual, a village or a whole tribe. The cues for more formal healing, include a variety of

approaches, from anointing with Holy oil by the Bishop to the laying on of hands and on through a whole range of rituals, many of great antiquity, some barely more than pagan, reminding us of the way the 'other' has always been sought when illness or disaster strikes. All these routines seem to act as a trigger and elicit a response, a response to return the whole person to previous good health. I have no explanation for this mystery nor to be truthful do I want one. I am happy with the mystery for I believe that this mystery and the others we shall mention contain the power that lies at the heart of healing.

In 'Remarkable Recovery' by Hirshberg and Barach there is confirmation of this power *the healing system may be activated by a strong emotional charge, amplified by the presence of people of like minds, by the power of ceremony and the stimulus of expectant faith. --But we also find that belief systems powerful enough to produce spectacular healings can be internally generated or stem from sources we find difficult to explain.* No wonder the ancients had so many rituals for appeasing the Gods!

Some of the difficulty in understanding this 'force' comes from our inability, perhaps refusal, to recognise it, for signs of its existence are every where. Have we not all known who was on the other end of the phone, before we lifted it up? Or suddenly spoken of someone not heard of for weeks or even years, who then makes contact some way or other? Or the dog that knows when its master is coming home long before smells, or sounds, or timing, could possibly give the animal any clues. Such things are the common parlance of cocktail parties, interesting tales over a drink, but how rarely do we give them the credit due to them, for these are all intimations of something 'other.'

We have mentioned Candace Pert and her work with informational molecules and from her research it is clear that the bodymind manufactures molecules of extraordinary complexity. These trigger physiological responses in some cells only, although all cells are bathed in the same fluid. The ability of some cells to react and others to ignore the chemical signals is dependent on receptors on the surface of the cells, receptors that are constantly changing. The complexity of the neural wiring and the number of possible interconnections are legion, but we only respond in a limited number of ways. However *the opportunity to transcend our usual responses is always present*, built into the system, teachable and learnable. I believe that it is at this point where we become more than mechanical, more than automatic and accept the responsibility of working towards our own recovery

We have acquired a great deal of knowledge through our senses, knowledge we are unable to measure and therefore outside the remit of science. Are we to dispense with this knowledge, because it cannot be measured, does not readily fit into pigeonholes. In our day to day existence our feelings, ideas, impressions, dreams and thoughts, are as important as our five senses in helping us through the complexities of our lives. And the sixth sense, that sense that Leonardo called the sense that makes sense of all the other senses, helps us many times when we are not sure of our next move. It is the continuous input of this other data, this experiential knowledge, which casts doubt on the validity of the scientific method, materialism, as an *exclusive* window on the world around us.

Let me offer you a picture. If we are "all in the same boat" and if each of us has only one porthole to look through, then although our view will be individual and unique it

will reveal a part of the same whole, the same truth. If you are facing due west you will see the sun suddenly appears from over your head and disappears into the sea. Another observer facing due east will see the sun climb out of the sea and vanish over his head. The rest of its course will be a mystery to both of them, in fact neither of them will know that the sun has a 'course', if that is all they see of the sun's progress. They can both make up a theory to explain what happens to the sun when it cannot be seen, but each stands a much better chance of being right if they can compare notes with each other. But for such a comparison to be meaningful they must firstly trust that the observations of the one are as valid as the observations of the other.

Must we always use a complicated machine to measure everything, and then only accept the findings from an equally complicated machine? Every view from every porthole reveals part of the same truth, but to assemble the whole from its constituent parts, means giving to each part, however arrived at the same priority and the same value. All observations through the different portholes are of value in themselves, but of much greater value when combined with the observations from every other porthole.

I have felt it necessary to go into these details, for mainstream medicine rejects much of what I have written as at best disproved and at worst nonsense. But, as I have repeatedly tried to show, to dismiss all this evidence is to throw the baby out with the bath water, a baby that could contribute much to the treatment of all patients and particularly, the cancer patient. Whichever route the patient chooses for her recovery, a concerted and conscious effort needs to be made and we shall show that the ability to do just that is within us all and that the methods are simple, safe and effective.

When you start a jigsaw all the blue bits could be sky, but as the picture builds up you see that some of the blue bits belong to a lake in the foreground. Nevertheless, from the beginning, all the bits are 'right' they will all fit in eventually. All of us have a picture in mind, a picture of ourselves as we are situated in the world in which we live and react with others. But as the picture we are trying to see is dynamic, "constantly changing to remain the same" (Capra) then any observation by any observer may contain elements that should not be ignored, or denigrated, even if, perhaps especially if, it does not fit in ...yet.

Part of the mystery we shall have to fit into the healing jigsaw is the mystery of the 'Placebo' from the Latin word meaning 'I shall be pleasing'. My dictionary the Oxford Compact goes on to say *a pill, medicine etc prescribed for psychological reasons but having no physiological effect*, that is no effect on the bodymind *or a blank sample used as a control in testing new drugs, or something that is said or done to calm or humour a person*. If the dictionary definition of placebo were true we could perhaps be comfortable with it, but the placebo effect cannot be so easily dismissed for to our consternation, *physiological effects are demonstrably an outcome of its use*. The mother's kiss *does* heal the child's sore knee, generations of patients *have* been healed with a bottle of coloured water both obvious physiological responses. We are dealing with an awesome power, the first signs of which I discovered when I first started work in general practice. Early in 1950 the National Health Service had only just started and in the practice I took over, the dispensary that had served previous generations was still in a back room, dusty and now never used. When I came to clear it out I found a box of pink tablets labelled 'aspirin'. I had never seen such things before; the sort of aspirin I was used to was white. So I contacted the makers. They confirmed that the tablets contained only aspirin and were to

be used for pain killing and all the other things that white aspirin was used for. The dosage for pink aspirin was the same as for white aspirin and I quickly discovered how useful they were. Patients came from great distances to buy pink aspirin from me, because, for them, my pink aspirins were several times more effective than any other sort of aspirin, soluble, insoluble, buffered or white. So much so that I began to believe myself that there must be some ingredient, not disclosed by the manufacturer, that was doing all the things that the pink aspirin was doing. But of course the pink aspirin was no different from the white aspirin – except for being pink.

This was before the days of the 'non-steroidal anti-inflammatory pill' and aspirin was much used for all the inflammatory conditions of joints and muscles, and the other aches and pains, headache, P.M.T. and so on. So for a long time my pink aspirins were a success, but then my expectations were spoiled by the advertising of the newer, very much more expensive, non-steroidal preparations. I felt old-fashioned, and remembered how the advertisements made great play about the dangers of aspirin. Dangers there certainly were, especially in patients with a history of gastric ulcer. It was a decade before the dangers of the newer drugs became apparent, when the difficulties we had had with aspirin, paled into insignificance. Importantly, what I also remember is that when my faith in the efficacy and safety of aspirin began to wane, *so did my results*. It was as if my belief had as much to do with the success of the treatment as the belief of the patient.

We have not used the word "placebo" before, because it has become perjorative, "only the placebo", but you will of course realise that most of what we have been saying is related to this placebo response, directly or indirectly. I now feel that we need a new name for something so intrinsic to healing and yet so marginalised by modern scientific

medicine. I suggest ‘ ‘healing effect ‘ ‘ for an effect which is central to medicine. The healing effect is always present, a base line with which any drug is compared and a base line to which the complementary methods of diet, rest, exercise, and prayer are added. To explain - if the pill which is being used as the placebo is called X and the drug under trial is called Y then the placebo effect is always present because Y is also a pill, tablet or liquid. Therefore the drug under trial should be called XY, it is impossible to exclude the placebo effect, and there is always the ‘carrier pill’ or tablet or liquid, which are in themselves placebos. Often, in clinical trials the healing effect does rather better than the drug under trial, at least for the first two or three months, as you will see from the diagram. This is despite the drug having been well researched, and with a known manner of reaction at the cellular level. The precision with which the drug acts seems to make its action finite. This is in direct contrast to the healing effect, which affects the body in a holistic way, and thus is usually able to bring relief to all systems, not simply the one targeted by the design of the drug.

Have you ever had influenza, or witnessed it closely? Have you ever witnessed *recovery* from influenza? It is clear that all systems are healed. Such a common condition and we expect to recover from it, often without medication, usually without a doctor and never pause to think that such a recovery is a miracle. I have made the point before about not recognising miracles. Consider the patient, he has a high temperature, a blinding headache, all his bones ache, he sweats profusely, he has no appetite, is thirsty for small drinks and constipated. And when the virus leaves him, he is often profoundly depressed. All the systems of the body have been involved to some extent, and equally all systems are healed. In view of the complexity of the control systems, which we have already noted, is it not a miracle that recovery takes place at all? We are

subject to a blindness which stops us seeing the everyday gifts given by the healing effect *because* they are everyday. As a doctor I am amazed that the body actually works at all, and not surprised that it occasionally goes wrong. When we come to consider more closely the role of the 'informational molecules', the complexity of action, reaction and the precision of the healing effect will become apparent, although it will still be beyond our power to understand.

It is not only homosapiens that can be healed. There are many well-authenticated reports of experiments performed by healers using yeasts or grains to demonstrate the healing effect. The usual pattern of these experiments is that the grains are sealed in a flask to exclude anything that might be growth promoting. A healer then holds the flask for a known time and the growth of the healed grains compared with controls. Other experiments have found that grains, damaged by salt water which should have stopped or at least retarded their growth, (i.e. diseased) recovered and eventually grew as well as the controls. (I.e. healed) We must add what we know scientifically to what we know intuitively.

In the case of influenza and all the self-limiting diseases the healing effect is usually switched on by the bodymind itself although the effect can be turned on by someone other than the patient. However, the active participation of the patient is usually required, an exception being absent healing when the patient may be unaware that she is being prayed for. For most people healing is brought them by a person or persons who have charisma, an air of authority or some routine which will reassure the patient that help is at hand. My wife Betty was very sick with her second pregnancy. I was a young doctor who knew everything but was unable to help her. In desperation I took her to see a very senior

colleague who wore a black suit and an air of great authority. After a careful history and examination he pronounced that all was well with the pregnancy and advised that she should take five prunes every morning with her breakfast. Not six or four but five. She was never sick again and I had difficulty in forgiving him.

But the most famous episode of medicine as an art form relates to Sir William Osler who in 1906 called in to see a 3 year old boy dying at home. Sir William was on his way to present degrees to newly qualified doctors and to save time had dressed in his ceremonial garb. The arrival of this doctor, if doctor he was, must have impressed the child as if his visitor was Father Christmas himself. Sir William sat by the boys' bedside and fed him a peach that he had himself cut and fed to the patient piece by piece. The doctor visited him every day for forty days and each time changed into his ceremonial robes before going into the boys' bedroom. Each day he fed the patient with his own hands and suffice to say the boy recovered. At no time was there any suggestion of medicine or surgery or even a simple blood test, love, compassion and humility healed.

May I recount a story from my own experience? My patient Albert had been a star of the music hall, and when I knew him he was still an impressive figure of great charm. He rang me one morning to tell me he had discovered several warts on his back and could I send him some cream to get rid of them. This I did, not expecting the cream to do anything, and sure enough, it didn't! After a little while Albert rang me again to request a second opinion, and I sent him to Harley Street to see the 'reigning' dermatologist, who gave him the same cream. Albert was not amused and I was at a loss to know what to do next, eventually suggesting, rather jokingly, that he should find a wart charmer. He found one, and somewhat shaken, I asked to be present when the charmer arrived. The next evening I drove out to be introduced to a petite lady of indeterminate years, dressed in a

smart black costume with a wide brimmed hat covering silver grey hair. After we had chatted a little while, the wart charmer pronounced that she was a white witch and produced from her handbag a small silver brazier, which she then lit, and a gentle smell like incense filled the room. She then asked to see the warts and Albert bared his back with some shyness. He told me afterwards that he was beginning to get nervous about the whole affair. Our witch then held a silver disc, about the size of a fifty pence piece, a foot or so from Albert's back, making passes with it for just a few moments. Albert was told to put his shirt back on, she packed up her paraphernalia, gave Albert a sixpence for his warts and went. There was no fee although Albert insisted on paying her taxi fare. As soon as she had gone I asked Albert to remove his shirt again and found that there was no change in the warts and even after these many years I remember wondering whether I ought to be pleased because what I had learned at medical school had not been overturned, or upset, because the wretched warts were still there. I need not have worried. The next morning Albert rang me to say that all the warts had gone, except for one on his leg he had forgotten to tell her about. That evening I went to see for myself and sure enough, all the warts had gone, and the skin was unmarked.

I know that this story, or stories like it, are legion. There is a folklore surrounding warts and the remedies for the cure are as varied as the stories. But the fact that the stories are so common must not be allowed to hide the fact that something very odd indeed is happening here. The wart has a viral origin, as have many other tumours, many of which are malignant. Also it is walled off in a hard, often horny layer, which in the ordinary way makes removal of the wart difficult, needing surgery by cutting or freezing and often needing more than one attempt. For some reaction in the bodymind to completely remove the virus and the horny outer layer, almost instantly, leaving the

skin unmarked, requires a precision of organisation that defies description. The number of biochemical changes, the number of messages flooding through the neural network, the number of cellular receptors switching on and off, is so complicated so vast, that it is beyond comprehension. Also there are, apparently, several ways to activate this giant system from white witches to potatoes touched on the wart and buried in the light of the full moon. And there are many local variations. A chemist in Leeds has a book in which you merely wrote your name to rid yourself of your warts. In Gloucestershire saliva was effective, but not so in Worcestershire where horses urine was the remedy of choice. But all of them set in motion a healing effect of great power and precision. We think that relaxation and visualisation accompanied by prayer is another way into the mystery and is all we have at the moment, but it is enough as we have seen. Love, compassion and humility are other means to activate the healing effect as the following story shows.

When I was a student at St. Bartholomew's Hospital in the late 40's, one of the greats, Lord Evans, if I remember correctly, never asked a patient how they were. Instead he always greeted them with "You're looking better today " or a similar encouraging message. There is a story, probably apocryphal, that one morning an old patient quietly died just before the great man arrived to do his ward round. To avoid reorganising the ward, the sister just put screens round the old mans bed and carried on as usual. Lord Evans went from bed to bed with his usual care and courtesy saying to each patient "you are looking better today " and when he got to the screens he pulled them aside and told the corpse that he also was looking better. Unfortunately the story ends here; what happened next is not recorded! I repeat this episode from a medical student's memorabilia to show how important it is to have a positive attitude, however unlikely

the possible result! The healing response starts there. I am reminded of Oliver Cromwell who wrote, before the battle of Naseby, *Praised be thou, oh Lord, that our spirits are comfortable, though our present condition is as it is.*

To change the word 'placebo' to 'the healing effect' is to reveal the source of the non-material power we have been trying to describe. Admittedly it takes us no further forward to knowing what that power is, but we now know that whatever it is, it is inside us, keeping us well until something extraordinary upsets the balance. Then a concerted and conscious effort needs to be made to restore health. We have tried to show that the ability to do this is within us and that the methods are simple, safe and effective.

CHAPTER VI

Relaxation and Visualisation

AS SOON AS WE STARTED TO WRITE THIS BOOK TO SHARE OUR EXPERIENCE WITH YOU, WE REALISED THAT THERE WOULD BE A DIFFICULTY WITH GUIDANCE FOR RELAXATION AND VISUALISATION. TO SOLVE THIS PROBLEM, EITHER GET SOMEONE TO READ THE FOLLOWING SCRIPT TO YOU, RECORD IT ONTO A TAPE OR BUY OUR TAPE "SO YOU HAVE CANCER" WHICH IS DESIGNED TO ACCOMPANY THIS BOOK.

We now have arrived at a form of treatment that is historically impeccable, proven to be effective, safe, reliable and above all simple. How do we access it? Firstly we must relieve ourselves of any of the ideas of mainstream medicine that involve other people in special places such as hospitals or clinics. From now on we are on our own, our kitchen or bedroom, in fact anywhere we feel warm, comfortable and safe, is now the treatment room. So find some quiet spot where we can be sure of not being interrupted, with the phone off the hook and any calls of nature attended to. Tell the family that this is your time and you are not to be disturbed.

You will need a comfortable chair, but not so comfortable that you fall asleep! There are no special postures, the lotus position is best left to the young and supple! On the other hand do not slump, for this is a posture that will reduce the amount of room in the chest for breathing, and awareness of the breath is vital for our relaxation. Notice how you are breathing now, is it regular, rhythmic, easy? Or is our stress showing in the

control of our breathing, almost choked, jerky and shallow? There is no *correct* way to be seated, no *correct* way to breath, but sitting comfortably perhaps leaning back a little with the back almost straight will allow you to breath easily. It helps to have an awareness of the in breath and the out breath and certainly two or three really deep breaths in and noisily puffed out to start the session each time are helpful, but after that, become aware of the breathing but do not try to control it. We are trying to control the mind not the body! Become aware of how you are sitting and try always to be aware of your breathing. When your mind goes off on a fishing trip, or starts cooking the dinner, gently bring it back to the breathing. Part of the composition of the air we breathe is a gas called argon. It is totally inert and unchangeable and the amount never alters. It is fanciful but true that some of the molecules of air that you breath may have been breathed by Jesus, Napoleon, or the woman next-door. So be aware that there is more to breathing than just air going in and out!

So comfortably seated and aware of our breathing we relax. The purpose of relaxation is twofold. Firstly we are trying to control the bodymind so that the critical, analytical brain can be by-passed. We are trying to get the interfering mind out of the way so that ideas, which may contradict the normally accepted view of reality, can be introduced. In this way your imagination can be given full rein. Ideas generated whilst relaxed and where there is a shift of consciousness are never harmful. Real dangers, from fire for example, will immediately arouse us to a full level of consciousness, ensuring our safety, so that relaxation can be engaged in with confidence. With the methods we shall describe all that is required is a suspension of belief in the present reality so that it is not then unreasonable to imagine for example that your bones are getting rubbery and relaxed. Whether this is called imagining, pretending or visualising does not matter.

What does matter is that an analytical, intellectual approach is doomed from the start. We have already shown that we are dealing with non-material fields that we cannot demonstrate except by their effect and it is only in the teachings of the most modern physics, or the most ancient spiritual teachings, that we can find any reference to similar concepts. We have already quoted Professor Carole Rawcliffe but the quote bears repetition. *The ancient shamans believed that if deep psychological healing took place whatever energies were available for physical recovery would be released.* We shall release those energies and rely on the wisdom of the body to use them well.

After a little time you will be able to relax easily and quickly, but to start the best plan is to think about each part of the body in turn. Start with the toes. To aid in visualising them waggle them about; be aware of them and relax them. Let the bones and the ligaments feel soft and pliable and let that feeling of softness travel through the long bones of the foot and up through the ankle joint, making no effort to relax, just letting go. Let the feeling of relaxation travel up through the calf muscles and the shin-bone and then into the knee joint. Visualise all the cartilage's, tendons and muscles and let them go, let your knees fall apart if they want to, keep nothing rigid and controlled. Let the relaxed feeling travel up through the great thigh muscles and imagine the great thigh-bone becoming flexible. The imagine, pretend if you like, the relaxation travelling through the muscles of your bottom into the muscles and bones of your lower back and the bottom of your tummy.

And now please notice that you are breathing with the bottom of your chest and the top of your tummy. Pause a while and become aware of your breathing, be aware of the in breath and the out breath, regular, relaxed and rhythmic, at your own pace and as deeply

or shallowly as it suits you, but be aware. Then let the relaxation pass up your back and chest into your neck and shoulders the most difficult part to relax. The first thing that happens with stress is that your shoulders come up under your ears and the difficulty is to get them down and relax them so that they stay down. Spend a moment or two thinking about your shoulders and neck and then let the relaxed feeling pass down your arms hand and fingers. Watch your breathing. Then back to your neck and let a wave of relaxation pass up through the flat muscles of the scalp, smooth out the wrinkles in your forehead, and relax the muscles around your eyes and mouth. Make sure your jaw is not clenched or your tongue pressed against the roof of your mouth.

Start now at the top of your head and scan down through your body releasing any groups of muscles still tight. You are safe, relaxed and still in control so its O.K to just let go.

And then we visualise. Some patients have told me that they are unable to visualise and I advise them to try something simple, either a banana or an orange, before anything more complicated. If you are having a similar problem sit quietly and relaxed and see a market stall of oranges in the sunshine and build up a picture around them as if you were an artist painting the scene. Visualisation is a learnt skill so do not despair it gets easier! If you are unable to visualise easily let me paint you a picture to demonstrate the simple technique.

You are walking in the country on a fine spring day. The air is crisp as you breathe it in, the sky is blue with white puffy clouds hurrying across and the bright sun is warm on your face. Be aware of all that and feel the rough country road under your feet and smell

the may blossoms in the hedgerow. As you walk on you are drawn to a noise from a nearby field. As you get closer you see that there is a crowd of people and lots of noise, laughing, children shouting and all the fun of the fair. At the end of the field there is a group of people waiting for a ‘ flight ‘ in a balloon, a gas filled balloon tethered to the ground by a strong rope. You decide to have a turn and having paid your money you climb into the basket and the man on the rope slowly lets the balloon and the basket with you in it, ascend. Look over the side and see the scene below, notice the noise getting less and less and the people and the cars getting smaller and smaller until you are high enough to feel that you are away from it all. You have stopped the world and got off—if only for an instant. Use the instant to relax, become aware of floating above your troubles and relax into the gently swaying movement of the basket feeling safe and secure with that strong rope and the attentive operative keeping an eye on you. Relax, be conscious of only your breathing, lie back see the sky above you. What colour is it, where is the sun?

Stay as long as you want and when you are ready to come back to earth, signal the operator and look over the side again. See the people and the cars slowly increase in size, hear the noise slowly increase in volume until with a gentle bump the basket comes to rest on the ground. Climb out and continue your walk until you are back at home, relaxed and refreshed after your trip.

Recent research (May03) using blood flow measurement in the brain by means of the P.E.T. scan shows that meditation increases the blood flow to the Rt frontal cortex. This area moderates feelings of anger and increases peaceful quiet. The research was

carried out with Buddhists and is thought to explain that regular meditation leads to the attributes of calm acceptance that is the hallmark of Buddhists.

This in itself poses a problem. When we move onto visualisation specifically for cancer treatment, we may need to use aggressive symbolism to attack and destroy the cancer cells whilst remaining calm and relaxed. So, two sorts of visualisation, one returning to a favourite place, quietly and peacefully as we shall describe and a second where we shall imagine cancer cells being attacked. Here it is essential that we are happy with our individual method of attack. I have come across patients who visualise piranha fish gobbling up the cancer cells, vacuum cleaners sucking the cells up and many other varied and individual ways. In all cases a method that makes some sort of sense to the patient, however bizarre it may seem to the rest of us. With experience the time will come when you will have devised a method of dealing with your cancer whilst relaxed.

CHAPTER VII

The History of Complimentary Medicine

We believe that both complementary and main stream medicine are the inheritors of ancient wisdom and that complementary cancer care shares in that wisdom. Complementary medicine incorporates much that science has since confirmed whilst retaining its grasp on methods of healing for which no scientific explanation is as yet available. Because no scientific explanation has yet been found to explain these methods, they are viewed by the mainstream as suspect, yet both complementary and mainstream medicine grew from the same roots.

It was not until the appearance of translations from Arabic and Muslim sources, firstly from Constantinus Africanus in southern Italy in the eleventh century and then Gerard of Cremona in Spain in the twelfth, that progress into a commonly understood medicine began. *Popular as well as learned medicine drew on the ancient heritage, as an abundance of simplified medical handbooks in vernacular languages testify (of course, local remedies or folk traditions also found a place in popular medicine—and sometimes in the practice of the learned as well.)*¹⁰

From the thirteenth century onwards the universities took on a greater role in teaching medicine helped by further translations, particularly from the Greek, thereby setting up the rudiments of the culture of modern medicine. Legislation to licence the practice of medicine originated in Sicily in the mid-twelfth century from which time some

¹⁰ Nancy G. Siraisi *Medieval and Early Renaissance Medicine* Chicago (1990) p187

authentication from guilds, public authorities, or universities has been obligatory. This was to protect the public from charlatans but from the thirteenth and fourteenth century it also ushered in the current divisive and monopolistic culture of main line medicine. Treatment was largely medicine and surgery, with diet regarded as a vital element in all treatments and to a healthy life style. There was little real distinction between diet and medicine, a relationship that had been known since the earliest times. Ovid confirms this *Now to perform a true physicians part, And show I am a perfect master of my art, I will prescribe what diet you should use, What food you ought to take and what refuse*¹¹

Chronic illness, even if not diagnosed into separate diseases was commonplace, from a mixture of infectious disease, injury and the infection which almost inevitably followed any injury.

Malnutrition was widespread particularly in the cold winter months after Christmas when the inability to store food safely was most noticed. The added effects of a bad harvest were catastrophic among the poor, particularly in the cities and the years of bad harvest were the years of the greatest epidemics of plague.

The nature of a good diet was generally agreed, but much of the medicine and surgery used was controversial and experimental depending on the experience of the doctor. For example, it depended on the surgeon whether the wound was healed by first or second intention; that is whether to allow the wound to heal from the bottom up, or stitch the wound and let it heal from the skin downwards. Alongside these experiments in healing

¹¹ Ovid (43BC-AD17) *The Remedies of Love*

there are many references to natural methods of healing, particularly in the church where disease was regarded as the direct result of sin. All university doctors were also priests. In these circumstances the first move towards healing was to the church for confession and absolution and healing could only proceed when absolution had been given. Even then it was only the wealthy who could afford the university doctor, the lower orders made do with whatever was available locally. This was largely the field of the housewife, the wise woman, and the midwife all capable of making herbal remedies especially the simples (from one specific herb).

With or without medical guidance, patients practised self help in the form of self medication, visits to medicinal baths, pilgrimages or prayer; and religious shrines offering alternative forms of healing were omnipresent. In many instances any of these endeavours was as likely to be successful—or unsuccessful as the most skilled medical attention.

We have tried to show that complementary medicine and that part of it which is concerned with the treatment of cancer has a history, which it shares with mainstream medicine. Legitimacy is assured by the historical concepts on which it is based and to which we have referred. We have long known intuitively that there are non-material things, which produce a material effect and now scientifically acceptable research into such regions as prayer and meditation confirms what we have always believed.

This is no 'new age' aberration but a continuation of successful age-old methods and main stream medicine should realise that successful, age old methods of treatment do not lose their effectiveness merely with the passage of time.

Complementary medicine has preserved its roots extending back to a time when the church was the main source of healing, so that its links with spirituality remain. Formal religion may play no part in mainline treatment, but severe illness and particularly cancer, opens up questions of the purpose and meaning of life which nothing else does. So the sort of complementary cancer care we are describing cannot be bought at the pharmacist, requires no high-tech equipment and is reliant on self help.

If we lose the opportunity to use the language of spirituality , or the religious contexts in which such language can be performed, then we are significantly impoverishing the healing cultures in which we live.

Our culture contains many healing tales surrounding doctors and hospitals. Some doctors seem to be more successful than their colleagues are although using apparently similar treatments and some succeed using no treatment at all. Admission to some hospitals is regarded as a death sentence whilst other hospitals are the pride of the local community. The treatment may be the same in both! We have all had patients who have said that they feel better on leaving the consulting room, " I feel better already " before any treatment has been started. The thought that this meeting between a sympathetic doctor and enquiring patient is helpful has led to the idea of a therapeutic interview where all the invisible factors in health promotion come together. Certainly much more happens than just putting the patient at ease. Is there a common factor that also explains the hands on methods of treatment, reflexology, aromatherapy, and massage for example? Most people have a story to tell of non-material things having a material effect. And it is not just humans that are affected. There is a story concerning Thomas

Merton an American trappist monk who, on returning to his hermitage one morning after mass, saw an injured deer limping with difficulty across the field. This was at the time of the Vietnam war and Merton was already distressed by the pointless loss of young life. The sight of the injured deer broke him and he wept. The deer stopped and looked at him and Merton stopped and looked at the deer. They looked at each other for a full minute or so. Then the deer turned and trotted away with no sign of a limp. What had happened? These are the everyday examples of healing which we all know about, the sort that will 'kiss' a child's knee better, hug a sorrowing friend or sit by the bedside whilst someone dear goes quietly home.

Historically the church was more intimately connected with healing at a time when recovery from disease was not the norm and there was little else available as treatment. Prevention was vital as was diet and as Carole Anne Hill reminds us *In an age when any illness could quickly become life threatening, when living conditions were poor for most and often shared with stock animals, famine related disease was commonplace. Infant and maternal mortality was high and life expectancy low. Add to this, recurrent epidemic disease, particularly, but not only, bubonic and pneumonic plague and a picture emerges of people for whom death and therefore purgatory was never far away.. Help was needed and sought through what was a familiar channel; confession, absolution and prayer...The difficulty in the concept today is the distinction between healing, which is essentially a spiritual aspiration and curing, which is a physical manifestation. In a real sense, for the people of the medieval period, this distinction was superfluous.*

Some years ago I was running a self help group to give encouragement, prayer and help with visualisation with a group of volunteers all of whom had been effected by cancer. Some were patients, some carers and some healers. Sandra was a patient who had come to us in the terminal stage of ovarian cancer

Sandra was 32 and had two daughters aged 5 and 7. She came to see me in the last stages of ovarian cancer after the surgeon and oncologist had done all they could. She was shaking with fear, crying and unable to speak coherently. The most important gift one can give to a patient at this stage in their illness is time and a listening ear. If the patient cannot speak just sit, don't speak unless you can improve the silence. We sat for a time whilst the rest of the team (all patients themselves) prayed in another room... We visited her every day at home and I gave her intravenous injections and we held hands and talked about the future for her husband and her girls. Those members of the team, who were able to, also visited her, and she slowly became calmer and less frightened. At the very end when she could no longer be nursed at home she was admitted to the same ward she had been on when she had her original surgery. She died 12 hrs later and the ward sister rang to ask what we had done. Apparently Sandra had upset the whole ward with her sobs and cries when she first realised her prognosis. Now she was calm and as she died she said that it was such a lovely experience that she wished she could share it. Although cure was not possible Sandra, dear Sandra, was healed. And so were we.

Joyce was a great bowls enthusiast. She also had end stage ovarian cancer and had gone through the whole repertoire of treatment but had not really responded. She came to our weekly healing sessions but she became noticeably more frail and eventually her

husband almost carried her in. She had come to say goodbye. Unusually and for no reason we all gathered round her and spontaneously we all laid a hand on her, finding some part to touch and direct our prayers in an expression of love.

Three weeks later she was playing competitive bowls and died three years later from a heart attack. I give you these two histories in all humility for I have no explanation for the outcome in either case.

This would be good time to introduce ' hope '. Over the last forty or more years I (anh) have been many times accused of giving false hope. I do not believe that there is such a thing as false hope. If you have the common cold for example, you do not need to hope for a recovery, you know that everything is in your favour and hope is then superfluous. But when the chips are down and every thing is going badly, then you need hope, the life spring of recovery. For those patients for whom cure is patently impossible, healing can still take place at a deep level often resulting in the healing of those around them. Often this is a hoped for result and for many terminally ill patients a result that is prayed for. Research done at the University of California by Professor Shelly Taylor found that *men with aids who were more optimistic, even unrealistically so, lived an average of nine months longer than those that had a more realistic acceptance of their risk of death.* And later *Peoples positive opinion of themselves, Taylor concluded, can affect the way they respond to stressful environments and circumstances, providing a link from psychology to health.* Research News June 2003 pp 6 & 31

Out of the many ways to respond to cancer, healing as we have defined it stands out as an important component in many ways and a stand-alone method in some. As there is

no single way that will guarantee success, as there is no right way, pressure groups will spring up to give advice. The original diagnosis will almost always be given by conventional medicine, which will assume that you will continue in the conventional way with surgery, chemotherapy and/or radiotherapy. Most patients find that the constraint to follow conventional wisdom is so powerful that few look to see what else is available and fewer still elect to have complementary treatment until the failure of the triad of surgery, chemotherapy, radiotherapy becomes apparent. Because this triad is aimed at a cure, which may or may not be possible, healing is neglected and we have seen that even the most mundane of conditions responds best when healing is involved. It is even possible that the patient may be 'cured' of cancer and yet never feel 'whole' again. Having used the word 'conventional' to define the triad of surgery, chemotherapy, radiotherapy, it is necessary to point out that the application of these methods varies widely in different cultures even in the most technologically advanced nations. There is a wide variation in the use of these three methods of cancer treatment, so much so that it is apparent that where you live has as much effect on your treatment as its availability. In America the treatment of cancer in all its forms is aggressive. In France gentle therapies are preferred. In America treat at all costs whatever the quality of the patients life. In France the preservation of as much of the body as possible, particularly those parts connected with sex and reproduction, is the norm. As a result, in France, complementary medicine, particularly homeopathy is used coupled with a belief in healing in the sense of building up the whole person, improving the immune system.

Some of this attitude may be the result of the work of one of Frances' great sons Louis Pasteur. (1822-95). Considered to be the father of bacteriology he stated at first that all disease was caused by germs but later recanted and is reputed to have said on his

deathbed ' the germ is nothing, the milieu is everything '. Whether this is in fact the case, there is no doubt that the French are meticulous in supporting the milieu, the terrain, whilst treating the patient. Treatment is less invasive and there is no sense that the patient must be kept alive for as long as possible and at all costs. The comfort of the patient is considered in treatment and there seems to be little difference in outcome whether the treatment is aggressive or gentle.

In Germany the range of therapies on offer is greater than in any other technologically advanced state. As well as the common triad, homeopathy, spa treatment and naturopathy are used, as is anthroposophic medicine, introduced by Rudolph Steiner, and combining many of the naturopathic methods with both western and eastern spirituality.

In Britain there is a greater awareness of the importance of the quality of life and the dignity of death in comfort and it is instructive to note that the hospice movement is a British invention. However the same surgery, chemotherapy, radiotherapy are used with less invasive surgery than is usual in America, and there is beginning to be a greater reliance on diet and prayer. Whilst at St Bartholomew's Hospital in London in the late 40's I was taught by Sir Geoffrey Keynes who deplored extensive surgery for cancer and did in fact use lumpectomy for cancer of the breast as long ago as 1939. His results were better than the massive radical mastectomy current at the time.

The Japanese use surgery as little as possible regarding it, in the case of cancer as a further shock from which the patient then has to recover. By rarely using surgery the patients own healing system, working in accord within the age old cultural methods of

acupuncture, moxibustion and spiritual healing, is called into service abetted by the whole family being involved both at home and within the hospital. The benefits of the whole family being involved in the treatment are impressive, whether that 'family' is the nuclear one or the family of the church, village or tribe.

So there is a great variety of treatments on offer for the same cancer. but they are all 'conventional' varying with the culture of the country. No one is absolutely right. If that were so there would be only one treatment whatever the culture the patient was in. So the dilemma facing the patient new to the minefield of cancer treatment is the need for choice. And the choice is not whether to go to the best man wherever 'he' may be, but to navigate through the methods of treatment available here and now.

There has been a change in the relative importance of some of these methods and Susan has suggested that this book should be called " It's Not all Diet".

So far we have shown that complementary cancer care has a history linked to the history of complementary medicine and a present which is becoming respectable. It has never engaged in those methods of treatment, leeches, blood letting, purgation etc. that were among the standard methods of the mainstream medicine of the day. Simples, herbals, compassion, grace, prayer, meditation and the involvement of the community were and are amongst complementary medicines many methods of treatment.

It is probable that diet and exercise will be increasingly incorporated into mainstream medicine as these two modalities are nearer to the ideals of the main stream, in that trials of a scientific nature (i.e. measuring) can be carried out on them. But I find it

paradoxical that a diet, which is quite widely acclaimed for patients who wish to prevent cancer, is not equally advised for patients with cancer and who are receiving treatment. I can only assume that the ferocity of surgery, chemotherapy and radiation is such that, for example, a fat free diet may seem ludicrous in comparison, but what is helpful in prevention must be helpful in treatment.

What then the use of talking about spirituality, to the patient suffering from cancer, perhaps feeling terrible after his chemotherapy, or surgery or radiation. Sooner or later and usually sooner, the cancer patient realises that he or she is in a pickle. Travelling through uncharted waters he is at the mercy of friends, family and his doctor. They may all be giving the same advice but the vibes are different and cancer patients are adept at picking up vibes. Often friends shy away from the cancer patient as if cancer was infectious. Or they don't know what to say. Their doctor may give them a choice of treatments, a choice the patient is unable to utilise because of lack of knowledge, and worst of all he may ask for a second opinion which varies from the first. No amount of reading or consultations will help, he needs some other resource and that resource is within. But only when we turn off the ever questing conscious, everyday, mind and relax. The intellect that we use everyday coupled with learning and experience fails us at the time we need it most. It is then that we become aware of an inner strength. After a lifetime of struggle to learn, to absorb, to compete, to succeed, it seems to make little sense to relax and to let go at a time that seems to call for an increase in effort to overcome the shocking news of cancer. It is at this point that relaxation as a prelude to visualisation comes into its own.

CHAPTER VIII

The Wider Vision

SKIN BRUSHING

Have you ever noticed how you wash your face and lather your hands or scrub behind your ears? Next time you take a wash spend some time observing just what you do. You'll find you turn into a robot. You may have to slow the movements down a little to realise just what is going on, but in fact those deft movements you perform were programmed years ago, and you've been going through the same ritual ever since. You probably learned them before you started school. Two quick wipes of the cheeks, an up and down scrub of the neck, two licks behind the ears and so on.

But if washing ourselves has become so unconscious perhaps we've forgotten, or perhaps we never knew why we wash at all. Throwing aside the lurking fear of mother's wrath, why do we wash our bodies? Well, because for one thing we smell if we don't. But have you ever wondered why we smell if we don't wash? What is sweat? You may be interested to know (or you may be horrified!) that the chemical analysis of sweat reveals it to have almost the same constituents as urine, and that more than one pound of waste products are discharged through your skin every day. For the skin, apart from holding us in one place and being (hopefully) our pride and joy, has a very important job to do. It is actually an organ of elimination just like our kidneys and colon. These organs do a valiant job in keeping us free of poisons and waste. Our skin must share in this work too or we get into trouble.

If the skin becomes inactive with its pores choked with millions of dead cells, then uric acid and other impurities will remain in the body. The other eliminative organs, mainly the kidneys and liver, will have to increase their labour, and will eventually become overworked. If toxins and waste begin to build up in the tissues because the kidneys and the liver cannot cope with their job, then sooner or later disease will follow. Such is the responsibility to keep a healthy and well functioning skin. So mother was right! We do need to wash perhaps even more than we realised. But does that ritual with the soap and water actually do the job?

Of course it's still fun to jump into the tub but once you start to skin brush you won't need to use all that harmful soap. That alone will make a lot of difference to the quality of your skin.

Skin brushing itself – you do it dry of course, not in the bath – will change the health of your whole body. Circulation, skin softness and quality, skin infections and irritations, whole body freshness, your level of stimulation, the prevention of colds and your personal rejuvenation are all areas of improvement you can look for when you make it a regular habit.

To brush your skin start at the soles of your feet and work your way up your legs, your front and back. Always working towards the heart. Next you do your arms, chest and upper back working down to the heart. Dry skin brushing is recommended to stimulate lymph and blood circulation for the removal of impurities from under the skin surface.

Cancer lacks oxygen and oxygen is the fundamental raw material of all bodily processes – increasing oxygen improves just about everything: elimination, absorption, utilisation of nutrients, quality of the blood and keeping up the supply of white blood cells which enhance the body's defences.

One of the prime causes of cancer is the replacement of the respiration of oxygen in normal body cells by a fermentation of sugar.

It is estimated that diabetics will overtake cancer as a major killer in the next ten years.

To oxygenate the system skin brushing is recommended. The principle of total body health being directly related to the purity of the fluid environment in which the body cells dwell was conceived by the great French physiologist, Professor Claude Bernard in the 19th century.

The gently flowing fluid called 'lymph' consists of plasma – the clear liquid component of the blood – which seeps from the capillary vessels of the main blood circulation into the body tissues to deliver oxygen and nutrients to the cells and to convey waste products of the cells away for elimination. The 'spent' lymph returns to the main blood circulation by way of the lymphatic system – a separate network of blood vessels, similar to veins.

It is an interesting fact that the chemical composition of lymph is almost the same as seawater. This again reflects the fact that the cells of our bodies are descendants of the

first single-celled sea creatures that preceded the higher forms of life billions of years ago from the Primordial Sea.

The purity of the lymph surrounding each cell obviously depends on the quality of the blood and in turn the quality of the blood is dependent primarily on the efficiency of the liver and kidneys. Ahead of that, on the quality of the food and water from which the body makes new blood.

When the quality of the blood cells is just right, the blood and lymph flow freely, rich in nutrients and oxygen and free of unwanted substances or toxins. The oxygen-carrying red cells of the blood float freely and so too do the protective white cells of the immune system and thus everything works correctly.

If there are any deficiencies in nutrition, if there exists any form of toxæmia, or if there is inadequate oxygen or poor circulation, or organ malfunction, the body will attempt to maintain homeostasis, but if it cannot, the body will be 'ill at ease' or in other words, dis'eased'.

HERBAL TEAS & INFUSIONS

Naturally better if you can pick the herb fresh from the garden and just infuse with hot water. All the following have medicinal properties and don't taste too much like a compost heap.

- ❑ Camomile Nerve Tonic. Sleep and appetite stimulant. Digestive aid.
- ❑ Chickweed Good for tumours as high in vitamin C
- ❑ Echinacea Good for the immune system and glandular swelling
- ❑ Fennel Relieves acid stomach, gas, gastrointestinal spasms. Good as a Tonic for spleen, liver and kidneys after chemotherapy and radiation.
- ❑ Ginger Helpful for use in nausea and sickness, vomiting & hot flushes.
- ❑ Nettle Good blood cleanser.
- ❑ Peppermint Use for indigestion, nausea and diarrhoea.
- ❑ Red Clover A sweet herb that is a good blood purifier.
- ❑ Rose Hips Good for infections and helps control stress.

All the above are available from Neals Yard Remedies ¹²

¹² Neals Yard Mail Order – 0161 831 7875

Essiac Tea

Developed and perfected over many years by Rene Caisse, a Canadian Nurse, it's four herb combination has both blood cleansing and immune enhancing properties.

- Burdock Rich in antioxidants and selenium

- Turkey Rhubarb Antibacterial antiviral with anti-tumour properties. Cleanses the body of toxic waste.

- Slippery Elm Soothes organs and neutralises acids.

- Sheep Sorrel Rich in vitamins, minerals and trace elements.

Essiac Tea is available from the author ¹³

¹³ Essiac Tea - Susan Fletcher: 01263 768891

Supplements

Although there is much controversy on supplements, experience has shown them to help.

Cancer most frequently originates in organs where vitamin C levels are low and there is little doubt that a deficiency of this vitamin is a significant factor in forms of cancer. Humans are incapable of making vitamin C in their bodies and vitamin C is poorly supplied in the average modern diet. 250mg will saturate the tissues. 1000mg should be taken three times a day under stress of chemotherapy and radiotherapy.

Vitamins A & E are also associated with cancer – all three are antioxidants, which means they scavenge free radicals, which are the baddies! Thankfully manufacturers put these all together in one pill for us. I prefer the betacarotene as the source of vitamin A as it is more easily absorbed, and magnesium ascorbate as a buffered form of vitamin C which is gentle on the stomach. Vitamin E must come from a green vegetable source not soya or wheatgerm (soya and wheatgerm are the major commercial source which is estrogenic).

A probiotic is important as it will boost the immune function, breakdown food for absorption and help expel that which is not needed. Acidophilus is a receptor for Oestrogen and Progesterone. Bifidophilus will bind to bile acids in the gut therefore reducing the risk of cancer of the liver and will accelerate healing after surgery of the gut and protect those at high risk.

A gentle liver support is beneficial but excess liver stimulation can promote tumours.

Coenzyme Q10 has shown excellent results in breast cancer.

Vitamin B15 can oxygenate the system. – Cancer finds it hard to survive in the presence of oxygen.

Essential fatty acids play their part in the programme. Flax oil is the safest and is the best all rounder. GLA found in evening primrose oil and borage oil should be used with caution in hormone dependant cancers.

Squalene brings the immune factor to the cell membrane and increases the white blood cell count and is therefore beneficial when undergoing chemotherapy and radiotherapy.

The amino acid L Glutamine will help heal the digestive tract during chemotherapy.

Mineral deficiencies most commonly associated with cancer are Iodine, Selenium, Magnesium and Potassium. Cancer cells display low Potassium levels; high Sodium levels (salt!). Potassium and Magnesium are poorly supplied in meat, eggs, cheese, fat, sugar and grains. Minerals are in the soil and therefore found in fruit and vegetables and wine – the latter according to Christine Joyeux, a leading French dietician, is far better for you than artificial fizzy drinks! Selenium is often included in the vitamin A, C & E formulae. Mineral metabolism can be the root cause of the break down of the immune system.

Zinc is one of the most important trace minerals for our immune system.

Please be sure to get individual expert guidance when choosing supplements through a qualified practitioner in your area. ¹⁴

Also when buying supplements choose a good brand. Many high street or supermarket brands have the same nutritional value as a McDonalds Hamburger and use unmentionable binders and fillers.

A good mail order company is Biocare ¹⁵

¹⁴ BANT: British Association of Nutritional Therapists: 0870 606 1284

¹⁵ Biocare Ltd: 0121 433 3727

FREE RADICAL DAMAGE & NATURAL PRODUCTS

Environmental factors that Adversely Affect Wellbeing

These are called free radicals – and how do we get them?

Well actually, we make them! Or at least some of them. They make up our immune system, attacking foreign invaders, and they are natural by products of many metabolic processes in the body. The foremost example is breathing, but also included are exercises, metabolism (the breaking down of food for energy), and detoxification.

While the production of free radicals is part of our ‘design’, our bodies have become overloaded from our external environment. We are constantly exposed to a multitude of free radicals on a daily basis.

- ❑ Smoking
- ❑ Infected teeth
- ❑ Oral contraceptives and hormone replacement therapy
- ❑ All ‘recreational’ drugs
- ❑ Sedatives, tranquillisers, pain killers
- ❑ Air pollution, car exhaust fumes and general city life.
- ❑ Various chemicals inhaled or absorbed through skin - from cleaning fluids to hair sprays, pesticides & fungicides, asbestos particles, all promote cell division.
- ❑ Mercury absorbed from amalgam teeth fillings
- ❑ X-rays, TV tube emissions, strong electrical fields
- ❑ Excess of sunshine and lack of sunshine

Obviously free radicals are almost impossible to avoid, however, they are quite easily combated; all we need to do is provide the body with plenty of antioxidants. As the name would suggest antioxidants stop the oxidation process by which free radicals do their damage.

Research has shown conclusively that the higher the intake of antioxidants, the lower the risk of disease, and vice versa.

So clearly if you smoke, stop! Don't sit around people who do smoke.

Cancer requires a complete change of lifestyle not just diet. If you have a stressful job in the city that involves sitting in heavy traffic for hours try to change it, better still if financially possible give up work allowing your body the rest it needs to heal.

Have your teeth looked at regularly and look at mercury free dentistry¹⁶

Change your cleaning fluids, use a good beeswax for the furniture rather than spray polishes (the furniture will appreciate this more too!)

The Company 'Green People' have an extensive range of organic facial and body care, a comprehensive hair care range plus toothpastes, sun protection lotions and a multipurpose household cleaner with essential oils of lemon and geranium.¹⁷

¹⁶ Mercury Free Dentistry 020 737 3655

¹⁷ Green People 01444 401444

Natural soaps and deodorant without aluminium are available from Xynergy ¹⁸

Wash your clothes with an Eco ball or liquid by Ecover, available from all health food stores and some supermarkets.

Finally if you would like to colour your hair, the most natural product on the market is Tints of Nature ¹⁹

¹⁸ Xynergy: 01730 813642

¹⁹ Tints of Nature: 01202 447188

Supplements

BEE HIVE PRODUCTS IN THE TREATMENT OF CANCER

BEE POLLEN

One of the most important articles ever published on Bee Pollen comes from the United States Department of Agriculture. This article is entitled The Delay in the Appearance of Mammary Tumours in Mice Following the Ingestion of Pollenised Food. The work of Dr. William Robinson, it was published in the Journal of the National Cancer Institute way back in October 1948, over four decades ago. According to the article Dr. Robinson started with mice that had been especially bred to develop and subsequently die from tumours. He explains that the age at which mice of this strain develop tumours ranged from eighteen to fifty-seven weeks with an average appearance at thirty-three weeks, the tumour incident was 100%. One group of mice was fed mouse chow only, whilst another was fed mouse chow with the addition of bee pollen at a ratio of one part bee pollen to ten thousand parts of food, particular attention was given to the weight of the treated animal since underweight in itself brings about a delay in tumour development. No decrease in weight occurred in those animals receiving pollenised food, instead a slightly but fairly uniform increase was noted, possibly due to the nutritional factor in pollen. In his summary Dr. Robinson reveals the dramatic results: In the untreated mice, tumours appeared as expected at an average of thirty-one weeks, the tumour incident was 100%. In the mice given bee pollen the average onset of tumours was forty-one weeks with a delay of nearly ten weeks being obtained. Seven mice in the series were still tumour free at fifty six to sixty-two weeks of age when the tests were terminated. To emphasise, these mice were specially bred to

die from cancerous tumours, without the bee pollen in food the mice developed tumours and died right on schedule. Dr. Robinson concludes his article by saying ``it is suggested that the use of the extracted and standardised active principle from bee pollen might produce greater postponement.'' These experiments were based on the postulation that bee pollen contains an anticarcinogenic principle that can be added to food.

Dr. Hernuss from the University of Vienna and colleagues conducted a study of twenty-five women suffering from inoperable uterine cancer. Because surgery was impossible the women were treated with chemotherapy. The fortunate women given Bee Pollen with their food quickly exhibited a high concentration of cancer fighting immune system cells, increased antibody production and a markedly improved level of infection fighting and oxygen carrying red blood cells. These women also suffered less from the awful side effects of chemotherapy. Bee Pollen lessens the terrible nausea that commonly accompanies the treatment and helped keep their hair-loss to a minimum. The women also tended to sleep better at night. The control group receiving a placebo did not experience comparable relief.

A Yugoslavian paper supports the results achieved at the University of Vienna. In this study eighty-four female patients undergoing radiation for gynaecological cancer were divided into two groups, the ages ranged from thirty-four to seventy-one, all women suffered secondary symptoms as a result of the radiation treatment. In Europe this condition is called X-Ray disease, symptoms include; lack of energy, nausea, vomiting, diarrhoea, anorexia, headache, insomnia, irregular heartbeat, elevated temperature and

severe fatigue. In some patients the symptoms of X-Ray disease became so severe that the radiation was temporarily stopped to give the women time to regain a measure of strength. As radiation treatment causes decomposition of tissue both cancerous and healthy, resulting in a proliferation of toxins in the body it was decided to use a natural bee product substance, i.e. Pollen. The

results were dramatic. According to the paper's conclusion, ' after taking the preparation, 30.5% of the patients had no sign of fatigue; 67.7% felt light fatigue, and only 2% still complained of severe fatigue; 38.9% no longer suffered from anorexia; 41.6% exhibited light anorexia; 8.3% moderate anorexia; 44.4% no longer suffered nausea; in 50% of the patients nausea was reduced to the mildest form; in only 5.6% did the intensity of nausea remain unchanged.

From Romania we have a report showing the immune strengthening effects of bee pollen. It shows an increase has been recorded in the level of blood lymphocytes, gamma-globulins, and proteins, in those subjects given pollen in comparison with control groups. The most significant difference occurred in lymphocytes. Lymphocytes are the white blood cells that are the soldiers of the immune system, they are responsible for ridding the body of injurious and harmful substances including infected or diseased cells, mutant and cancerous cells, viruses, metabolic trash and so on. Gamma-Globulin is a protein formed in the blood and our ability to resist infection is closely related to this protein's activity.

ROYAL JELLY

Like Bee Pollen and Propolis, Royal Jelly exhibits strong cancer fighting properties. Research was carried out at the University of Toronto on the activity of 10-Hydroxy-2-

decanoic acid (an EFA unique to Royal Jelly) against experimental Leukaemia and Ascitic tumours. The research was part of a long term Canadian study on the Chemistry and Biological activity of Royal Jelly. In this particular experiment the scientists mixed Royal Jelly with active tumour cells taken from cancerous mice. They report that an injection of the mixture suppresses leukaemia and inhibited the formation of tumours. These no-nonsense Canadians didn't fool around either and this is how they evaluated the results; 'The criterion used in these experiments was survival. The mice either developed leukaemia or tumours, or, were fully protected. The control mice died from tumours in less than fourteen days, whilst mice receiving appropriate mixtures of cancer cells and Royal Jelly all failed to develop tumours. Protected mice were kept under observation for ninety days after the death of the control mice. They were then sacrificed and autopsied to confirm the absence of tumours.' These results have been confirmed repeatedly on nearly one thousand mice during a two year period and show a striking effect; either all the mice die quickly, or all survive. Two groups of mice which received tumour cells plus Royal Jelly remained alive and healthy more than twelve months after inoculation, while sister mice which received the same number of tumour cells without Royal Jelly died within twelve days. In other words the Canadian scientists came up with a vaccine that protects mice against leukaemia and the subsequent development of related tumours.

It is an interesting concept, that as much as we don't like testing on animals, work with animals always precedes experimental trials for a promising vaccine on human volunteers. So could our children or grandchildren be routinely inoculated against cancer? It's an attractive possibility.

PROPOLIS

In 1991 the Institute of Cancer Research of Columbia University mounted a study of the medicinal effects of another bee product, Propolis. As we know, no known drug combats a virus, if you go to your doctor with a viral condition you're out of luck. In Propolis we have Caffeic Acid Phenethyl Ester (CAPE for short), this promises to figure prominently in the future treatment of many conditions caused by viruses. CAPE directly extracted from bee Propolis has proven so effective against certain viral infections and some cancers that a United States Patent was granted. Basically when scientists tested the effect of CAPE on human cancer cells and culture, they determined that CAPE inhibits the incorporation of transformed cancerous cells into the DNA of human breast cells by approximately 50%. The biggest problem Medical Science faces when trying to destroy diseased cells is that drugs powerful enough to kill diseased cells also unavoidably kill normal cells, the magic bullet the whole world is seeking is a selective substance that will attack and destroy only transformed diseased cells while leaving normal cells unharmed. Perhaps CAPE extracted from Propolis might be that magic bullet. Propolis also actually boosts the immune defence forces of the body.

Cookery Book List

- ❑ Healing Foods Cook Book. Jane Sen
- ❑ Cook Vegan. Richard Youngs
- ❑ Introducing Vegetarian Cooking. Alison Westcott
- ❑ Raw Energy. Leslie and Susannah Kenton
- ❑ Single Vegan. Leah Leneman
- ❑ Natural Alternative to HRT Cookbook. Marilyn Glenville
- ❑ Optimum Nutrition Cookbook. Patrick Holland and Judy Ridgeway
- ❑ The Food Doctor. Vicki Edgson and Ian Marber
- ❑ Cooking without. Barbara Cousins