FACTORS FAVORABLE AND UNFAVORABLE TO CANCER

1. ENDOCRINE. It seems that cancer only becomes possible after the endocrine system becomes unbalanced or weakened. Thyroid function is essential to defense against cancer; the thyroxin acts to release determinant factors (protomorphogens) from the adsorbed reserves in connective tissue, and X-ray treatment of cancer may act similarly, though the X-ray also breaks down the chromosomal reserves of these same determinants, and its damaging effect over thyroid is, no doubt, because of its failure to select the adsorbed reserves alone as sources for release. (Murphy at Rockefeller Institute proved 30 years ago that X-ray stopped cancer not by the effect on cancer tissue, but because the X-ray stimulates the resistance of normal tissue to invasion. Small doses were proven more effective than destructive doses. This philosophy is unknown to most radiologists.)

The function of the vitamin F complex to cooperate with thyroxin, to make it acceptable to the tissues (we feel by reason of the F effect of catalyzing insulator films to protect the determinant, without which the release of tissue poisons, histamine, etc. by ever-present tissue enzymes occurs) can be seen to be all-important. This is the basis of the well-known anti-carcinogenic effect of the F complex. (See section on F in 1949 issue of the Annual Review of Biochemistry, and Prof. Aviles' article on the treatment of cancer with vitamin F.)

The first indication of thyroxin deficiency in many patients is constipation. That is significant as that many cancer authorities blame cancer on constipation. Thyroid weakness, or regression that occurs after a deficiency of vitamin F may be the primary cause. (See Lee Foundation Report #1, where blood iodine - thyroxin, no doubt - increased 100% or more after a few doses of vitamin F.)

It is obvious that tolerance to thyroid is dependent on vitamin F presence to wrap the released determinant that is otherwise reduced to histamine, etc. Anti-pyrexin, the liver hormone that promotes the elimination of histamine is also a weapon to use where the thyroid effect is attended with histamine reactions.

The most potent stimulator of cancer in the endocrine category is the anterior pituitary growth hormone. No anterior pituitary products should be given to the cancer patient if the presence of this factor is possible.

Di-calcium phosphate causes constipation, opposes thyroxin. The cancer patient needs the raw bone meal as a calcium source, because its associated enzymes (phosphatase in particular) release inositol and phosphoric acid from cereal phytates. If any constipation is caused by its use, 1/10 grain of thyroid should be used with each meal, or as much as required to keep the bowels open.

Doctors who treat cancer in the main reduce the animal protein intake to a minimum. It is likely that this is by reason of their experience, that meat poisons overload the thyroid and vitamin F functions. Their patients do well for a while, but tend to lose their vitality and die from apparent starvation. The proper use of fresh meats and thyroid substance with the proper vitamin reinforcement may be a more sensible system.

The thymus gland supports phagocytic activity, and its activation by thymus protomorphogen has been found very useful in combating chronic infection. Since thymus hormones have been found useful in cancer treatment, it is probable that one of the glandular defenses against cancer is the thymus. The cancer invasion can only be controlled and eliminated by phagocytic activity. (Note the activation of phagocytes by natural vitamin C.)

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