



... let us be the light at the beginning of your journey

### Double-Helix Water



David Gann



Shui-yin Lo

Double-Helix Water is the title of a book written by David Gann and Shui-yin Lo published in 2009. It is about an amazing discovery.

As in most discoveries there is a fair amount of luck. This story is no exception. David Gann is an engineer who was working on diesel engines to make them last longer and emit less pollution. Both of these problems are caused by the diesel engine gradually coking up to the stage where their fuel consumption doubles. The trick is to add a catalyst to the fuel that lowers the fuel consumption.

A back-yard inventor claimed to have discovered a water-based catalyst that worked well, but when David analysed it he found it to be pure water. So how could it work? One suggestion was that it was Platinum chloride that had been diluted. The inventor claimed that the water contained the "fields" from the metal catalyst. But it did not work every time.

David's colleague Shui-yin Lo was a mathematician. He was aware of the work of Peter Debye, a Dutch physicist and chemist who had done the calculations about what happens to ions of substances when they are

diluted. But Yin did the calculations of what happens to ions that are diluted below parts per million concentration of water. Ions are known to retain an electrical force between them (between positive and negative) but it quickly gets weaker as the ions are separated. What Yin discovered was that when the force becomes almost negligible (below 1 part per million) it suddenly gets very strong. The intense electrical pressure concentrates eight water molecules together to form a cluster. This cluster has a very high electrical charge that then triggers the formation of other clusters.

They used the clusters as the catalyst in the diesel engine and it worked every time. When tested on local school buses instead of dropping from 9 miles per gallon to 4.5 over 5-6 years they stayed at 9 or even increased to 9.5 mpg.

They called the new water particle  $C_E$  meaning a Cluster formed under an Electric Field. It has many uses such as in petrol engines, refineries and boilers – anywhere where there can be a carbon build-up. They

prefer to call it a new *phase* of water rather than a new particle of water – just a hitherto undiscovered stable molecular phase of water. They also refer to it as double-helix water and Stable Water Cluster (SWC).

They then discovered that this water had a significant effect on stimulating T-cells that excreted large numbers of cytokines.

Many people who have used the  $C_E$  water have recovered from cancer. David believes that the body might have a way of making it, and it might be part of our immune system. For some reason in people who get cancer this process has been overwhelmed. Drinking some might re-stimulate the process.

The book has many infrared images (thermographs) of people taken before and after drinking distilled water containing some double helix water. The effect is seen very quickly suggesting an immediate reduction in inflammation.

The book has 300 pages but the story only takes up 74 pages. The rest is pictures and scientific papers.

D & Y Publishing, Las Vegas 2009

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The following is from *Acupuncture Today* – April, 2010, Vol. 11, Issue 04

#### **Double-Helix Water For Migraine, Diabetes and Brain Tumor**

By Yin Lo, PHD

What do a 25-year-old male with migraines, an 80-year-old lady with diabetes and a doctor with a brain tumor have in common? To answer this question, let's look at a little experiment that was done recently.

We asked each of these three subjects to drink our medical water, which we now called double-helix water because it had stable water clusters shaped like a double helix

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# CANCER INFORMATION & SUPPORT SOCIETY NEWSLETTER

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## When cancer just goes away

William Coley was a young surgeon freshly graduated from Harvard when, after failing to save the life of a 17-year-old girl from cancer, he became obsessed with the disease and especially spontaneous remissions, those rare cases when cancer just mysteriously disappears.

But as he researched the medical literature, he realized they weren't so mysterious; they followed a pattern. The cancer patient had contracted a bacterial infection that induced a high fever, and subsequently, the cancer went away.

There was even a case on his own doorstep in New York. One day in the late 1890s, Coley paid a visit to Fred Stein, whose end-stage sarcoma disappeared after he suffered a bout of erysipelas, a severe bacterial skin infection.

Stein had had the tumor removed several times, but it kept recurring, and surgeons had given up on him, especially after the erysipelas infection.

Stein told Coley that the infection caused a raging fever after it had spread over his face and neck—where the cancer was. He suffered a second attack several weeks later, but then his tumor disappeared—and there he was, seven years later, alive and well to tell Coley his story.

Coley went back to Memorial Sloan-Kettering Hospital, as it is now called, and prepared a concoction from the erysipelas bacteria, which he injected directly into a patient's neck sarcoma. Within an hour, the patient developed chills, pains, nausea and a high fever of 105°F (40°C). The infection lasted 10 days, but by the second day, the tumor started to break down. It had completely disappeared in two weeks.

This was the start of years of clinical research where Coley would try different variations of bacteria, collectively known as MBV (mixed bacterial vaccine)—also called Coley's Toxins—on a range of cancers.

His overall success rate was around 10 percent for incurable or inoperable cancers, but his work was never accepted by his peers and largely became forgotten when new approaches such as radiotherapy were introduced.



**Dr William Coley**

William Bradley Coley (1862 – 1936) was an American bone surgeon and cancer Researcher. Research in immunology have led to a greater appreciation for his work in cancerimmunotherapy and his targeted therapy Coley's toxins.

### Free Psych-K & Emotion Code for CISS members

CISS members can receive Psych-K and Emotion Code to identify and change negative belief systems—free of charge. Ring the Office to try it.

### Supplements for CISS Members

Low Dose Naltrexone all strengths 1.5mg to 4.5mg  
100 compounded capsules (Doctor's prescription needed)  
Look up "Low Dose Naltrexone" Homepage  
Stabilised electrolytes of oxygen 50ml—\$15 (Chlorine Dioxide)  
Visionary Health Compounding Chemist (02) 4969 5081

### New Members September/October:

Erica Davis; Alan Hartl

### Donations to CISS September-November:

D.A \$50; R.C \$100; M.E. \$10; N.H. \$50;  
F.L \$50; A.M \$20; JM \$100; S.O. \$30; B.P \$50;

### DVDs for Sale from the CISS Office

CISS Seminar "Cancer & Hope - Survivors share their Lessons" are available for \$29.50 plus postage for members or \$39.50 + postage for non-members

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## OVERSEAS & LOCAL NEWS

### Overseas News

#### *Developing blood tests for cancer*

Those promoting breast cancer screening continue to ignore all the evidence about the futility of such screening. In a study by Nottingham University, researchers correctly identified 37% of 90 women who had breast cancer by finding those with auto-antibodies that signal the presence of a tumour. The researchers are planning a larger trial involving 800 patients.

The lead researcher claims that the auto-antibodies "can be detected up to five years before the tumour is overt clinically". A spokesperson from the British charity Breast Cancer Now described the test as "really promising". Researchers are hoping the test to be available within five years.

Hopefully enough researchers will understand before then that if mammography screening for breast cancer doesn't save any lives but only produces more than 30% overdiagnosis, significant overtreatment and unnecessary anxiety, they are only contributing to even more potential harm than good.

All of the randomised controlled trials run to compare different degrees of surgery for breast cancer and evaluating screening have shown that "getting it all" and "getting it early" don't have a significant effect on survival or mortality.

Rather they show that breast cancer screening (as with bowel, lung, prostate, ovarian and thyroid cancer screening), produces significant overdiagnosis and overtreatment, along with unnecessary anxiety for those overdiagnosed.



**Don Benjamin, Editor**

Breast cancer, like most other cancers shows all the signs of a systemic disease with the tumour only a symptom of an underlying disease. The only way of achieving success in such a situation, as has been shown in randomised controlled trials, is to remove the underlying cause(s) and support the body's own healing mechanisms.

As there has never been a randomised controlled trial held for any type of cancer to compare surgery to no surgery, the entire cancer industry is based on an unproven theory.

Those in the breast cancer screening industry, including those in Australia who still promote mammography screening, are the worst offenders of the Hippocratic oath: "First Do No Harm" because they are increasingly harming people without cancer.

### Local News

#### ***Preventing Overdiagnosis Conference in Sydney in December***

Three members of CISS will be repre-

sented at the 7<sup>th</sup> Annual Preventing Overdiagnosis Conference to be held in Sydney this year on 5-7 December at the University of Sydney:

- Michael Shirley will be among the 17 Keynote speakers. He will be talking about the harms from overdiagnosis and overtreatment of prostate cancer;
- As CISS' Research Director I will be giving a presentation highlighting the flaws in the US National Lung Cancer Screening Trial (NLST) of Low Dose (spiral) Computed Tomography (LDCT) that wrongly concluded that lung cancer screening saves lives;
- Dr Anita Adhitya, CISS' Research Project Manager, will be presenting a poster outlining CISS' Dr Laurence Cox Alternative Cancer Paradigm Project and what progress we have made so far.

This Conference of people, most of whom understand the principles of Evidence Based Medicine will be in stark contrast with most other medical conferences held throughout the world where researchers make unjustifiable claims about the efficacy of medical treatments.

#### ***CISS AGM on 30 November***

Please consider nominating for a position on the CISS Committee. In particular we need a Treasurer. The coming year will be an important one in determining if we are to survive. Three years ago CISS nearly closed as a result of falling membership and insufficient funds. Then we received a large bequest.

Earlier this year we again nearly ceased to exist as a result of an attempted takeover by a group trying to close down our research project. Join the Committee and give us your ideas.

## THE NEW YORKER



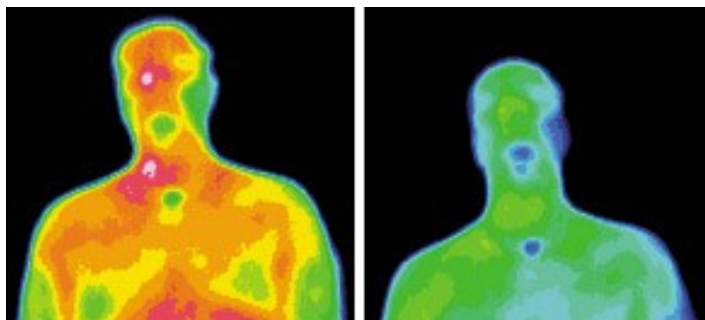
*Farewell from  
CISS*

*We offer our loving  
thoughts to the family and  
friends of those members  
who have died in recent  
months*

**Bill Bruce**

(continued from page 1)

We first took a complete set of infrared images. The subjects then drank 8 ounces of double-helix water. We asked them to hold each mouthful of water for a few seconds before swallowing so that the double-helix shaped water clusters could get absorbed directly to the bloodstream. Otherwise, it has to go through the stomach and intestines to reach the bloodstream. We waited 15 minutes then took another set of infrared images. We compared the before and after images. The color code for the infrared images is: white is the hottest, then red, yellow, green and blue, with the coldest in black. For each case we saw significant changes.



**Fig 1.** Infrared images for migraine patient before (left) and 15 minutes after (right) drinking double-helix water. The maximum temperature of the face before is 36.0C and the maximum temperature after is 35.6C.

The interesting thing about the woman with diabetes was that the two hottest spots and the two coldest spots correspond to the ST 4 and ST 9 acupoints on the stomach meridians. The maximum temperatures of these four acupoints all decreased significantly. It looked to me that these four acupoints were most relevant for an acupuncturist to needle in cases of diabetes.

The dramatic change of temperature always amazes me. The most perplexing question is why it is so omnipresent. First, in the broadest sense, the body is 70 percent water. Water is in every organ, tissue and cell. Any change in the water structure could affect any part of the body.

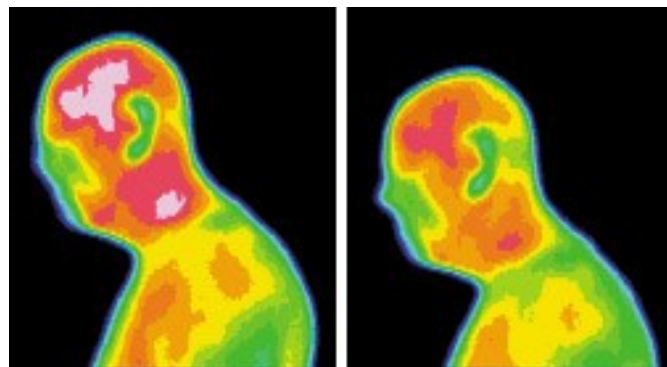
Second, the double-helix water contains stable water clusters that are shaped like DNA, which passes on from generation to generation. Double-helix water might be the precursor of DNA and have to do with why a biological entity is alive.



**Fig 2.** Infrared images for diabetes subject before (left) and 15 minutes after (right) drinking double-helix water. The maximum temperature of the face before is 36.2C and the maximum temperature after is 34.8C. This is a huge reduction in temperature.

Third, the concept of *yin* and *yang* is very fundamental. These stable water clusters have recently been found to have positive and negative charges. These are present in every atom, molecule and cell. Hence, the electric field emitting from the charges of double-helix water could easily affect the atoms, molecules, cells and organs in our body.

Beyond these broad considerations, let's look at the meridian system to see how these stable water clusters might work specifically to improve a person's health. Our hypothesis is that meridians are made up of these stable water clusters. Similar to the way magnets line up via the attractive force between their north and south poles: The north pole of the first magnet attracts the south pole of the second one. The north pole of the second magnet attracts the south pole of the third one, and so forth. Stable water clusters in the meridians line themselves up in similar fashion.



**Fig 3.** Infrared images for subject brain tumor before (left) and 15 minutes after (right) drinking double-helix water. The maximum temperature of the head before is 34.0C and the maximum temperature after is 33.5C. This is statistically significant.

If the stable water clusters are misaligned, the meridian will not function properly. *Qi* will not flow smoothly. An acupuncture needle inserted in the meridian will cause the muscle to restore the straight-line status of the meridian. *Qi* then flows smoothly and the body functions properly.

Another way of restoring the meridian to its proper function is to create another channel for *qi*. This can be done by adding additional channels of stable water clusters to bypass the blocked part of the meridian. Drinking double-helix water would allow these extra stable water clusters to do the repair job. The flow of *qi* will not be blocked and the body can function properly.

Drinking double-helix water could have the same effect as inserting acupuncture needles. A single acupuncture needle can treat hundreds of diseases. Since drinking double-helix water is equivalent to inserting acupuncture needles at the right points on the body, it could improve many different kinds of diseases. Double-helix water has additional advantages: It is not painful, it doesn't have any side effects, and it can be done by the patient at home.

We are currently looking for licensed medical practitioners to try this double-helix water on their patients with various health problems. Anyone who wants to try this, please contact [ideaclinic@yahoo.com](mailto:ideaclinic@yahoo.com). This experiment is important because it provides evidence that meridians are real.

## Enzyme therapy

Think you have an allergy? It might not be an allergy at all. The problem might lie in your digestion (or lack of it). "What I've seen is that some people will come in and say they have allergy symptoms, runny nose or a rash or something that may appear as an allergy, and in some cases they may simply be not digesting their food," says Dr Melisa Kuehn, a naturopath and BioSET\* practitioner.

"They have an inflammatory situation going on and something is setting it off. When they take systemic enzymes, that tends to help bring down the inflammation."

The result? The "allergy" goes away.

Enzyme therapy is a large part of the BioSET protocol, and some very specific blends are available from BioSET practitioners, such as a "nose and throat" preparation that specifically

deals with respiratory symptoms.

For the most part, however, enzyme therapy depends upon particular enzymes necessary to break down larger molecules into smaller ones, which are considered "digestive enzymes" when taken with food and "systemic" or "metabolic enzymes" when taken on an empty stomach.

Most popular enzyme blends are aimed at improving digestion, which is critical for the proper assimilation of nutrients from the food we eat. They also help prevent gas, bloating and acid indigestion. However, taken on an empty stomach, they become "little Pacmen," as Kuehn calls them, entering the circulatory system and gobbling up pathogens, viruses, toxins and undigested food particles, thus reducing the body's toxic load and lowering the immune response that is such a large part of

inflammatory conditions like fibromyalgia.

Because the human body produces fewer and fewer enzymes as we age, both Kuehn and Dr Debra Singer say they think most people over age 50 can benefit from taking enzymes for both digestion and systemic health.

Either follow the dosage on the bottle or, if you're working with a health practitioner who does muscle testing, have them test you to find the optimal dosage.

Typical enzyme formulas used for inflammatory conditions include:

Pancreatin: 800 mg  
 Amylase activity: 20,000 units  
 Lipase activity: 3,000 units  
 Protease activity: 20,000 units  
 Bromelain: 5 GDU  
 Papain: 2,000 TU  
 Trypsin: 4,500 USP units.

\* What is Bio-Energetic Sensitivity and Enzyme Therapy (**BioSET**) Therapy?

BioSET integrates a combination of philosophies and techniques of:

- Functional medicine
- Enzyme therapy

- Homeopathy
- Traditional Chinese Medicine
- Acupressure
- Chiropractic care
- Craniosacral therapy
- Acupuncture

- Applied immunology
- Integrative medicine nutrition

BioSET was developed over 25 years ago by Ellen Cutler, DC, a chiropractor who trained practitioners worldwide.

## Polio outbreak in Philippines caused by Vaccine

A polio outbreak in the Philippines—the first in over 20 years—has been caused by the vaccine, the World Health Organization (WHO) has confirmed.

The case of a three-year-old girl was caused by vaccine-derived poliovirus type 2, a joint statement by the WHO and UNICEF has said. The virus has also been detected in sewage in Manila, the nation's capital, and in the province of Lanao del Sur.

The weakened virus in vaccines replicates in children's stomachs before it is excreted. In rare cases, the virus can strengthen in regions where sanitation and hygiene are poor, the WHO has said.

Public confidence in vaccines in the Philippines is already at a low point after a dengue fever vaccine was blamed for the deaths of at least three children in 2017. The vaccination programme was halted when Sanofi,

the manufacturer, revealed the vaccine could increase the risk of severe dengue infection.

Despite these concerns, Philippine's health officials plan to ramp up the polio vaccination programme. They are launching a mass vaccination campaign in November for children under the age of five.

Associated Press, 19 October, 2019

FROM WDDTY 21 Oct 2019

## Heart Attacks

A heart attack isn't always sudden. Sometimes it can be gradual, happening over several hours—but it can be just as lethal.

Someone suffering an attack usually has up to two hours to get emergency treatment, but the key is in recognizing the symptoms of an attack, such as sudden breathlessness, discomfort, tiredness and pains, usually in the chest and arms.

But when these symptoms are occurring over a few hours, sufferers may not realize they're experiencing a heart attack, and gradual attacks don't usually

follow physical exertion—often the case with a sudden, acute, case—which can be another reason why people don't realize what's happening.

Researchers from the University of Illinois realized that gradual attacks are not being recognized when they examined 474 heart attack (myocardial infarction) cases that were treated in emergency wards.

Of the 261 cases of acute, or sudden, heart attack, 54 per cent had happened after physical exertion, and 207 patients had experienced

gradual symptoms that hadn't had an obvious cause. It was these sufferers in particular who needed to know they were suffering a heart attack, and to get to hospital immediately.

The optimum time to treat is up to two hours after an attack, and heart tissue is permanently damaged after six hours without treatment, the researchers say.

### References

European Journal of Cardiovascular Nursing, 2019; doi: 10.1177/1474515119871734)

FROM WDDTY 21 October 2019

## Natural Detox of Cancer (contd from September Newsletter)

In the last Newsletter we had an article called Natural Detox for Cancer. It listed some of the foods that can be used to clear the body of the toxins that have formed over the years due to several reasons and that are preventing recovery from cancer. As Candace Pert points out in her book *Molecules of Emotion*, stress causes toxins to be formed that can lead to diseases such as cancer. One theory about the cause of cancer is that these toxins are interfering in inter-cell communications; so when cells reproduce, they don't have enough information about what type of cell to produce – so the new cell fails to differentiate into, say, a skin cell, a liver cell or a lung cell, etc – this is what cancer is.

The article outlined the use of High quality animal protein, Dandelion greens and roots, Beets and beet greens and Lemon zest, rind and juice. The last ones are Chlorella, Chlorophyll, Broccoli sprouts, Milk thistle and Globe artichokes. (References in last newsletter)

### Chlorella

Chlorella is a green algae that has been found to inhibit the absorption of heavy metals including mercury, arsenic and lead into the bloodstream. It contains what are called phytochelating peptides that work like natural chelating agents. Chelation therapy is a process where EDTA (ethylenediaminetetraacetic acid) is injected into the bloodstream to re-move heavy metals and/or minerals from the body and is sometimes used, and largely misused, in natural medicine.

When a patient has leaky gut syndrome, they also have a permeable blood-brain barrier. Pushing chelation in people with compromised barrier function can cause major neurological issues.

However, foods like chlorella have shown evidence of having gentle metal chelation actions. Chlorella is very chemoprotective to the liver and has been found to induce cell death in liver cancer<sup>6</sup>

Chlorella grows in fresh water, and there are ways to grow your own. It is available in powdered forms, too, and makes a nice addition to a green drink or can be taken in water in lieu of wheatgrass shots (which we do not recommend due to the toxicity of cereal grains in any form).

Lastly, chlorella has been found to naturally detox radiation. The one caveat with chlorella, and also with chlorophyll is that they are both high in copper, so for people who have angiogenesis (actively growing cancer) and/or high copper levels, these two should be avoided.

### Chlorophyll

Chlorophyll is the green pigment found in plants and algae that absorbs sunlight and uses its energy to synthesize carbohydrates from carbon dioxide and water in order to grow. In a similar way, it is able to bind and "trap" toxins in the gut, preventing their absorption and encouraging elimination.

In animal models, chlorophyll was found to lower the bioavailability and accelerate the excretion of several environmental carcinogens, including benzene, and also offered protection from radiation.

The toxin-trapping abilities of chlorophyll were also demonstrated in a human trial of residents of Qidong, China, an area with high rates of liver cancer caused by exposure to aflatoxin, a carcinogen from mould.

Among the 180 people who took 100 milligrams of chlorophyll three times daily, urinary levels of DNA-aflatoxin conjugates (a marker for DNA mutation) went down 55 percent when compared with untreated people<sup>7</sup>

The best food sources of chlorophyll include all leafy vegetables, particularly organic spinach, parsley, and watercress.

### Broccoli sprouts

Broccoli sprouts are members of the cruciferous vegetable family and long hailed for their ability to promote detox on several levels, including enhancing the body's ability to remove pollutants. We also recommend other cruciferous vegetables, including broccoli itself, cauliflower and Brussels sprouts, all of which are highly supportive of liver detoxification.

Broccoli sprouts, though, get the gold star. In a randomized controlled trial of approximately 300 Chinese adults, those consuming a beverage made with broccoli sprouts every day for three months had increased excretion rates of two known carcinogens: benzene and acrolein.<sup>8</sup>

The rate of excretion of benzene increased by as much as 61 percent over the 12-week study period. We strongly support adding broccoli sprouts to your daily diet, especially if you live near an airport or gasoline station. These are also

easy to grow at home with a sprouting kit.

### Milk thistle

This sharply spiked edible plant with bright pink flowers maybe poisonous to the touch, but it's powerful medicine for the liver. After careful harvest and spike removal, the roots can actually be eaten fresh.

Its potent antioxidant activity has supportive effects on phase 1 detox by protecting the liver from chemical damage. Additionally, because it inhibits depletion of the liver's stores of glutathione, it is highly beneficial for phase 2 detox as well. Milk thistle has over a dozen powerful anticancer effects beyond liver support, including reducing cancer cell growth and inhibiting inflammation.

Because milk thistle extracts exert such powerful effects on both phases of liver detox, there is conflicting thought about their use during chemotherapy, yet many oncology nutrition experts state that milk thistle will not increase liver clearance of chemotherapeutic drugs and does not blunt their effectiveness. It can be taken fresh or as a tea and grows throughout the US, UK and Europe.

### Globe artichokes

These vegetables are the edible flower bud of a plant from the thistle family, *Cynara scolymus*.

They have a folk-medicine history of successfully treating liver diseases. More scientifically, artichokes contain caffeoylquinic acids, shown to have both regenerative and protective effects on the liver.

Artichokes also promote the flow of bile and fat to and from the liver, facilitating a decongesting response. The powerful polyphenol-type antioxidants found in artichokes can contribute to the prevention and management of prostate cancer, breast cancer and leukemia.

Studies have found that the antioxidants rutin, quercetin and gallic acid, all found in the edible portions of the artichoke leaf, are able to induce the death of cancer cells and reduce their proliferation<sup>9</sup>.

They make an excellent stand-alone low-carb, high-fat dinner if the leaves are dipped into mayonnaise, oils, pesto or organ meat-based sauces.

FROM: WDDTY August 2019

## Bruce Lipton's October 2019 Newsletter

**Hello Dear Friends, Cultural Creatives and Seekers Everywhere,**

**"Give me a child for the first seven years, and I'll give you the man."**

Francis Xavier (1506-1552), co-founder Jesuits

For over 400 years, the Jesuits have offered this popular adage to their community. While many people are aware of this saying, I believe that few are aware of its meaning. Basically, the Jesuits were aware of something that science has only recognized in the last few years. This saying expresses a simple fact; between the last trimester of pregnancy and its' first seven years of life, a child's brain is predominantly operating at a *theta*, a low vibration below that of consciousness.

A brain is an organic "computer," simply a profoundly advanced *information processor*. By the last trimester of pregnancy, a child's brain is endowed with an operating system. However, while a computer can be booted-up with its operating system, it is still not functional. To be useful, programs must be downloaded into the system. For example, if you want to use a computer to write, to draw, or to create a spreadsheet, one first needs to install programs before you can use the computer. The programs essentially provide the computer with "character."

Once the programs are installed into the hard drive, we can use the keyboard/mouse to provide our input in creating files and documents. Some programs actually operate automatically in the background while we are entering our creative data into other programs.

In comparing the brain to a computer,

the hard drive is tantamount to the *subconscious mind* in that both require downloaded programs to carry out their functions. In contrast, the *conscious mind* is represented by the keyboard; this where the "operator" can introduce data and ideas into the system. Simply, the subconscious "hard drive" possesses **read-only** programs, while the conscious mind, can introduce new information through the keyboard that provides the system with a read-write capacity.

When operating from the conscious mind, we are creators of our lives. However, when we operate through the subconscious mind, our lives are shaped by the raw downloaded programs we acquired in the first seven years of our lives. Science has now recognized that we only use the creative conscious mind about 5% of the day. For 95% of our lives, the conscious mind disconnects from controlling our behavior while its attention is redirected inwards in thought.

This insight is profound because it reveals that we are not creating the lives we desire but are **unconsciously** (through the **subconscious mind**) manifesting lives that are coherent with the beliefs we downloaded as children. Since up to 70% of the downloaded beliefs acquired before age 7 are disempowering, self-sabotaging, or limiting, we experience stress from the programs that undermine our conscious mind's wishes, desires and aspirations.

Yes, the Jesuits were right that our lives will be controlled by the developmental programming that was unconsciously downloaded into our minds by age seven. This insight was

understood over 400 years ago and by those that shape our civilization. While the programming originally came from the edicts of the Church centuries ago, civilization was under the leadership of religious dogma. After Darwin, the knowledge of science displaced the control of the Church.

Currently, we are now programmed by beliefs of the conventional scientific community. Beliefs that further instill the notion of limitation and disempowerment. For example, the public has been led to believe that our lives are preprogrammed in our genes, that our fate is determined by heredity. Since as far as we know, we did not pick our genes, we cannot change our genes if we don't like the characters they encode, AND, since we have been programmed by the belief that genes turn-on-and-off by themselves, we perceive ourselves as victims of our genome. Outright disempowerment!

As civilization is experiencing an evolutionary upheaval, to thrive into the future, we must now "wake-up" and take back our power, for ourselves and the rest of civilization.

As has been emphasized in the story of *The Biology of Belief*, just like for single cells, the character of our lives is not determined by our genes, but by our responses to the environmental signals that propel our lives. When we operate from the conscious mind we are, in fact, creators of our lives. If we heed this wake-up message we can easily turn this ship around and move into the future by collectively creating Heaven-on-Earth!

With Love and Light,  
Bruce

(continued from page 9)

were the National Health & Medical Research Council's (NH&MRC) attempt to discredit homeopathy, first by suppressing a report that suggested that homeopathy worked for some conditions, and then by using the same technique as that used in the UK of removing trials showing homeopathy worked from those to be reviewed for efficacy. This resulted in a Senate Inquiry in Australia. Removing most natural therapies from coverage by private health funds appears to be part of this campaign of suppressing competition with the medical profession.

**Website:** CISS has continue to update its website.

**Publicity:** Don Benjamin sought publicity for CISS with letters submitted on several occasions on issues raised in the media. One letter on brain cancer surgery was published in June 2019 in the Sun-Herald.

**New staff:** As mentioned above CISS recruited three new members of staff in July-September 2018 but dismissed them in April 2019. A new Office Manager was recruited in May 2019.

**CISS Branches:** The Central Coast Branch of CISS continues to function with regular monthly meetings.

**Accounts & Auditing:** The Committee wishes to acknowledge the help of Avinash Jhawar and his brother Anand from Proficient Accounting & Taxation Services in finalising and auditing CISS' annual accounts.

Extracts from our Financial Statements are on pages 10 and 11. The full audited Financial Statement for the year ended 30 June 2019 will be presented for approval at the Annual General Meeting on Saturday 30 November at 2.00pm at the CISS Office.

## The end of chemotherapy?

By Bryan Hubbard

**The common cold virus is killing cancer in just one week, and the therapy — virotherapy — could be replacing chemo within the next three years**

Are we finally in the end-days of chemotherapy? If we are, the toxic kill-or-cure agent will have been toppled by the common cold - and it could all happen within the next few years. By then, the cold virus may well have become the standard treatment to beat a range of cancers, many of which are currently considered untreatable.

Virotherapy - which uses adapted viruses and bacteria to treat cancer and diseases of the central nervous system - has been on the medical radar for more than a century, but it's suddenly taken centre stage.

Just in the past few months, researchers from the UK's University of Surrey have reported using the common cold virus, coxsackievirus, to treat 15 cases of bladder cancer, and found it can eradicate the tumours in just one week.

The patients were given an infusion of the virus directly into the diseased bladder. The viral infection caused the bladder to become inflamed, and this triggered an immune response that killed the cancer cells<sup>1</sup>

"The virus gets into the cancer and replicates, like a little factory of viruses. It heats up the tumour environment and is very specific in targeting the cancer. It had the least toxicity I have seen in years," said lead researcher Professor Hardev Pandha<sup>2</sup>.

When Pandha and his team examined tissue samples from the bladders a week after the infusion, they discovered that the virus had not attacked healthy cells - unlike chemotherapy, which kills all living cells - but had infected only the cancerous cells, causing them to rupture and die. The cancer was reduced dramatically in most of the samples, and in one, it had completely disappeared.

"Reduction of tumour burden and increased cancer cell death was observed in all patients and removed all trace of the disease in one patient following just one week of treatment, showing its potential effectiveness. Notably no significant side-effects were observed in any patient," Pandha declared.

Urine samples from the patients also

contained cancer cells that were being "shed," which suggests the therapy is ongoing and continues to kill cancer cells as they begin to develop.

The virus could become "a universal agent" to treat all cancers within three years, the researchers say. It's also being trialed on cases of breast, bowel and lung cancers, and as a treatment for a range of skin diseases.

### Getting to market

Virotherapy could "transform the way we treat cancer and signal a move away from more established treatments such as chemotherapy," said Dr Nicola Annels, a research fellow at the university.

Early versions of cancer-fighting oncolytic virotherapy are already on the market. In 2005, China's drug regulator was the first to approve an oncolytic virus, H10 1, marketed as Oncorine, which is a genetically modified virus that treats head and neck cancers.

The US Food and Drug Administration followed 10 years later when it approved T - VEC, a modified form of the herpes virus, to treat the skin cancer melanoma. Regulators in Australia and across Europe gave it their assent a year later.

It's all been a long time coming, ever since the early 1700s, in fact, when physicians noted that cancer went into remission - and sometimes was being completely cured - when patients developed an infection.

Dr William Coley, a New York surgeon, pioneered the use of bacterial vaccinations to treat inoperable cancers until his death in 1936, (see p 2) but then virotherapy took a back seat to newer therapies such as radiotherapy and, after the Second World War, chemotherapy.

The last few years have seen a renaissance in virotherapy research, and although the Surrey researchers have recorded the most significant breakthrough, others have not been far behind. In one research study, the herpes simplex virus, which can cause cold sores and a sore throat, was harnessed to kill neuroendocrine cancer (NEC) cells in laboratory tests.

NEC affects cells in the stomach, bowel and lungs. Surgery to remove the tumour is the usual approach, but researchers from the German Cancer Research Centre say virotherapy is a "promising" new way to treat it<sup>3</sup>.

Colon cancer may also be a target for virotherapy. Researchers at Duke University Medical Center say viruses are a natural delivery mechanism that can target cells, and their focus has been on treating colon cancer, or colorectal carcinoma<sup>4</sup>.

### Measles, not all bad

The measles virus - which the world wants to eradicate - has killed glioblastoma cells, a very aggressive and usually lethal type of brain tumour.

Researchers from the University Hospital Tübingen in Germany have tested modified measles viruses on cell lines of glioblastoma in the laboratory and discovered, as the Surrey researchers found, it caused inflammation that eventually killed the cells<sup>5</sup>.

Doctors at the Mayo Clinic experimented with the measles virus just a few years earlier, using it to treat a patient with end-stage myeloma, a cancer of the blood.

The 49-year-old woman saw the Mayo as a last resort after enduring chemotherapy and two stem cell transplants; by the time of her appointment, she had a golf ball-sized tumour on her head and probably just weeks to live. The Mayo team engineered, or genetically modified, the measles virus strain, and gave the woman a dose that was enough to vaccinate 10 million people.

The response was almost immediate; within five minutes, the doctors say she developed a splitting headache and a temperature of 105°F, before she started vomiting and shaking. The large tumour disappeared inside of 36 hours, and all signs of cancer had disappeared from her body within two weeks.

The virus makes cancer cells join together and explode, explained Mayo Clinic researcher Dr Angela Dispenzieri. It also stimulates the immune system to detect any recurring cancer cells and mop them up<sup>6</sup>.

I think we succeeded because we pushed the dose higher than others have pushed it,' said fellow Mayo researcher Dr Stephen Russell. "The amount of virus that's in the bloodstream really is the driver of how much gets into the tumours." ...

### Plants too

But it's not only the common, garden-variety cold and measles viruses that

(continued on page 12)



## Convenor's Report for Year Ending 30 June 2019

**Changes on Committee:** At the AGM on 24 November 2018 Chris Bertinshaw was elected Convenor, Raelene Dojcinovic Vice Convenor, Leonie Batchelor Secretary, James Zhan Treasurer and Selwyn Garwell Committee member.

At the Extraordinary General Meeting held on 30 March 2019 Selwyn Garwell was elected Convenor and Leonie Batchelor Secretary with Frank & Maxine Hewstone, Jennie Burke, Lynne Maunder and Elizabeth Lyons elected to the Committee. James Zhan did not renominate for Treasurer and this position remained vacant. Raelene Dojcinovic was later coopted as Vice Convenor.

The Committee elected in 2017 had accepted a proposal by Acting CEO Peter Daale that vacancies on the Committee be filled by co-opting people with special skills. It was accordingly suggested that Chris Bertinshaw be supported for the position of Convenor.

In July – September 2018 CISS appointed a new Office Manager and two Social Media specialists. In February 2019 Don Benjamin, who had handed over his General Manager duties to the Office Manager, who became Operations Manager, reported to the Committee that the new Convenor had breached the CISS Constitution on at least a dozen occasions before even holding the first Committee Meeting since his election. Don resigned as Research Director. Three of the Committee initiated a No Confidence motion in the new Convenor. The motion was lost and the three Committee members left the meeting leaving only two on the Committee – meaning no quorum to make any further decisions.

The Operations Manager removed Don Benjamin as signatory to the CISS Accounts. The new Convenor, whose membership of the Society had not been accepted by the Committee, ignored the Constitution and proceeded to authorise expenditure and initiated legal actions to have the other Committee members expelled from the Committee and from the Society, incurring legal costs of over \$43,000.

Secretary Leonie Batchelor called an Extraordinary General Meeting of members for 30 March at which a new Committee was elected that removed the Convenor, Acting CEO, Operations Manager and Social Media specialists and reappointed Don Benjamin as General Manager and Research Director.

To avoid a costly court case the new Committee agreed to Mediation at which the Bertinshaw group agreed to take no further action on condition that CISS paid their legal costs of \$43,000.

**Complaint to AFCA re Bank Australia:** None of the above could have occurred without the agreement of Bank Australia who in error arbitrarily gave the Operations Manager the authority to remove signatories and thereby control CISS' funds without the need for approval by the Committee. CISS therefore lodged a complaint to the Australian Financial Complaints Authority regarding Bank Australia's actions. Their decision was due at the time of writing.

**Membership:** During the past year the membership has remained about the same at 152.

**Office Manager:** In July 2018 when a new Office Manager was appointed Susie Benjamin provided the necessary training and hand-over. A new Office Manager, Claudine Habib was recruited in May 2019 and Susie

Benjamin again provided training.

**Support Services:** From September 2018 Susi Benjamin was appointed Information & Support Counsellor and later Senior Counsellor, providing emotional support to members with cancer.

**Office hours:** Due to additional funds available CISS has gradually extended its hours to opening four days each week. (In October it was increased to 5 days each week)

**Research:** Don Benjamin continued as General Manager and Research Director until the end of his 3-year contract as GM/RD in December 2018 after which he focussed on his role as Research Director to lead CISS' cancer research project with Dr Anita Adhitya, who was recruited in July 2017 as Research Project Manager. He resigned his position in February 2019 and was reinstated in April 2019 (see above). Following injuries to Dr Adhitya in two motor vehicle incidents the project has been severely reduced in hours. Both Don and Anita will be making presentations to the seventh annual Preventing Overdiagnosis Conference to be held in Sydney in December this year.

**Operating deficit:** The year ended with a deficit of \$382,717 compared with a deficit of \$143,333 last year. Overall expenses rose by ~\$185,103 due mainly to legal fees of \$77,642, an increase of ~\$81,202 in payment to staff and \$8,615 to consultants. Income fell by \$54,282 mainly due to the reduced income from the share portfolio that fell from \$680,295 to \$362,332 but continues to earn ~7.5% pa.

**Newsletter:** Expenditure on the Newsletters is steady at about ~\$550 per issue including postage. Focus Print group continued to handle the printing and posting of the Newsletter using a computerised membership list. Of the 152 members about 35 receive their newsletters via email.

**Overseas developments:** There has been continued pressures from the medical profession to prevent any competition, especially from those questioning their scientific evidence. One notable example was the removal of Dr Peter Gøtzsche from the international Cochrane Group based in the UK due to his criticism of the growing influence of drug companies and the inappropriate use of psychotic drugs by GPs and the psychiatric profession. This was triggered by his exposure of a biased Cochrane review of the human papillomavirus vaccine (HPV), which understated the side effects of this vaccine. Gøtzsche had also revealed that a majority of the reviewers had worked for a drug company, at least one for the company promoting the HPV vaccine – in breach of Cochrane Policy.

**Local Developments:** As mentioned above there was an attempt to take over control of CISS. One possible explanation is that the same forces that removed Gøtzsche from Cochrane were involve with removing Don Benjamin and closing down the Research Project that would be likely to be critical of the conventional cancer paradigm. It is also possible that the merger of the former Cancer Support Association of WA (CSA) with SolarisCare in 2016 might have been part of a similar process. All three involved planning between the relevant CEO and the charity's President/Convenor. Other recent developments

(continued on page 7)

**Extracts from the Financial Statement for the Year Ended 30th June 2019**

**CANCER INFORMATION & SUPPORT SOCIETY INCORPORATED**

The deficit for the Society for the financial year was **\$382,717**

**Notes to and Forming Part of Accounts for the Year Ended 30 June 2019**

<b>2. CASH</b>	<b>2019</b>	<b>2018</b>
Cash at LCU/NAB	50538	37
Cash at Bank Aust	746	19,069
Special investments: Northhaven, ING	354,943	672,906
Cash on Hand (incl petty cash)	<u>1835</u>	<u>1,539</u>
	<u>408,062</u>	<u>693,551</u>

**7. INCORPORATED ASSOCIATION**

On the 21st of February 1996 the Society was incorporated in New South Wales under the NSW Associations Incorporation Act 1984. At 30th June 2018 there were 152 members of the Society.

**8. OPERATING SURPLUS/DEFICIT**

has been determined after:

<b>CREDITING REVENUE</b>	<b>2019</b>	<b>2018</b>
Sales Revenue	709	813
Donations	1,884	34,223
Membership Subscriptions	5,771	5,518
Interest earned	419	2,631
Income from investments	29,720.	52,619
Rent Received	650	1,675
Sundry Income	<u>90</u>	<u>10</u>
Inflow of Funds from Operations	<u>39,243</u>	<u>97,489</u>

**CHARGING AS EXPENSE**

Auditor's Remuneration	15910	1728
Accounts assistance (MYOB)*	0	0
Plant and Equipment	0	0

**CANCER INFORMATION & SUPPORT SOCIETY INCORPORATED**

<b>CURRENT ASSETS</b>	<b>2019</b>	<b>2018</b>
Cash	53,119	20,645
Investments/receivables	362,332	680,295
Inventories	766	903
Unrealised Investment Income/Tax credits	0	13,872
Trade debtors	0	0.
Total Current Assets	<u>416,217</u>	<u>715,715</u>

**NON-CURRENT ASSETS**

Property Plant & Equipment	\$300,000	\$129,381
Office Furniture equipment, -deprech	4,576	6,252
Deposits -keys, remote control, other	<u>860</u>	<u>3,206</u>
Total Non-Current Assets	<u>\$305,436</u>	<u>\$138,840</u>

**TOTAL ASSETS**

	<u>721,654</u>	<u>854,555</u>
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**CURRENT LIABILITIES**

Credit Card P Daale	270	801
Superannuation payable	0	1050
PAYG Withholding Payable	0	9,139
Salary sacrifice Rent deduct	0	850
Refundable deposit - Remote control	<u>110</u>	<u>110</u>

**TOTAL LIABILITIES**

	<u>380</u>	<u>11,950</u>
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**NET ASSETS**

	<u>721,274</u>	<u>842,604</u>
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**MEMBERS EQUITY**

Retained earnings	842,605	
Current year earnings	-382,717	<u>842,604</u>
Increase in value of premises	<u>170,619</u>	
Accumulated Surplus	<u>630,506</u>	

**TOTAL MEMBERS' EQUITY**

	<u>630,506</u>	<u>842,604</u>
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# Extracts from the Financial Statement for the Year Ended 30th June 2019

## CANCER INFORMATION & SUPPORT SOCIETY INCORPORATED

## CANCER INFORMATION & SUPPORT SOCIETY INCORPORATED

### REVENUE ACCOUNT FOR THE YEAR ENDED 30th JUNE 2019

### DIVISIONAL TRADING ACCOUNT FOR THE YEAR ENDED 30th JUNE 2019

INCOME	2019	2018
Gross Profit on Trading	709	341
Donations incl. bequest	1,884	34,223
Membership Subscriptions	5,771	5,518
Interest Received	419	2,631
Rent received - office/car space	650	1,675
Investment Income/Incr M'ket value	33,214	52,619
Sundry Income	90	11
<b>Total Income</b>	<b><u>42,737</u></b>	<b><u>97,018</u></b>

HANDBOOKS	2019	2018
Sales	0	-6
<b>DVDS</b>		
Sales	0	0
<b>VITAMINS, SUPPLEMENTS AND ACCESSORIES</b>		
Sales	709	819
<b>JUICERS</b>		
Sales	0	0

### TRADING ACCOUNT FOR THE YEAR ENDED 30th JUNE 2019

EXPENSES	2019	2018
Depreciation	8,918	3,842
Investment costs	9,628	11,003
Audit/Bookkeeping Fees	15,910	1,728
Bank Charges/Investment costs	419	740
Subscriptions	1,015	103
Sundry Expenses (incl donation and refunds)	2,660	0
Insurance	8,972	1,426
Legal fees	80,207	0
Electricity	1,149	1,342
Newsletter & other printing costs	2,126	2,460
Consultancies	36,054	27,439
Rent	7,039	9,386
Postage & Stationery	4,123	2,358
Repairs & maintenance	751	111
Computer Maintenance & services	6,843	2,359
Social media & Marketing	364	
Website development and services	594	15,148
Salaries/Wages/Super'n/W Comp'n	232,254	146,896
Strata Plan levies	2,361	1,299
Council rates	1,196	1,169
Supplies	509	7,590
Telephone	2,304	3,889
Water	62	62
<b>Total Expenses</b>	<b><u>425,454</u></b>	<b><u>240,350</u></b>
Operating Surplus/(-Deficit)	<b><u>-382,717</u></b>	<b><u>-143,333</u></b>

SALES	709	813
Purchases, stock adjustment	0	471
<b>GROSS PROFIT ON TRADING*</b>	<b><u>709</u></b>	<b><u>341</u></b>

### Income from Northhaven Investment Portfolio

Gross Interest	1,155	2,000
Dividends-Unfranked	154	280
Dividends-Franked	10,817	14,120
Distributions-Unfranked	1,310	1,252
Distributions-Franked	688	2,715
Distributions-Interest	1,186	1,532
Distributions-Other Income	319	366
Capital Gains Income	2,419	8,982
Assessable Foreign Income	1,121	2,622
Non-assessable Amounts	2,354	471
Unallocated Income	46	600
Brokerage Rebate Income		533
Unrealised Residual Income		2,146
Change in Market Value of Investments		15,000
<b>Total</b>	<b><u>21,570</u></b>	<b><u>52,619</u></b>

## What's Available from the CISS Office?

### Branches of CISS

#### NSW

##### CISS CENTRAL COAST

The Central Coast Branch holds a general meeting on the third Saturday of each month in June to August at the Arts & Crafts Centre, Henry Kendall Gardens, Bellbird Drive (off Maidens Brush Rd, Wyoming at 2pm with a guest speaker and sharing of information and common experiences. An excellent library is available to members. All are welcome. For further information contact Mary Sponberg-Macready on (02) 4322 8767.

### CANCER SUPPORT GROUPS

#### NSW

##### ACTIVE WOMEN TOUCHED BY CANCER & CELEBRATING LIFE

Meets at Balgowlah RSL, Ethel St, Seaforth on 2nd Tuesday of the Month at 7pm. \$5 donation. Guest speakers. Contact Robin 9938 6128 or Kate 8902 0196

##### CANHELP CANCER SUPPORT GROUP

Based on the Ian Gawler approach. Meets 1st & 3rd Tuesday each month from 6.00-8.00pm at Level 3, 280 Pitt St. Enjoy meditation, sharing and support. Ring Sue Saxelby 0408 442 030 or just turn up.

##### HILLVIEW COMMUNITY SUPPORT GROUP

Meets each Tuesday 1.30-3.30pm at 1334 Pacific Highway Turrumurra. Includes a meditation. No charge. Phone 9449 9144 and ask for Patricia Krolik.

##### NAMBUCCA VALLEY SUPPORT GROUP

Meets every Wednesday, Agnes Grant Centre, Macksville & District Hospital, 11 am – 1 pm. Phone 6568 2677.

##### NEWCASTLE CANCER SUPPORT GROUP

For information contact Make Today Count, 44 Dudley Road, Charlestown, NSW 2290. Phone 4943 8462.

**CHAMPION Juicer** - \$575 (\$615 non-members)

**OSCAR Juicer** - \$485

**Enema Kits:** \$12.00

**Water Purifier:** Reverse Osmosis - \$495. Other models avail.

**DVD:** CISS 2007 Seminar : Cancer & Hope

\$29.50 plus \$5 postage

Prices are subject to change. Items can be posted to you. There is a \$15.00 postage/packing fee for standard articles, \$16-\$18 for country and interstate, \$18 Express Post. CISS Handbooks \$13.50, \$15 including postage.

#### .NSW (Continued

##### QUEST FOR LIFE FOUNDATION

Based on 30 years of delivering exceptional retreat experiences for people living with cancer, our 5 day residential retreats deliver the latest research on health, healing and neuroscience. Contact 02 4883 6599 or visit [www.questforlife.com.au](http://www.questforlife.com.au)

##### SYDNEY ADVENTIST HOSPITAL CANCER SUPPORT CENTRE

Meets each Wednesday 10-12 noon at Jacaranda Lodge, 185 Fox Valley Rd, Wairoonga. Also special support groups for different cancer types and for carers. Contact Nerolie on 9487 9061.

#### VICTORIA

##### CANCER NATURAL THERAPY FOUNDATION

Support group meets on Tuesday nights at 7pm at 531 Elizabeth Dr, Sunbury, Victoria 3429. Meeting includes discussion, relaxation therapy and Reiki Healing. Certified organic produce available these nights. The Foundation operates a resource library, workshops and guest speaker program. Personal Counselling available. Contact Sandra Givca Maqueda (03) 9740 9921; mobile 0411 100 947.

##### GAWLER FOUNDATION

Learn how to create wellness in the face of cancer at our 5-day and 10-day Cancer Retreats in Victoria's beautiful Yarra Valley. Call 1300 651 211 or visit [www.gawler.org](http://www.gawler.org) to learn more.

#### WESTERN AUSTRALIA

Solaris Cancer Care (formerly Cancer Support Association of WA)

Cancer Wellness Centre, 80 Railway St Cottesloe WA 6011. Counselling hours: Tues-Thurs. Phone (08) 9384 3544. The CSAWA Inc is a non profit organisation with the primary objective to provide support services, information and self-help activities in a safe and caring environment for people affected by cancer, to enhance their emotional, physical, spiritual and mental well being. Emphasis on self-help and development, teaching life skills that enable individuals to better cope with the fear and uncertainty of a cancer diagnosis.

Website: <https://solariscancercare.org.au/page/support/support-services>

(contined from page 8)

can be employed. Viruses from plants, such as cowpea mosaic virus, and from bacteria - already used in phage therapy - could also be cancer fighters. These viruses act as a delivery system after their capsid - the protein shell that wraps around the virus - has been modified, say researchers at Rice University in Houston<sup>7</sup>.

And they attack the Achilles' heel of the cancer cells. As they develop, cancer cells lose their ability to protect themselves from viral infection, explained Grant McFadden at Arizona State University.

"The challenge is picking the right virus, deciding how to arm it and how to deliver it," he said. With some cancers, an injection can go directly into the tumour, but others are inaccessible or even spread through-out the body<sup>8</sup>.

In most cases, the infection also induces a fever, and fever seems to be the common factor in many cases of

spontaneous remission when cancer mysteriously disappears. Most of the remissions that Coley researched resulted from a bacterial infection, although researchers are showing that viruses can have the same healing effects - and against our most mortal enemy.

See also "When cancer just goes away" on page 2.

#### REFERENCES

- 1 Clin Cancer Res, 2019; doi: 10.1158/1078-0432.CCR-18-4022
- 2 *Daily Telegraph*, July 4, 2019
- 3 *Neuroendocrinology*, 2019 Jun 13; doi: 10.1159/000500159
- 4 *Expert Opin Biol Ther*, 2005; 5:1627-33
- 5 *Mol Ther Oncolytics*, 2018; 12:147-61
- 6 *Mayo Clin Proc*, 2014; 789: 926-33
- 7 *Wiley Interdiscip Rev Nanomed Nanobiotechnol*, 2019;11: e1545
- 8 *Live Science*, November 18, 2018